

## **Perceptions of a therapist using animal assisted therapy in an analogue brochure study: Is there a halo effect?**

Chris Blazina<sup>1</sup> & Lori Kogan<sup>2</sup>

*<sup>1</sup>Independent researcher in private practice, Albuquerque NM*

*<sup>2</sup>Colorado State University*

Animal assisted therapy (AAT) involves the integration of an animal (usually a dog or horse) in a clinical setting as part of treatment for a broad range of presenting problems involving emotional distress, trauma, and stress related issues. The use of ATT by therapists is on the rise. Our analogue study was designed to explore the impact a counselor's purported use of ATT had on how they were perceived as measured by the Counselor Rating Form–Short Version (CRF-S). That is, would subjects who examined a brochure about counseling services provided by a factitious therapist rate the therapist more positively when it was stated, “Dr. Smith” provided animal assisted therapy and was accompanied by a picture of the therapy dog present in his/her office. To explore these hypotheses, two therapy brochures were developed one with and without the mention of the therapist's integration of ATT and accompanying therapy dog. The results from our analogue brochure study found that a therapist described as utilizing AAT (which was punctuated by having a picture of the therapy dog in the office) was perceived as significantly more attractive and trustworthy, but not different in terms of being more expert-like. Therapists need to pay special attention to how clients may experience the therapist-therapy dog dyad over the course of treatment. There may be a potential halo effect that is bestowed on either the therapy dog or therapist, and/or on the team consisting of the therapeutic dyad. Implications for research and clinical practice are discussed.

Keywords: Animal Assisted therapy; Counselor Rating Form; Human-animal interaction.

Dating back to ancient Egypt and Greece, there is a long history of incorporating animals into rituals of health and healing (Coren, 2010; Serpell, 2010; 1993). More recently, Sigmund Freud's Chow dogs were omnipresent in his consulting room (Molnar, 1996; Roth, 2005). It was suggested that the dogs were originally in the office for Freud's benefit, to help him feel more relaxed but later recognized that his patients also seemed to value the dogs' presence (Coren, 2010). Child psychologist, Boris Levinson, however, is credited as the father of modern animal assisted therapy (AAT) (Fine, 2015). Many of the inhibited and uncommunicative children in Levinson's clinical practice responded positively to his dog Jingles (Levinson, 1969). Levinson discovered this dynamic by chance. One day he left Jingles alone with a client when he stepped out of the office for a few moments. Upon his return, Levinson noted that the previously withdrawn child now interacted enthusiastically with the dog, setting the stage for effective treatment. This was the beginning of animal assisted therapy in the outpatient psychotherapy setting. Since that time the practice of AAT within counseling has grown substantially within the field. Those wanting to understand more about AAT practice have turned to leaders such as Aubrey Fine's "Handbook of Animal Assisted Therapy" for guidelines regarding best practice (see Fine, 2015).

Animal assisted therapy (AAT) involves the integration of an animal (usually a dog or horse) in a clinical setting in order to help treat a variety of presenting problems involving emotion distress and stress related issues (Fine, 2015). Animal assisted therapy has been utilized in numerous clinical scenarios including clients with cognitive

disorders, autism, and those in need of social skills building. In AAT, the animal acts as a sort of co-therapist helping the client build rapport with the counselor and/or is incorporated as part of a targeted clinical intervention. Animal Assisted Activities (AAA) is a related modality that utilizes a therapy animal and handler for more informal therapeutic or recreational goals. Examples include making visits to a nursing home or a children's ward at a hospital. One of the key differences between AAT and AAA is that the former is a goal-directed clinical intervention with specifically delineated outcome goals as integrated by a therapist with specific AAT training. Therapists that practice AAT and AAA are on the rise in traditional and non-traditional counseling and school settings (Fine, 2015). The focus for this study involves perceptions of counselors who integrate AAT into their clinical practice.

There are several interrelated rationales for the use of AAT as a means to impact psychological well-being. Biologist E.O. Wilson (1986) proposed the 'Biophilia hypothesis' arguing that humans are instinctively drawn to living organisms and natural settings. Likewise, ecopsychology would later argue for the importance of nature's influence on humans' physical and mental well-being (Roszak, 1992; Roszak, Gomes, & Kanner, 1995). Ecopsychology attempts to scientifically understand nature's positive psychological impact on human beings. From an ecopsychology perspective, a setting, especially a therapeutic one that incorporates elements of the natural world, can create a foundation for a healthy and potentially healing environment. Likewise, research has demonstrated the effects of bringing nature indoors through studies that examined how people are soothed by

looking at pictures of landscapes or watching a fish tank (Ulrich, 1984; Ulrich, Simons, Losito, Fiorito, Miles, & Zelson, 1991). A similar approach might include picture windows that allow for natural light and give clients access to views of trees or flora. The same 'nature heals' notion can be extended to the interior of a counselor's office by integrating therapy animals.

In regards to an animal's presence in clinical settings, Katcher and Beck (1986) suggested animals can make us feel safe. Attention restoration theory (ART) (Kaplan, 1995; 2001) suggests that when in contact with nature or animals, we are often brought into a state of effortless attention, manifested as wonder, relaxation or curiosity. The potential results of being in contact with the natural world that includes animals may involve a decrease in stress and improved performance on tasks. In various settings ranging from school children with special needs to adults in experimental laboratory research, those with brief exposures to animals, nature, or pictures of natural settings have shown improvements in attention and performance on a variety of both simple and complex experimental and mood related tasks (Berman, Jonides, & Kaplan, 2008). The incorporation of AAT within counseling, and the presence of a therapy animal, may offer similar positive benefits. Examining the importance of therapeutic dogs in the therapist's office is especially timely given the preponderance of pets in North America (about 65% of households have a dog or cat), many of whom are considered to be like a close friend or family member (Cain, 1983; Voith, 1985). Studies have shown that percentage of those that rate their dog as like being a family member is often very

high - between 85-90%. A 2015 Harris poll of pet owners in the United States found that 95% of respondents considered their pet to be a member of the family (Shannon-Missal, 2015).

Clinical dynamics related to human-animal interactions is an increasingly popular topic, making it an important area for counselors to be aware. It makes sense then that research related to AAT within counseling has seen a dramatic increase since the 1980's (Fine, 2015; Fine & Beck, 2015; Fine, Tedeschi, & Elvove, 2015; Serepell, 2015). Given that AAT is not defined or limited by theoretical orientation, but rather seen as an adjunct approach to various theoretical perspectives, it has broad implications for today's practitioners (Chandler, 2005; Chandler, Portrie-Bethke, Minton, Fernando, & O'Callaghan, 2010). With that said, AAT's rationale has its roots in attachment theory (see Bowlby, 1982) the most utilized psychological approach in understanding human-animal interaction (Kurdek, 2008, 2009; Sharkin & Knox, 2003).

Attachment theory argues that human beings, like all other non-human mammals, are predisposed to make and sustain attachment bonds (Bowlby, 1982). In theory, a therapy dog is seen as a safe attachment figure helping clients build an attachment bond with the therapist and animal. When using AAT, the impact of the human-animal bond may also then generalize to the therapist, potentially setting the stage for further clinical work. The client-therapist-therapy dog triad may have special relevance for those who have histories of trauma, abuse, and loss; the reworking of attachment expectations and behaviors being the basis of therapeutic change (Fine, 2015).

While research related to AAT within counseling continues to rise (see Fine, 2015; Fine & Beck, 2015; Fine, Tedeschi, & Elvove, 2015; Serepell, 2015) researchers also call for deepening the understanding of the practice of AAT as an effective treatment modality (Knight & Herzog, 2009; Kruger & Serpell, 2010). Therefore, investigations regarding AAT regarding a clinical setting are timely, including investigating its potential impact on how the AAT therapist is perceived by the client. Further, would individual factors such as client's experiences with their own pets impact how they might perceive a counselor who practices AAT? The study hypothesizes that for a variety of theoretical reasons (e.g., Attachment Theory, biophilia hypothesis, ecopsychology, Attention restoration theory, etc..) that subjects would be more inclined create a halo effect for a therapist purported to practice AAT. The halo effect was originally explored by Thorndike (1920) to explain how ratings related to one influential personal quality tended to influence the perception of other characteristics usually in a positive manner. Subsequent studies have found that for instance, people that are rated as more attractive, are afforded other positive personality characteristics like being more intelligent (Schneider, Gruman, & Coutts, 2012). The current study suggests that counselor ratings would be more positive across several dimensions for a therapist that practices AAT.

Our analogue study was designed to explore the impact a therapist's purported practice of AAT on how they are perceived. That is, would subjects who examined a brochure about counseling services provided by a factitious mental health practitioner rate

the therapist more positively when it was stated, "Dr. Smith" provided animal assisted therapy and was accompanied by a picture of the therapy dog present in his/her office. To explore this hypothesis, we developed two therapy brochures that included a brief description of a counselor and a picture of the counselor's office. To control for contextual factors including gender, we did not include a picture of the counselor and we referred to Dr. Smith in a gender-neutral way. The brochures were identical with two exceptions: the experimental brochure condition contained a statement that indicated the therapist practiced AAT in the counseling work and there was a picture of a golden retriever (Dr. Smith's therapy animal) seated in the therapy office.

We hypothesized that the experimental AAT condition would be viewed differently than the condition without AAT. We explored how the Counselor Rating Form–Short Version (CRF-S) (Corrigan & Schmidt, 1983) ratings would differ by experimental versus control condition. That is, we predicted that the counselor would be rated as more attractive, trustworthy and expert-like (as measured by the Counselor Rating Form–Short Version (CRF-S) (Corrigan & Schmidt, 1983) in the AAT experimental condition versus the control brochure condition.

We also hypothesized that other contextual factors such as previous experience with animal companions might impact subjects' perception of the counselor in the AAT brochure condition. More specially, we considered the level of emotional comfort subjects' derived from their own animal companions (as measured by The Comfort from Companion Animals Scale (CCAS), Zasloff, 1996) might potentially

generalize to a therapist that utilized AAT. Additionally, we sought to explore the relationship between general attitudes toward help-seeking (as measured by The Attitudes toward Seeking Professional Psychological Help Scale-Short Form (ATSPPH-SF) (Elhai, Schweinle, & Anderson, 2008), and the AAT brochure condition. The notion being that those with negative attitudes toward help-seeking may view the AAT condition in more favorable terms based upon the biophilia hypothesis (which suggests we are innately drawn toward natural setting, elements and animals).

### Method

This research project analyzed how participants viewed a fictitious counselor described with text and a picture of the counselor's office. Additional data were gathered about participants' attitudes towards seeking professional help, previous counseling experience, past and present pet ownership, and reported comfort obtained from their current pet. The participants of this study volunteered through the use of Amazon Mechanical Turk. Mechanical Turk. Created in 2005, Mechanical Turk is a crowdsourcing online labor market that coordinates the supply and the demand of cognitive tasks (Paolacci, Chandler, & Ipeirotis, 2010). This Internet sample is reliable, older, and more diverse than typical college student samples (Buhrmester, Kwang, & Gosling, 2011; Weinberg, Freese, & McElhattan, 2014; Behrend, Sharek, Meade, & Wiebe, 2011).

The survey was made available between 9/20/16 – 9/21/16. All respondents received a unique code needed for payment at the end of the survey. Participants were paid US \$.25 for their participation. This study was

approved by the Institutional Review Board at Colorado State University and all participants were provided an informed consent before answering the questionnaire.

### Questionnaire demographic questions and instruments

The survey was formatted so that participants were first presented with informed consent information, followed by demographic questions related to age, gender, racial/ethnic identification, and educational status. They were also asked about previous counseling experience and if they had received counseling, to rate the experience on a 5-point scale from very negative to very positive. To further assess views regarding counseling, The Attitudes Toward Seeking Professional Psychological Help Scale (ATSPPH) was given. They were then asked to look at a picture of a counseling brochure and accompanying counselor information/description. Based on the picture and the description, they were asked to complete the Counselor Rating Form-Short Version (CRF-S), whether they thought the counselor was male or female, and how likely they would be to see the described counselor for counseling. Lastly they were asked about current and past pet ownership, and if they had a current pet, they were given the Comfort from Companion Animals Scale.

### The Attitudes toward Seeking Professional Psychological Help Scale (ATSPPH-SF)

The Attitudes toward Seeking Professional Psychological Help Scale (ATSPPH-SF) is a frequently used psychometrically standardized instrument used to assess attitudes toward help-seeking (Elhai, Schweinle,

Anderson, 2008). The 10-item scale ATSPPH-SF was derived from Fischer and Turner's (1970) original 29-item measure and has a correlation of .87 with the original form (Fischer & Farina, 1995; Elhai, Schweinle, & Anderson, 2008)

The scale includes two factors: Openness to Seeking Treatment for Emotional Problems, and Value and Need in Seeking Treatment (Elhai, Schweinle, & Anderson, 2008). Higher scores (indicating more positive treatment attitudes) have been found to be associated with less treatment-related stigma and greater intentions to seek treatment. The ATSPPH-SF's coefficient alpha has been reported as 0.77 for college students and 0.78 for primary care patients (Elhai, Schweinle, & Anderson, 2008). The one-month test-retest reliability coefficient has been reported to be 0.80 with a coefficient alpha of .84 (Fischer & Farina, 1995)

In the current study, participants rated each of the 10 items on a scale of 1 to 4 (1 = disagree, 4 = agree). Five of the items are reverse scored, and higher overall scores are reflective of more favorable attitudes. The possible range of scores varies from 0 to 40. High scores ( $\geq 18$ ) reflect positive attitudes toward seeking professional help and low scores ( $\leq 17$ ) suggest negative attitudes toward seeking professional help (Elhai, Schweinle, & Anderson, 2008)

#### Counselor Rating Form-Short Version

To determine how participants perceived the therapist based on the counseling brochure picture and description, they were asked to complete the Counselor Rating Form-Short Version (CRF-S). The CRF-S is a 12 item, 7-point Likert scale that assesses clients' reaction to a counselor (Tryon, 1987). The CRF-S consists of a list of

adjectives (e.g., friendly, sincere) and is anchored by the words "not very" and "very". The CRF-S is one of the most commonly use scales of its type (Heppner, Wampold, Owen, Thompson, & Wang, 2015; Ponterotto & Furlong, 1985). The measure is based on a three factor model that corresponded with attractiveness, expertness, and trustworthiness dimensions. Each subset consists of 4-items and is scored by summing the respective items. Subscales scores can range from 4 to 28 with a total effectiveness score between 12 and 84. Higher scores on the subscales indicate higher client ratings of counselors' expertness attractiveness or trustworthiness (Corrigan & Schmidt, 1983). Internal consistency for the CRF-S total score has been reported ranging from 0.82 to 0.94 with a median of 0.91. Interrater reliability has been documented to be between 0.84-0.93 for the expertness items, 0.84-0.92 for attractiveness items and 0.79 -0.92 for trustworthiness items (Corrigan & Schmidt, 1983; Ponterotto, & Furlong, 1985).

Participants were also asked to indicate if they felt the counselor in the brochure was male or female or transgendered and how likely they would be to seek help from the counselor described (5-point scale from very likely to not at all likely. This also included an option for 'I would never seek counseling'.) Subjects were given the option of not identifying gender of therapist but participants with missing data points were excluded from the final data analysis.

#### The Comfort from Companion Animals Scale (CCAS)

The Comfort from Companion Animals Scale (CCAS) is a measure

designed to assess pet attachment. The CCAS is an 11-item self-report instrument rated on a 4-point Likert-type scale, ranging from 1 (strongly disagree) to 4 (strongly agree) with a higher score indicating greater perceived comfort from the pet (Zasloff, 1996). Sample items include “Having a pet gives me something to care about,” and “My pet makes me feel needed.” Construct validity is 0.68 when correlated with the Lexington Attachment to Pets Scale (LAPS) (Johnson, Garrity, & Stallones, 1992). The test has a reported Cronbach alpha of 0.85, and no differences between dog owners and cat owners, suggesting the CCAS is an appropriate measure of perceived comfort gained from both cat and dog ownership (Zasloff, 1996).

#### Pet related and brochure questions

To assess prior pet experience, participants were asked to indicate their agreement level with the following statement: “I have had a pet as either child or adult that could be described as a close friend or family member”. Answers corresponded to a 4-point Likert scale anchored with “strongly agree” to “strongly disagree”. Participants were also asked if they currently own any pets. Those who currently owned at least one pet were directed to The Comfort from Companion Animals Scale.

#### Statistics performed and manipulation checks

Descriptive statistics, frequency distribution (reported in percentages) and non-parametric tests (Independent samples Kruskal-Wallis, Fisher’s exact test) were performed using commercially available software (IBM SPSS Statistical software, version 23). Age was stratified into 5 groups: 18-29, 30-39, 40-49, 50-59, and 60 and older.

In order to demonstrate the construct validity of the experimental versus control condition, we had a group of expert raters, 10 graduate students enrolled in either counseling psychology or clinical mental health program, compare the two brochure conditions. Raters assigned numerical values using a Likert type scale indicating the degree that key words or phrases accurately described the therapy dog and/or the counselor in each condition. Raters evaluated the following statements: “There is a dog present;” “A therapy animal is present in the office;” “Dr. Smith practices animal assisted therapy;” “Dr. Smith works with a variety of concerns;” “As predicted, we found that raters evaluated the experimental condition significantly different than the control ( $p < .000$ ) on statements concerning a dog and a therapy animal being present. Also, as predicted, there were no significant differences concerning Dr. Smith experience working with a variety of concerns across brochure conditions but there were significant differences regarding Dr. Smith’s use of AAT in the experimental condition. Therefore, the analyses suggested that the therapy dog and Dr. Smith’s practice of AAT were seen as significant and salient factors when comparing the different brochure conditions.

A manipulation check was also conducted after subjects read the randomly assigned brochure. Subjects only received one brochure to rate. Subjects were asked if Dr. Smith practiced ATT. Only those subjects that correctly answered the manipulation check were included in the final data analysis. Only a small percentage was dropped from the data set (approximately 1%).

Lastly, to ensure participants' attentiveness and to avoid response sets when taking the survey, two questions were inserted that asked for specific answers. Participants who failed to answer these questions with the requested 'correct' answer were eliminated from further analysis. An example of this type of question was a request to answer the question with the response "disagree" from a selection of four options.

### Results

Participants included for analyses totaled 235. Not all survey questions received a response; therefore, the number of responses for each particular question is noted. The sample included 79 (33.8%) males and 155 (66.2%) females (one did not answer and while 'transgender' was an option for gender selection, no participants self-identified as such). Most respondents were Caucasian (174, 74%), followed in number by African American (26, 11.1%), Hispanic (16, 6.8%), Asian American (12, 5.1%), Native American (2, 0.9%) and other (4, 1.7%) (one did not answer). When asked about education level, 100 (42.6%) reported a four-year degree, 61 (26.0%) some college, 29 (12.3%) a 2 year degree, 27 (11.5%) a graduate degree and 18 (7.7%) high school. Age categories included 76 (32.3%) ages 18-29; 70 (29.8%) ages 30-39; 41 (17.4%) ages 40-49; 26 (11.1%) ages 50-59; and 22 (9.4%) ages 60 and older.

#### Counseling experiences and attitudes

Participants were asked if they were currently or had ever been in counseling, to which 153 (65.1%) reported yes and 82 (34.9%) reported no. Those who had been in counseling were asked to rate their overall experience

from very negative to very positive. Out of 79 responses, 2 (1.3%) reported very negative, 14 (9.0%) reported negative, 36 (23.1%) neutral, 57 (36.5%) reported positive and 47 (30.1%) reported very positive.

A positive perception of counseling was witnessed in the ATSPPH-FS scores. The ATSPPH-FS was scored on a 4-point scale, with a possible range of scores between 4 and 40. The range of the current sample was 11 to 38. The median ATSPPH-FS score was 28 (SD 5.26), suggesting most participants had a positive attitude toward seeking professional help. Only seven (3.8%) responders had scores suggesting negative attitudes toward seeking professional help. Due to the fact that most of the ATSPPH-FS scores were clustered near the top end of the spectrum, the ATPHS scores were potentially marred as a useful variable when assessing participants' views on the counselor's attractiveness, expertness or trustworthiness across brochure conditions.

#### Other contextual variables: Pet ownership and emotional comfort scores

Participants were asked about current pet ownership, and 79 (33.6%) reported having at least one dog, 50 (21.3%) having at least one cat, 4 (1.7%) having no dogs or cats but having other animals, 35 (14.9%) having at least one dog and one cat, and 67 (28.5%) not owning any animals currently.

Regardless of current pet ownership, participants were asked if they agreed with the statement that they had a pet as either child or adult that could be described as a close friend or family member. In terms of defining their pet as friend or family member, 9 subjects (3.8%) strongly disagreed, 14 (6.0%)



## PERCEPTIONS OF AAT IN ANALOGUE BROCHURE STUDY

disagreed, 76 (32.3%) agreed, and 136 (57.9%) strongly agreed.

The Comfort from Companion Animals Scale (CCAS) has a possible score range of 4 to 44. Only participants who currently owned pets completed the CCAS (n=168) and the median score was 42. Due to the positively skewed scores, the CCAS scores were potentially flawed as a useful variable when assessing participants' views on the counselor's attractiveness, expertness or trustworthiness across brochure conditions.

### Hypotheses

In regard to hypothesis one, we assessed the impact of participants' views of the counselor based on the presence of

a dog, and they were asked to complete the Counselor Rating Form-Short Version (CRF-S). The CRF-S assesses participants' views of the counselor for 3 subscales (attractiveness, expertness and trustworthiness) as well as an overall effectiveness score. Independent sample Mann-Whitney U tests were conducted to determine mean rank differences between the dog condition and the no-dog condition for the three CRF-S subscales and total effectiveness score. People within the dog condition rated counselors as more trustworthy ( $p = 0.018$ ), more attractive ( $p < 0.000$ ) and more effective ( $p = 0.020$ ). There was no difference in how people rated counselors' expertness level.

Table 1. Median Scores

	Dog	No dog
Effective (total CRF)	72	67
Trustworthy	24	22
Expert	24	24
Attractive	24	22

Hypothesis two theorized that contextual variables (i.e., attitudes toward help-seeking and emotional comfort derived from companion animals) would likewise be related to different counselor rating form scores in the dog versus no-dog brochure condition scores. Independent sample Mann-Whitney U tests were conducted to determine mean rank differences between the dog condition and the no-dog condition for the ATSPPH-FS scores and Counselor Rating Form-Short Version scores by brochure condition. These analyses revealed no significant results. Likewise,

Comfort from Companion Animals Scale (CCAS) scores were examined as a variable impacting Counselor Rating Form-Short Version scores by brochure condition, which also yielded no significant results. Given that both sets of scores for our contextual variables were skewed in positive directions it was difficult to explore our original hypothesis.

In regards to other contextual variables, the dog vs no dog condition did not have an effect on whether participants thought the counselor was male or female (transgender was also an option but was not endorsed by any participants). For the

no-dog condition, 71 (59.2%) reported feeling the counselor was male and 49 (40.8%) reported feeling the counselor was female. This is compared to 75 (65.2%) reported feeling the counselor was male and 40 (34.8%) reported feeling the counselor was female in the dog condition. Whether the participant was male or female did not make a difference in the gender they ascribed to the counselor, regardless of dog present or not condition.

Participants were also asked to indicate how likely they would be to seek help from the described counselor on a 5-point scale from “very likely” to “not at all likely” including the option ‘I would never seek counseling’. In the no dog condition, 93 (78.2%) reported very or moderately likely and 21 (17.6%) reported not very likely or not at all. Five (4.2%) reported they would never seek counseling. This was not significantly different from the dog condition in which 93 (81.6%) reported very or moderately likely and 17 (14.9%) reported not very likely or not at all. Four (3.5%) reported they would never seek counseling.

### **Discussion**

The results from our analogue brochure study found that a counselor purported to practice AAT (which was punctuated by having a picture of the therapy dog in the office) was perceived in more positive terms. In terms of comparing the two brochure conditions, the counselor in the ATT brochure condition was viewed as significantly more attractive and trustworthy, but not different in terms of being more expert-like.

In terms of offering some explanation for the study’s results, it has been suggested previously that individual differences play a significant role in

understanding the human-animal bond’s influence in and out of the therapy office (Blazina, Boyraz, & Shen-Miller, 2011; Blazina & Kogan, 2016; Herzog, 2007). That is, contextual variables such as age, race/ethnicity, gender, gender socialization, etc., can all play an important part. Further, it is unlikely there is a singular all-encompassing answer for the bond’s influence. Likewise, in our study, perhaps there are also numerous interrelated dynamics to consider when explaining the results.

One potential explanation of our findings is taken from the biophilia/ecopsychology perspective. That is, our innate kinship with the natural world and living organisms perhaps prompted more positive perceptions of the counselor in the AAT brochure condition. A counselor who practiced AAT might be seen as more closely aligned with ‘natural’ forces and thereby draw subjects toward him/her in more favorable ways. If this is the case, future research that replicates analogue studies will want to see if having a dog present versus other ecopsychology influences such as windows, natural light, flora, or even various species of other animals (e.g., cat, bird, etc.,) are likely to create a change in the perceptions of would-be-clients.

Another consideration regarding our findings involves how there may be other unconscious processes operating in both our study and perhaps also in the real world of therapists’ offices that practice AAT. These dynamics can be placed within an Attachment Theory perspective involving notions of safe haven and safe base (Bowlby, 1982). The former involves how an attachment figure can provide a reliable source of comfort amid distress, while the latter involves a safe relationship that encourages a person to

explore the complexity of personality. In this vein, do counselors gain a type of therapeutic credibility (i.e., more attractive and trustworthy) when there is a therapy dog present that seems gentle, attuned, and well-adjusted? Is part of the underlying thinking of the client that the therapist has affected the well-being of the therapy-dog, so too should the client also expect a similar type care? That is, would the positive attachment scenario generalize to the would-be client? While these notions are speculative there may be a type of HAI halo effect given to therapists who utilize AAT, clients perceiving them as more trustworthy and attractive.

The other side of the coin is found in Fine's work with AAT (Fine, & Eisen, 2008). He reported that many of his former clients would openly state they had missed the therapy dog, with his own presence seemingly of secondary importance. In this case, it would seem as if the AAT dog is bestowed credit for being the change agent. However, these speculations regarding the importance of therapy dogs may also be subject to individual differences. Therapy dogs vary in terms of temperament and behavior, in and out of session. It would be interesting in future studies to consider the therapy animal's variability as a factor impacting the client's perception not only of the therapy dog but also the therapist. That is, would an unruly therapy animal remove the potential halo effect a client may unwittingly bestow upon a therapist that utilizes a dog in their office? Likewise, would the halo also be taken from the dog?

While there may be a potential halo effect that subjects bestow on either the therapy dog or therapist, there is a third option to consider regarding the perceived positive attributes of the

counselor in our study within an Attachment Theory context. Perhaps subjects may be tempted to bestow the halo on the team consisting of the therapeutic dyad; the therapist and the dog being joined together as one therapeutic unit. This may resemble from an Attachment Theory lens a type of parental or generative dyad especially if the safe haven and safe base characteristics are consistently present. With that said, within the therapeutic frame of working with clients, we are challenged to view any potential additions, changes, or other remarkable dynamics that appear within or across sessions as noteworthy; ones that may impact the therapeutic process knowingly or unwittingly. The more standard version of this process may include being on the lookout for anomalies that include temporal issues (client or therapist is habitually late of session), financial ones (client may 'forget' to pay for sessions), affect (client or therapist has intense emotional reactions), or when additional person(s) join what is normally an individual session (e.g., parents, partners, children). Yet, in the context of AAT, the therapeutic anomaly is of two kinds, one being that a therapy animal is present in session. The other involves the use of two 'therapists' in session. These occurrences may give us pause as one considers how the clinical dyad might alter the therapeutic dynamics in any clinical scenario. Issues may include a tendency for splitting (making one therapist good and the other bad) or triangulation, one therapist being aligned with the client and the other an outsider. But if the therapist and therapy dog are seen to work in tandem, perhaps these dynamics are bypassed. If that speculation is accurate then it has direct implications not only for our results but also for those who utilize

AAT in their offices. Therapists need to pay special attention to how clients may experience the therapist-therapy dog dyad over the course of treatment. Are there moments when one part of the dyad seems to shine more brightly or is it the case that clients experience what occurs in session as a result of the cumulative work of both therapists? Perhaps the two “therapists” are viewed in a fluid manner that changes over time; at times they are perceived as separate entities and in other moments the therapist-dog dyad are seen as a symbolic psychological extension of one another. These comments are tentative and future research should undertake exploring their merit.

We must also consider that while the counselor utilizing AAT was seen as more attractive and trustworthy, there were not significant differences regarding being perceived as more expert. These results may be due in part to the most appropriate way to interpret the CRF-S. The CRF-S, like the original CRF from which it was developed has been discussed in terms of the most applicable way to understand its scores. One approach has been the use of a three-factor model (attractiveness, trustworthiness, and expertness) (Barak & Lacrosse, 1975; Corrigan & Schmidt, 1983). By contrast, Bergin (1971) argued that due to the significant overlap between factors, a single-unidimensional “good guy” interpretation may be most suitable. Lastly, in some instances a two-factor interpretation has also been suggested as most appropriate interpretation where elements of the original three factors are configured into various combinations of two factors (Johnson & Prentice 1985; Strong, 1968). Contextual factors seem to impact which approach is considered the most suitable way to interpret the results. Examples of

factors include when real clients rate counselors (versus analogue studies), or how initial client impressions of the counselor can differ in the early stages versus later stages of treatment (Corrigan & Schmidt, 1983; Heesacker & Heppner, 1983; Tracey et al, 1988). For our study, it seems the best way to approach the CRF-S is a two-factor solution consisting of attractiveness and trustworthiness. Further research will be needed to confirm our study’s generalizability.

Our study was not without limitations. One of these involved hypothesis two which sought to explore the role of certain contextual variables that were thought to potentially impact the perception of the counselor. As mentioned, the positively skewed nature of the scores regarding perception of the emotional comfort provided by animal companions and general help-seeking attitudes limited our ability to investigate these factors. Future studies should explore how those with varied views of animals and help-seeking impact the prospect of working with a therapist who uses AAT. Future studies may also include other relevant contextual factors in their investigation.

In addition, we employed an analogue study in which subjects were not actually using the brochures as a means of searching for a real therapist; nor were they viewing the actual therapist - just a brief description of the services offered and his/her dog. Further, we did not control for the degree subjects understood the concept of AAT. Some may have reacted positively to the presence of the dog in the office with limited knowledge of why he/she was present. Also, we attempted to control for therapist variables but we can see subjects imagined the therapist differently in terms of gender, age,

race/ethnicity, etc. How might these variables play a role in not only this study's results but future studies? We also selected a golden retriever as the therapy animal representative for the study. It would be interesting to explore how differing types of dogs (e.g., size, color, breed, etc.) may affect perceptions of the therapist or therapy animal. One might also argue that our two experimental conditions could be further refined in future work to include a clearly neutral control condition.

Finally, it is likely that AAT and the human-animal bond will play an increasing role not only in the consciousness of the public but also in the work of those within the mental health profession. This does not mean that the next generation of therapists will all come equipped with their own therapy animal as part and parcel of each clinical practice. However, it does mean that the topic of human animal interactions needs to be better understood by practitioners and conveyed to clients. For some clients, at least, a therapy dog may be viewed as a welcoming and sought after presence that influences their choice of therapist.

### References

- Barak, A., & LaCrosse, M.B. (1975). Multidimensional perceptions of counselor behavior. *Journal of Counseling Psychology, 22*, 471-476.
- Beck, A.M., & Katcher, A.H., (1983). *Between Pets and People*. G.P. Putnam's Sons, New York, 317.
- Behrend, T. S., Sharek, D. J., Meade, A. W., & Wiebe, E. N. (2011). The viability of crowdsourcing for survey research. *Behavior Research Methods, 43*, 800–813.
- Bergin, A. E. (1971). The evaluation of therapeutic outcomes. In A. E. Bergin & S. L. Garfield (Eds.), *Handbook of psychotherapy and behavior change* (pp. 217-270). New York: Wiley.
- Berman, M.G., Jonides, J., Kaplan, S., (2008). The cognitive benefits of interacting with nature. *Psychological Science, 19*(12), 1207.
- Blazina, C., Boyraz, G., & Shen-Miller, D. S. (2011). *The Psychology of the Human-Animal Bond*. New York, NY: Springer Publishing.
- Blazina, C & Kogan, L (2016). *A New Understanding of Man's Best Friend*. New York: Springer.
- Bowlby, J (1982). *A secure base*, New York: Basic Books.
- Buhrmester, M., Kwang, T., & Gosling, S. D. (2011). Amazon's Mechanical Turk: A new source of inexpensive, yet high-quality, data? *Perspectives on Psychological Science, 6*, 3-5.
- Cain, A. O. (1983). A study of pets in the family system. In "New Perspectives on Our Lives with Companion Animals" H Katcher and A M Beck (Eds), pp 72-81, Pennsylvania Press.
- Chandler, C. K. (2005). *Animal assisted therapy in counseling*. New York: Routledge
- Chandler, C. K., Portrie-Bethke, T. L., Barrio Minton, C. A., Fernando, D. M., & O'Callaghan, D. M. (2010). Matching animal-assisted therapy techniques and intentions with counseling guiding theories. *Journal of Mental Health Counseling, 32*, 354–374.
- Coren, S. (2010). Forward for Handbook on Animal-Assisted Therapy. In: *Handbook on Animal-Assisted Therapy. Theoretical Foundations*

- and Guidelines for Practice. Third Edition, A.H. Fine, (Ed.), pp.xv-xviii. San Diego: Academic Press.
- Corrigan J.D., & Schmidt, L.D. (1983). Development and validation of the Counselor Rating Form. *Journal of Counseling Psychology* 30(1):64-75
- Elhai J. D., Schweinle W., & Anderson, S. M. (2008). Reliability and validity of the attitudes toward seeking professional psychological help scale-short form. *Psychiatry Res.* 159, 320–329.
- Fine A. H., (2015). Handbook on Animal-Assisted Therapy, Fourth Edition: Foundations and Guidelines for Animal-Assisted Interventions 4th Edition. New York: Academic Press.
- Fine A. H., & Eisen, C. (2008). Afternoons with puppy: Inspirations from a therapist and his animals. West Lafayette, IN: Purdue University Press.
- Fischer, E. H., & Farina, A. (1995). Attitudes toward seeking professional psychological help: a shortened form and considerations for research. *Journal of College Student Development*, 36, 368–373.
- Fischer E. H., & Turner J. L. (1970). Orientations to seeking professional help: development and research utility of an attitudes scale. *Journal of Counseling and Clinical Psychology*, 35, 79– 90. 10.1037/h0029636.
- Heesacker, M., & Heppner, P. P. (1983). Using real client perceptions to examine psychometric properties of the Counselor Rating Form. *Journal of Counseling Psychology*, 30, 180-187.
- Heppner, P.P., Wampold, B.E., Owen, J., Thompson, M.N., Wang, K.T. (2015). *Research Design in Counseling*, 4th Edition. New York: Brooks Cole.
- Herzog, H. A. (2007). Gender differences in human-animal interactions: A review. *Anthrozoös*, 20(1), 7–21.
- Johnson, T.P., Garrity, T.F., & Stallones, L. (1992). Psychometric evaluation of the Lexington attachment to pets scale (LAPS). *Anthrozoös*, 5(3): 160- 175.
- Johnson, M.E., & Prentice, D.G. (1985). Factor analytic study of the Counselor Rating Form-Short Version. Paper presented at the meeting of the American Psychological Association, Los Angeles.
- Kaplan, S. (1995). The restorative benefits of nature — toward an integrative framework. *Journal of Environmental Psychology* 15 (3), 169.
- Kaplan, S. (2001). Meditation, restoration, and the management of mental fatigue. *Environment and Behavior*, 33, 480–506.
- Katcher, A.H., & Beck, A.M. (1986). Dialogue with Animals. *Transaction and Studies College of Physicians of Philadelphia* 8:105-112.
- Knight, S., & Herzog, H. (Eds.). (2009). New perspectives on human–animal interactions: Theory, policy, and research. *Journal of Social Issues*, 65, 451–461.
- Kruger, K.A. & Serpell, A. (2010). Animal-Assisted Interventions in mental health. In: Handbook on Animal-Assisted Therapy. Theoretical Foundations and Guidelines for Practice. Third Edition, A.H. Fine, (Ed.), pp.xv-xviii. San Diego: Academic Press.

- Edition, A.H. Fine, (Ed.), pp. 33-48, San Diego: Academic Press.
- Kurdek, L A (2008). Pet dogs as attachment figures. *Journal of Social and Personal Relationships*, 25, (2), 247-266.
- Kurdek, L A (2009). Pet dogs as attachment figures for adult owners. *Journal of Family Psychology*, 23, (4), 439-446.
- Levinson, B M (1969). *Pet-oriented child psychotherapy*. Springfield, Illinois: Charles C Thomas.
- Lott, D.F., (1988). Feeding wild animals: The urge, the interaction, and the consequences. *Anthrozoös*, 1(4), 255-257.
- Molnar, M (1996). Of dogs and doggerel. *American Imago*, 53, (3), 269-280.
- Paolacci, G., Chandler, J., & Ipeirotis, P.G. (2010). Running experiments on Amazon Mechanical Turk. *Judgment and Decision Making*, vol. 5, no. 5, August, pp. 411-419
- Ponterotto, J.G., & Furlong, M.J. (1985). Evaluating counselor effectiveness: A critical review of rating scale instruments. *Journal of Counseling Psychology*, 33,579-616.
- Roszak, T. (1992). *The voice of the Earth: An exploration of ecopsychology*. New York: Simon & Schuster.
- Roszak, T., Gomes, M. E., & Kanner, A. D. (1995, Eds.). *Ecopsychology: Restoring the earth, healing the mind*. San Francisco: Sierra Club Books.
- Roth, B (2005). Pets and psychoanalysis: A clinical contribution. *Psychoanalytic Review*, 92, 453-457.
- Schneider, F.W., Gruman, J. A., & Coutts, L. M. *Applied Social Psychology: Understanding and Addressing Social and Practical Problems*. London: SAGE Publications, Inc.; 2012.
- Serpell, J. (1996). *In the Company of Animals: A Study of Human-Animal Relationships*. Cambridge University Press.
- Serpell, J. (2010). Animal assisted therapy in historical perspective. In: *Handbook on Animal-Assisted Therapy. Theoretical Foundations and Guidelines for Practice*. Third Edition, A.H. Fine, (Ed.), pp.17-32. San Diego: Academic Press.
- Shannon-Missal, L. (2015). More than ever, pets are members of the family. Retrieved From <http://www.theharrispoll.com/health-and-life/Pets-are-Members-of-the-Family.html>.
- Sharkin, B. S., & Bahrlick, A. S. (1990). Pet loss: Implications for counselors. *Journal of Counseling & Development*, 68(3), 306-308.
- Strong, S.R. (1968). Counseling: An interpersonal influence process. *Journal of Counseling Psychology*, 15, 215-224.
- Thorndike, E. L. (1920). The Constant Error in Psychological Ratings. *Journal of Applied Psychology*, 4, 25-29.
- Tracy, T., Glidden, C.E., & Kokotovic, A.M. (1988). Factor Structure of the Counselor Rating Form-Short Article, *Journal of Counseling Psychology* 35(3):330-335.
- Tryon, G.S. (1987). The Counselor Rating Form-Short Version: A Factor Analysis. *Measurement*

- and Evaluation in Counseling and Development*, 122-126.
- Ulrich, R.S. (1984). View through a window may influence recovery from surgery. *Science*, 224, 420-423.
- Ulrich, R. S., Simons, R. F., Losito, B. D., Fiorito, E., Miles, M. A. & M. Zelson (1991). Stress recovery during exposure to natural and urban environments. *Journal of Environmental Psychology*, 11: 201-230.
- Voith, V. L. (1985). Attachment of people to companion animals. *Veterinary Clinics of North America Small Animal Practice*, 15, 289-295.
- Weinberg, J. D., Freese, J., & McElhattan, D. (2014). Comparing data characteristics and results of an online factorial survey between a population-based and a crowdsourced-recruited sample. *Sociological Science*, 1, 292-310.
- Wilson, E.O. (1984). *Biophilia*. Cambridge: Harvard University Press.
- Zasloff, R. L. (1996). Measuring attachment to companion animals: A dog is not a cat is not a bird. *Applied Animal Behaviour Science*, 47(1-2) Apr: 43-8.
- Zasloff, R.L. and Kidd, A.H., (1993). What people like about cats. Paper presented at the meeting of the International Society for Anthrozoology on Ethological and Behavioural Approaches to the Study of Human-Animal Interactions, 24 July, Davis, CA.