

DESCRIBING THAT WHICH CANNOT BE MEASURED, CATALOGUED, OR CLASSIFIED

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In this narrative, the author describes the case of a three-year-old boy who suffered from physical and cognitive disabilities, and who was severely withdrawn. Over the course of two years and extensive weekly therapy visits, the child developed a strong bond with the author's miniature poodle, Louie, who is a certified therapy dog. At first, he vehemently preferred to watch Louie from a distance. But slowly over time, and with Louie's seemingly intuitive understanding of his special needs, the two became the best of friends. Additionally, the author explains how Louie was integrated into the child's physical therapy regimen to provide variety and motivation. Note: Names have been changed to protect confidentiality.



Nancy Gee and Louie at Work. Photograph by Robert A. Siedentop. Used with permission.

For several years, my two therapy dogs and I have been making weekly visits to an integrated preschool classroom that consists of "identified" and "typical" children. The "identified" children have a variety of developmental delays ranging from language impairments to diagnoses such as Down's syndrome or autism. Our role in the classroom has been focused on increasing and improving verbalizations and the execution of gross motor skills.

In addition to the widely accepted benefits of physical activity for people of all ages, physical activity is considered crucial to the overall development of children (Trost, Fees, & Dziewaltowski, 2008). It has been shown to

facilitate cognitive and social development (Olds, Kranowitz, Porter, & Carter, 1994; Sollerhed, Apitzsch, Rastam, & Ejlertsson, 2007; Stork & Sanders, 2008), and there appears to be a strong relationship between the development of gross motor skills and language (Rarick, 1980). As children develop more sophisticated motor skills, their capacity for language improves as well.

Initially, our approach was limited to classroom visits during which the children interacted with the dogs in a variety of ways. First, we taught them appropriate ways of interacting with dogs and then we taught them the verbal commands they could use to produce specific behaviors. We also taught them nonverbal signals to give to the dogs to produce the same behaviors. Later, we began a more physical program that involved playing games like "follow the leader" and "Simon says." In each case, the dog was the leader of the activity.

As you might imagine, the anecdotal evidence of the effectiveness of our visits was plentiful. For example, it appeared to the teachers, aides, and some parents that the children were more willing to try to speak in the presence of the dog. They talked about the dogs before they arrived, they talked more during the visit, and they went home and told their parents about the dogs. Further, they seemed to enjoy giving the dogs commands to perform tricks and they seemed to want to play physical games that involved the dogs. But because I am a cognitive psychologist by training, I felt the need to examine this

scientifically. Four years ago, my students and I began conducting controlled laboratory experiments where we have investigated the effectiveness of Animal-Assisted-Intervention (AAI) on a variety of cognitive and motor skills in this preschool population. To date, this research has demonstrated that preschool children perform gross motor skills faster in the presence of a therapy dog while not sacrificing accuracy (Gee, Harris, & Johnson, 2007), they are more likely to adhere to instructions in the presence of a therapy dog (Gee, Sherlock, Bennett, & Harris, under review), and they make fewer errors on a categorization task in the presence of a therapy dog than either a human or a stuffed dog (manuscript in preparation).

Since I began doing this research, I've come to realize that certain aspects of the relationship that children can develop with a dog are scientifically measurable, such as those just described. However, there are other aspects of this relationship, or bond, or connection, between a dog and a child that are unique and thus very difficult to examine scientifically or in the aggregate. The true value and depth of these connections can only be experienced through examination of individual cases. Although I have many examples of heartwarming experiences related to my line of research and the many therapy visits my dogs and I have made over the years, one individual child really stands out.

Adam was about three years old when I first met him during a classroom visit. He was nonverbal, withdrawn, and severely physically disabled. The teacher told me in advance of our visit that she was unsure about how he would react to the dogs, but it was possible that he might not even notice their presence. The children were all sitting "criss-cross apple sauce" in a circle on the floor when I came into the room, except for Adam, who was being held by his aide slightly apart from the group. The teacher and I carefully watched Adam's response to the dogs.

My two certified therapy dogs are both miniature poodles. Louie, a neutered male, is very mellow and loves to be held and hugged, and he also enjoys performing his large repertoire of tricks for the children. Nikki, a

spayed female, can perform tricks also, but her favorite thing in the whole world is to play fetch and tug of war. Nikki is very active and enjoys counting with the kids. I will hold up one finger and ask "How many?" and the kids will shout out "One!" and Nikki will bark one time. Then I will hold up two fingers and ask "How many?" and the kids will shout out "Two" and Nikki will bark two times. Nikki can count to 10 in this fashion and she does so at the top of her lungs.

On this particular day, Louie had done some of his tricks and was sitting quietly on the floor next to me while Nikki was playing fetch and tug of war and counting with the group of kids. I noticed that Adam was intently watching Louie, who wasn't doing much of anything. I also noticed that he cringed and shrunk away each time Nikki barked during the counting game. At the end of our session, I asked one of my students to take Nikki outside for a walk and the teacher and I asked Adam if he would like to meet Louie. We got no response. So we brought Louie closer to Adam, who immediately went into a defensive posture and began screaming. That reaction made this first meeting feel a complete failure, since Louie hadn't actually gotten within three feet of Adam that day. Adam had seemed completely mesmerized by Louie, so I really thought that he would want to meet him.

The next few sessions went similarly, except that each time Adam seemed to show a bit more interest in Louie and Louie was able to be closer to Adam as long as we didn't make a point of purposely approaching him. Louie could walk right by him on the way into or out of the classroom and that didn't seem to bother Adam at all. Louie could also lie down next to Adam and his aide as long as this was incidental to the day's activities and we didn't act as if it were being done for Adam's benefit. One day, Adam's aide was able to pet Louie with Adam watching intently, but when asked if he wanted to pet Louie, Adam again went into the defensive posture and began making guttural sounds that clearly indicated that the answer was "NO!"

Adam had physical therapy sessions every day that involved, among other things, walking exercises. One such exercise involved his aide

holding both of his hands and helping him to take steps in the hallway outside of the classroom. One day, Adam and his aide were in the hallway when I happened to walk by with Louie on his leash. Adam saw Louie, perked up, and took several steps in our direction with his aide hard pressed to hang onto his hands. Adam was trying to follow Louie, so I stopped to let him catch up. He stopped dead in his tracks and did not approach any closer. I decided to move on our way and Adam did the same thing again, but we quickly outpaced him. The aide told me later that Adam continued to search the hallways for us for several minutes after we were gone. Adam's aide also revealed that he had very little motivation for his physical therapy exercises and she was surprised when Adam had moved so quickly to follow Louie.

More in-class sessions followed, during which we made a point of routinely walking Louie past Adam without ever actually approaching him directly. One day, after the kids sang the Louie and Nikki song that always marked the end of the session, Louie and I were walking past Adam when he tentatively reached out his hand and let it rest on Louie's back. Demonstrating the intuitive understanding of humans' needs that makes him a remarkably successful therapy dog, Louie didn't react to Adam's touch or turn to face him, as he might have with another child, but just kept walking. Adam's eyes grew wide and he seemed to tense as he waited for Louie to react. When Louie didn't react by the time we were several feet past Adam, he laughed the biggest, most joyful laugh I'd ever heard him produce. He was still laughing when we left the classroom.

This went on for several more sessions. Adam would reach out and touch Louie as he walked by, Louie would completely ignore him, and then Adam would laugh hysterically. During some of the sessions, we would take all of the kids upstairs to my lab, which is in the same building and is set up like a big playroom. They would take turns following Louie and Nikki through tunnels, over jumps, and through a set of dog agility weave poles. Adam, whose physical disabilities really limited his mobility, was asked if wanted to crawl through the

tunnel and again he didn't respond. However, when he saw Louie do it, he began squirming to get away from his aide. The next thing we knew, Adam had crawled into the tunnel. He was halfway through the tunnel before we realized that he wasn't planning to come out the other end. He was laughing hysterically at this point because he saw that it could be difficult for an adult to squeeze into the tunnel to get him out. Louie, again demonstrating his ability to assess human circumstances, dashed into the tunnel and did a play bow just out of Adam's reach. Adam didn't know what to make of it, so he just sat there. Louie turned around and ran out of the tunnel. Adam still sat there. Louie did it again, but more slowly, and this time Adam tried to reach out and touch Louie as he exited the tunnel. Louie continued this process, staying just out of Adam's reach until he coaxed Adam into following him out of the tunnel. When Adam saw that he was outside the tunnel, he puffed out his little chest and smiled as if he had just accomplished something really big, which he had. He had never crawled through a play tunnel before.

Over the course of the next two years that Adam attended the preschool, we capitalized on the connection he was developing with Louie. I taught Louie how to push a roller board around with his front two paws on the board and Adam would push his roller board in pursuit of Louie. When Adam began working on walking up stairs as part of his physical therapy regimen, we used Louie as a motivator to encourage Adam to go up the stairs in pursuit of Louie. At first, Adam couldn't lie on the ground and roll his own body over, but he would watch Louie roll over and try it himself. His aide would help him to complete the rollover and Adam would laugh, apparently because he really loved doing what Louie had done. Ultimately, Adam learned to roll over by himself, and then we would have rollover competitions to see who could roll over and over faster. We even set up a start line and finish line. Louie beat him regularly at first, but ultimately Adam won the race. Then we set up miniature obstacle courses where Adam would follow Louie over the jump, through the weaves, and through the tunnel. Adam's connection with Louie grew stronger and

stronger. He was happy for Louie to approach him and he readily petted and hugged Louie as if they were long lost friends. I'll never forget the first time I heard Adam say Louie's name.

Adam grew and matured quickly. When I first met him, he was nonverbal, withdrawn, and severely physically disabled. Over the course of our time together, I saw Adam learn to walk on his own and even go through obstacle courses. He could speak, although his language skills were still delayed relative to his age-mates, and he was able to communicate and interact with those around him. Louie certainly wasn't responsible for all of these things, but there was something special about his interactions with Louie that contributed to these accomplishments in a way that can't be measured, or classified, or catalogued. But it is real nevertheless.

Adam graduated and Louie and I haven't seen him since that time. Frankly, I'm not sure that Adam will even remember us when he grows up, but I can assure you that I will never forget him and that special connection that he had with Louie.

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In addition to their therapy dog sessions with preschoolers, Associate Professor of Psychology Nancy Gee and her miniature poodles Louie and Nikki conduct research in the area of canine-human interventions at the State University of New York at Fredonia. They are interested in learning more about which specific aspects of the interaction between dogs and children can be most helpful to the children's development. They also moonlight in the world of dog agility, where Nikki has finished among the top dogs in her size in national competitions. Comments regarding this article can be sent to: gee@fredonia.edu



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