

Animal-Assisted Intervention (AAI) for Reducing Agitated Behaviour Among Institutionalized Elderly with Dementia in Hong Kong – A Pilot Evaluation Study

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Background

- The Hospital Authority estimated that the prevalence rates of dementia is 5%-8% among persons aged over 65, and at 20% - 30% among those aged over 80 (HA, 2017)
- The prevalence rate of dementia in institutional care would probably be higher, a study in 2008 estimated the figure to be 30.7% (Yu et al, 2012)
- Behavioural and psychological symptoms (BPSD) of dementia such as wandering, agitation, aggression and noisiness are common; and provision of care and symptom management is a challenge to residential care staff
- Empirical evidence suggested that AAI has demonstrated some promise in increasing pro-social behaviour and reducing BPSD in people with dementia. Interaction with the therapy animal may induce a calming effect which is associated with a reduction in agitation as well as verbal and non-verbal aggressive behaviours. (Bernabei et al, 2013; Marx et al, 2010; Perkins et al, 2008; Filan & Llewellyn-Jones, 2006)

Objectives

To evaluate the impact of a pilot animal-assisted intervention programme (Dr. Dog Programme) in reducing the agitation behaviours and improve the negative emotions of institutionalized elderly with dementia

Participants

Elderly persons assessed to be suffering from dementia who were institutionalized in private Residential Care Home for the Elderly (RCHE) in Hong Kong



Method

A pre-post study design was adopted to examine the changes of the participants' behaviours and emotions before and after completion of the Dr. Dog Programme

Measures

Cohen-Mansfield Agitation Inventory (CMAI)

A 21-item scale to measure the frequency of *agitated behaviors* in elderly

Observed Emotional Rating Scale (OERS)

A figurative measure to assess the *emotions* of older persons with dementia in residential setting

T₀ – within 2 weeks prior to commencement

Dr. Dog Programme*

8-sessions over a period of ~ 2 months

Tactile stimulation
Facilitate social interaction
Encourage mobility
Induce positive emotion



T₁ – within 4 weeks after completion

*Consent has been sought from the elderly in the photos to use their picture.

Key References:

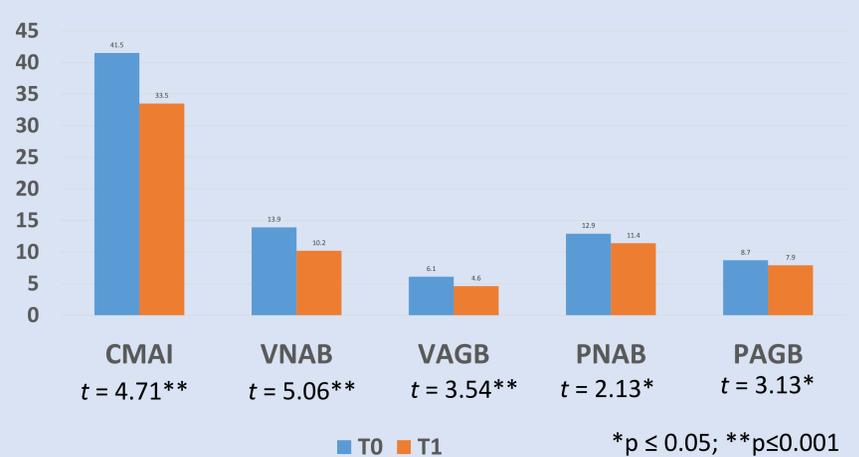
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Profile of the cases

Participants: N = 60; **Gender:** Male: Female = 3 : 7
Age: 75% aged 80 and above

Findings

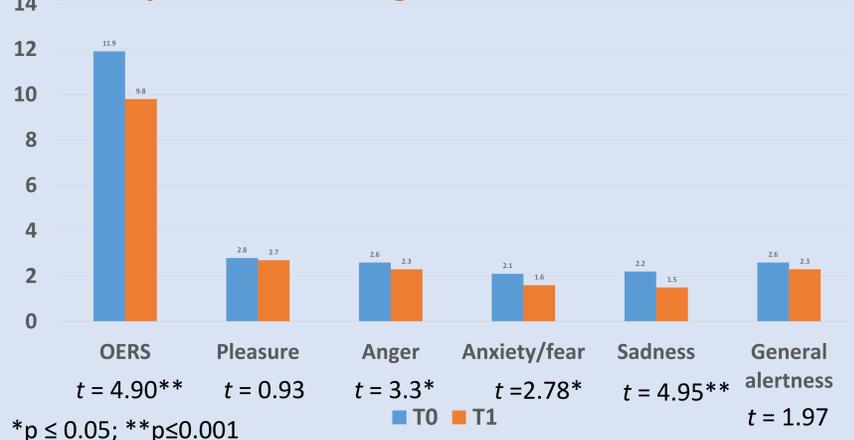
Comparison of changes in CMAI mean scores



Legend:

VNAB: verbally nonaggressive beh **VAGB:** verbally aggressive beh
PNAB: physically non-aggressive beh **PAGB:** physically aggressive beh

Comparison of changes in OERS mean scores



Conclusion

Findings support the hypothesis that AAI is associated with reduction of agitation behaviour and negative emotions among older persons with dementia. With the expected increase in the prevalence of dementia in Hong Kong, the inclusion of AAI in long-term care facilities could be considered as an evidence-based complementary intervention approach in promoting the well-being of this target population.