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OT Forum

Avian Assisted Intervention During Covid-19 Pandemic Restrictions

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Abstract

Occupational Deprivation has been a present risk for people in inpatient hospital settings such as Skilled Nursing Facilities (SNF) during the Coronavirus Disease 2019 (COVID-19) pandemic restrictions. Clients have described their days as "boring" and "unfulfilling." Clients experiencing extended in-patient hospitalization, who already might experience great interruptions to their treasured roles, routines, and occupations, were further restricted from recreational and social opportunities usually present in those settings. This work describes the translation of the animal assisted intervention evidence base to an occupational therapy student-developed program at a SNF to address this deficit. A vibrant avian therapy partner gave moments of joy for clients whose activities were heavily restricted during widespread social isolation of the COVID-19 containment efforts. Connections to performance skills in the Occupational Therapy Practice Framework (AOTA, 2020). are discussed.

Keywords*:* Animal-assisted intervention, occupational deprivation, Translational research

Introduction

Infection control measures to address the Coronavirus Disease 2019 (COVID-19) pandemic promoted a safer environment for people residing in Skilled Nursing Facilities (SNF). However, the safety came with a cost of social, leisure, and recreational activities, resulting in occupational deprivation and isolation (Abbasi, 2020). To address the problem of the emotional cost of the activity restriction, an occupational therapy student (OTS) developed a program to translate the evidence base for animal-assisted intervention (AAI) to clinical practice at SNF during COVID-19 restrictions.

Literature Review

There is a rich literature base to support AAI to address depression and decreased quality of life (QOL). A 2019 systematic review (Yakimicki et al.) examining the effects of AAI for people with dementia who reside in nursing homes noted benefits of AAI including decreases in agitated behaviors and increases in positive social behaviors. Using measures such as the Geriatric Depression Scale (Sheikh & Yesavage, 1986) and the Brief Agitation Rating Scale (Finkel et al., 1993), numerous studies scrutinized the effects of various therapy animals, such as dogs, cats, horses, and fish, for groups of elderly people across continents, with heartening results (Yakimicki et al., 2019). AAI has been studied with other populations and settings and has utility for the population of people who are hospitalized in SNF.

Three reviews of the available evidence base support the use of animal-assisted intervention for people who experience depression or declines in QOL. In their 2020 systematic review and meta-analysis of the QOL effects of AAI and pet robot intervention (PRI), Park et al. (2020) concluded that both AAI and PRI significantly reduced depression in patients with dementia. The feasibility and benefits to clients' well-being and QOL with canine AAI partners was also described in a 2017 systematic mapping review by Wood and Colleagues. Charry-Sanchez et al. similarly describe improvements in the QOL through decreased agitation for people with dementia in their 2018 systematic review which included 23 studies of AAI exploring a variety of animal partners including dogs, cats, and farm animals.

A 2011 study by Pedersen and colleagues also included farm animals. The researchers video recorded twice-weekly sessions with 19 participants with depression engaging in milking, feeding, grooming cows and calves and cleaning the livestock pens. Participants demonstrated decreased anxiety and depression as measured on the Beck Depression Inventory (Beck, et al., 1996) and State-Trait Anxiety Inventory Subscale (Spielberger, 1983) with the greatest improvements experienced by participants who performed work tasks at high levels.

Other documented AAI was conducted with birds and plants. Researchers in Italy studied the effects of interaction with a canary, compared to a plant or no intervention for 144 residents in a nursing home. Researchers found a statistically significant number of individuals who interacted with the canary bird reported quality of life improvements on the LEIPAD II-Short Version (Colombo, et al. 2006). The available research of the power of avian AAI was incorporated by the first author into academic projects and then into fieldwork.

Translating Evidence to Practice

At the time of the first author's fieldwork II, the statewide health orders prohibited visits from family and friends inside skilled nursing facilities. Visitors could stand outside a client's closed window only; these restrictions were applied to family, friends and to visits from therapy animals (Grisham, 2020). Other social occupations with clients, such as meals in the dining room, group art or beauty classes were prohibited. Clients' social opportunities were limited to distanced communication such as telephone, video calls, cards, electronic mail, or with staff-member interaction.

Clients reported their days were "boring" and "unfulfilling" due to their inability to participate in their preferred activities (personal communication, September 2020). Residents stated, "I am just trying to fill up my days." and "You have no idea the level of boredom I experience (personal communication, October 2020)." With these challenges in mind, a program was created to offer

all the clients at the site a novel form of animal assisted therapy; the AAI partner was a hand-raised brahma rooster.

Implementation and Results of Intervention

The AAI program proposal was carefully vetted to ensure compliance with COVID-19 safety restrictions. For example, the OTS who completed AAI procedures adhered to masking and handwashing protocols. The rooster AAI partner was only handled by the OTS, who has knowledge and skill in bird handling. The rooster AAI visits were through-the-window of SNF rooms so that the clients could be physically near to the rooster if they wished without risk of transmission of any contagions.

The rooster AAI partner was be presented to the clients with the therapeutic objectives related to treatment approaches in the Occupational Therapy Practice Framework (AOTA, 2020). The program was designed to create an opportunity for a novel activity (interaction with a rooster through a window), to establish a habit of looking through windows and to maintain conversational ability through generating opportunities for reminiscing.

Beginning in October 2020, the rooster AAI partner was presented to approximately 20 SNF clients, through the window of their hospital rooms for five to seven minutes. The OTS responded to the clients' body language to continue rooster AAI or to move to the next room. Clients were expecting the rooster visitor as the OTS or other SNF team members told the SNF clients of the pending visit. If residents expressed interest, then they were offered the Rooster AAI. If residents expressed any fear of roosters or any disinterest, they could opt out of the Rooster AAI. Any client could opt in or out at any time. During the AAI rooster intervention, the MOTS knocked on the client windows to offer the Rooster AAI visit. At this SNF, most clients were seated in wheelchairs, and would self-propel to the window to see the rooster. Interested clients would propel very close to the window. Some clients would say unintelligible words through the window or write questions on a notepad. The MOTS would show a large-print placard with frequently asked questions such as what kind of rooster he was and what his name was. If the client looked away or turned away from the rooster, the OTS would move to the next room.

Clients overwhelmingly reported being pleased and surprised to see the Brahma rooster, with his bright red combs and velociraptor feet. The novel experience was the highlight of many people's day. One client stated, "That was so nice, birds are my favorite thing, I've always had birds - like canaries." Another client with advanced dementia said "It [the rooster] was very impressive, I was like Wow! Because you don't see that every day (personal communication, October 2020)."

Engaging in the novel AAI rooster activity stimulated memory and reminiscence for SNF clients who had memory concerns. When participating in occupational therapy sessions later

Figure 1. OTS FW student (now graduate), her brahma rooster, and fantail pigeon at her Fieldwork II Site.

in the same day, clients with memory concerns were able to recall the rooster and the window visit. One client with advanced dementia was able to remember seeing the rooster several hours later, stating "Oh, I love the animals, back in the old days we had roosters... but not as fancy as yours." The client continued to reminisce positively about his days growing up on the farm (personal communication, October 2020)." Other clients expressed keen interest in the rooster's life and history. Some clients even noted they called their families and talked to them on the phone about the experience. When asked how she felt about rooster therapy, one client succinctly said "I like the rooster therapy, they're so cute, they're good therapy. It makes me feel good, I look forward to it. Too bad you can't pet them (personal communication, November 2020)."

Discussion

Avian AAI partners can be utilized by occupational therapy practitioners working with people who reside in healthcare institutions. Even through the window of their SNF rooms, the brahma rooster and OTS were able to work with clients on various performance skills as described in the Occupational Therapy Practice Framework (AOTA, 2020). Specifically, clients attended to the rooster and noticed his beauty; they looked at and made social contact with the rooster, questioned the OT and other SNF staff members about his presence and disclosed stories about their prior experiences with farm animals. SNF clients expressed emotions about the tedium of inpatient hospitalization and thanked the rooster for providing a little difference in their daily routine (AOTA, 2020). Because of the engagement in performance skills, and requests from multiple clients to see the rooster again, the AAI intervention occurred six more times and included the rooster, a hen and fancy pigeons (see figure 1).

The limitations of this description of translational program development are the small sample size and sole location in a southwestern U.S. state. The positive results of increased interaction and remembrances may not be reproduced to other locations. The strengths of this program are the novel use of avian AAI partners and a novel method of delivery of OTS-driven animal assisted intervention through the windows of people experiencing extreme isolation.

This paper adds to the current literature by translating existing AAI research to provide an additional method of AAI for individuals who reside in skilled nursing facilities. Bringing avian AAI partners to the window provides benefit to the clients we serve without the risk of bites, or scratches. Depending on the setting rules and state regulations, window AAI partners may not have the same certification requirements as with in-person visits. Window AAI partners should be calm and tolerant of being presented at windows in public view.

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