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"I can be me again": Animal Assisted Interventions with young people experiencing homelessness

Report of program implementation and outcomes

Final Report June 2019



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1. Executive summary

Background

Homelessness among young people is serious and significant social and public health issue. Finding effective ways to support young people experiencing homelessness are critically important. Recent estimates suggest 15% of Australian young people experienced homelessness in 2017 (Fildes, Perrens, & Plummer, 2018). Over \$626 million is spent annually on assisting young people experiencing homelessness through health and justice services (MacKenzie, Flatau, Steen, & Thielking, 2016). Experiences of childhood trauma and abuse are commonplace for young people experiencing homelessness (Bearsley-Smith, Bond, Littlefield, & Thomas, 2008; Kendall-Tackett, 2002) and pose significant risk for long-term health and wellbeing. Young people experiencing homelessness commonly report reduced engagement with health and support services (Heerde & Pallotta-Chiarolli, 2019); engaging these young people in support services is complex, yet vital in supporting their wellbeing.

Pets have a significant role in families and child and adolescent development (Boat, 2010; Walsh, 2009). There is an increasing focus on the relationship between humans and animals, particularly using animal-assisted interventions (AAI) (Jones, Rice, & Cotton, 2018; Jones, Rice, & Cotton, 2019). For vulnerable groups, including young people experiencing homelessness, AAIs have shown benefits in therapeutic settings, through the development of trusting and positive relationships and increased personal and social skills (Jones et al., 2018; Jones et al., 2019; Kelly & Cozzolino, 2015; Labrecque & Walsh, 2011). The positive value of including animals in homelessness services has been recommended (Heerde, Jones, & Fotiadis, 2017).

About the research

Contemporary Australian research investigating the use of AAI's in service settings is particularly lacking. This report details the implementation and outcomes of an AAI, conducted by Lead the WayTM Psychology and Animal-Assisted Therapy at Frontyard Youth Services. Three research questions were investigated:

- (1) Is it feasible to implement AAI's in service settings assisting young people experiencing homelessness?
- (2) What strategies assist or inhibit the implementation of AAI's in youth homelessness service settings? and
- (3) How does engagement in an AAI assist young people experiencing homelessness?

To investigate these aims routine program attendance records and qualitative feedback from young people and staff, were examined. Service attendance records for young people accessing services from Frontyard and participating in the AAI were also examined.

Key findings

Results from the current report suggest it is feasible to implement an AAI in a service setting with young people experiencing homelessness.

Engagement in the AAI resulted in many positive benefits for young people experiencing homelessness. AAI engagement appears to have positive benefits for young people's emotional regulation, the development of positive social relationships and young people's engagement with service staff. The findings suggest the feasibility of implementing an AAI at Frontyard Youth Services is facilitated by a number of key processes and strategies in areas including: (1) building effective partnerships; (2) intensive planning and development; (3) project resourcing; (4) project evaluation; (5) strategies for engaging young people; and (6) developing a safe and inclusive environment. Strategies and processes across these areas ensured a

clearly defined, supported and workable AAI was integrated, within the fiscal demands of Frontyard Youth Services.

Together, project findings can be used to inform the further development and implementation of AAI's in service settings with young people experiencing homelessness. This project contributes to understanding that there are important benefits in implementing AAI's in homelessness service settings within evidence-based prevention and early intervention approaches.

2. Introduction

Finding effective ways to support young people experiencing homelessness are critically important. This project was designed to explore the feasibility of incorporating animal assisted interventions (AAI's) into Frontyard Youth Services, to assist young people experiencing homelessness. This report details the implementation and outcomes of the AAI, conducted by Lead the WayTM Psychology and Animal-Assisted Therapy. The report begins with a general overview of homelessness among young people and the use of AAI's in homelessness service settings. Following, the methodology used to collect and compile the data analysed in this report are summarised. This section includes an overview of the internal processes engaged in by staff at Frontyard Youth Services to ensure ongoing implementation of the AAI. Next, the feasibility and outcomes of the AAI are detailed. Finally, the implications of the main project findings are discussed, including recommendations for future AAI development and implementation.

2.1. Homelessness among young people

Homelessness among young people is a significant social and public health issue. In Australia it is estimated 15% of young people reported experiencing homelessness in 2017 (Fildes, Perrens, & Plummer, 2018). The annual cost of health and justice services for young people experiencing homelessness in Australia is estimated as being \$626 million, not including the provision of accommodation and support services (MacKenzie, Flatau, Steen, & Thielking, 2016). Although Australia's prior homelessness and housing policies seek to support young people who are experiencing homelessness, or are at-risk of homelessness, rates of homelessness continue to rise, meaning that new approaches to support young people, are critically needed.

Experiences of childhood trauma and abuse are commonplace for young people experiencing homelessness (Bearsley-Smith, Bond, Littlefield, & Thomas, 2008; Kendall-Tackett, 2002). Early childhood adverse experiences (ACES) and interpersonal trauma results in feelings of helplessness, fear, distrust and distress. To contend with the complexities and feelings associated with experiencing homelessness and to reduce their vulnerabilities, young people are required to bring together their internal (e.g. ability for self-regulation) and external (e.g. support from services) resources. Markedly, young people's histories of developmental trauma (e.g. ACES) negatively affect their internal resources for developing connections with and obtaining support from trusted adults that often results in disconnection from health services, education, and employment (Bearsley-Smith et al., 2008).

Engaging young people experiencing homelessness in support services is complex, despite safe, non-confrontational interactions with health professionals being vital in supporting the wellbeing of these young people. In recent research, young people describe their interactions with health professionals with feelings of shame and stigma and perceptions of unequal power relationships (Heerde & Pallotta-Chiarolli, 2019). Social barriers, including perceived discrimination, have also been reported by young people as barriers to accessing assistance from health and support services (Ensign, 1998, 2004; Hudson et al., 2010). Adaptable strategies that support young people, maintain neutrality, and acknowledge the feelings of shame, stigma and vulnerability experienced by young people have an important role in service delivery (Davies & Allen, 2017; Heerde & Pallotta-Chiarolli, 2019).

2.2. Animal Assisted Interventions in Homelessness Service Settings

Pets have a significant role in families and child and adolescent development (Boat, 2010; Walsh, 2009). Against a background of activities and interventions designed to address a range of social and psychological problems, there has been an increasing focus on the relationship between humans and animals, particularly using animal-assisted interventions (AAI) (Jones, Rice, & Cotton, 2018; Jones, Rice, & Cotton, 2019). AAIs are formal and informal activities and interventions which are underpinned by the inclusion of animals

(Jones, 2017; Kelly & Cozzolino, 2015) and are shown to have benefits for clients in relation to emotional distress, social relationships and coping skills (Kelly & Cozzolino, 2015).

Despite many young people who experience homelessness not owning their own pets, there is evidence to suggest that animals still play an important part in the lives of these young people and may elicit the importance of welfare and safety. Specifically, for vulnerable groups (including young people experiencing homelessness), AAIs have shown benefits in therapeutic settings, through the development of trusting and positive relationships (between the client and the animal), associated with decreased confrontational and negative behaviours and increased personal and social skills (Jones et al., 2018; Jones et al., 2019; Kelly & Cozzolino, 2015; Labrecque & Walsh, 2011). The use of canines in AAIs has been shown to have benefits for clients in relation to self-esteem, emotional distress, social relationships and coping skills (Kelly & Cozzolino, 2015; Maujean, Pepping, & Kendall, 2015). The positive value of including animals in homelessness services has been recommended (Heerde, Jones, & Fotiadis, 2017; Jones et al., 2019; Labrecque & Walsh, 2011).

Contemporary Australian research investigating the use of AAI's in service settings is particularly lacking (Jones et al., 2018; Jones et al., 2019), including in settings delivering services to young people experiencing homelessness (Heerde et al., 2017). At the time of compiling this report, the author has been unable to locate any Australian studies on the use of AAI's with this group of young people. This report presents an investigation into the implementation and outcomes of an AAI with young people experiencing homelessness, in Victoria, Australia. Three research questions were investigated: (1) Is it feasible to implement AAI's in-service settings assisting young people experiencing homelessness?; (2) What strategies assist or inhibit the implementation of AAI's in youth homelessness service settings?; and (3) How does engagement in an AAI assist young people experiencing homelessness?

2.3. Melbourne City Mission

Established in 1854, Melbourne City Mission works with some of Melbourne and Victoria's most vulnerable individuals (including young people), families and communities to reduce disadvantage, economic exclusion and social isolation. Melbourne City Mission delivers a range of trauma-informed, integrated services designed to make a difference in people's lives. These services include providing assistance to children living with a disability; assisting young people who are at-risk of, or experiencing, homelessness; education and employment; and assistance with physical and mental health and wellbeing. Furthermore, Melbourne City Mission is a leading advocate for social change and early intervention, working to decrease the number of people experiencing disadvantage.

2.3.1. Frontyard Youth Services

Melbourne City Mission established Frontyard Youth Services in 1989. Frontyard is one of Victoria's largest integrated services assisting young people aged 12-25 years who are experiencing homelessness, are at risk of homelessness, are disengaged or require support. Located in Melbourne's central business district, Frontyard provides integrated services, through co-located agencies, attending to the physical, social and emotional needs of young people. Frontyard assists young people in areas including case management; housing; finance; life skills; physical health; mental health; dual diagnosis; legal; family reconciliation; parenting; education; and employment.

2.4. Frontyard Youth Services Animal Assisted Intervention Program

To explore the feasibility of incorporating animal assisted interventions into services for young people experiencing homelessness and to document a framework for the implementation of such interventions, Frontyard Youth Services began preparing for the delivery of an Animal Assisted Intervention Pilot Program in July 2016. Herein, unless otherwise specified, the AAI program is referred to as 'the Program'.

2.4.1. Program development

The pilot Program was designed to be integrated alongside other programs and projects being implemented at Frontyard. Program development was conducted over three stages:

- 1. **Development:** This phase included the development of a project plan consisting of a specific objectives and timeframes (including key program milestones and deliverables);
- 2. **Research and review:** This phase included a comprehensive review of external consultants conducting animal assisted interventions/animal therapy programs and the feasibility of these consultants to conduct the Program at Frontyard; and
- 3. **Program authorisation:** Information gathered through Stages 1 and 2 was integrated into a complete report and presented to the Therapeutic and Young People Group at Frontyard for review and feedback. Feedback and recommendations from the Group were acted upon and a final report presented to the Frontyard Intensive Youth Support Senior Management group.

The culmination of the three-program development stages resulted in the introduction of a three-month Animal Assisted Intervention Pilot Program at Frontyard Youth Services. The Program was designed to achieve a number of objectives:

- Reduce the stress and anxiety experienced by young people situated in the waiting area of Frontyard;
- Provide an opportunity for positive social interaction among young people;
- Reduce episodes of aggression commonly experienced by young people (due to their lived experience and current circumstances);
- Enhance rapport between staff and young people;
- Increase young people's engagement (e.g. in peer education, sharing information and support);
- Support young people's ability to engage with their peers and case managers; and
- Support young people to more effectively engage with co-located and visiting services (e.g. Young People's Health Service, Department of Health and Human Services, Youthlaw).

Approval to conduct the Animal Assisted Intervention Pilot Program at Frontyard was obtained in December 2016.

2.4.2. Program funding

Melbourne City Mission engaged Lead the Way[™] Psychology and Animal-Assisted Therapy (LTW), an external consultant specialising in the delivery of animal assisted interventions and animal therapy programs, to conduct the Pilot Program at Frontyard. LTW provides clinical services, and professional training in the theory and practice of delivering animal assisted interventions. The costs associated with engaging an external consultant were carefully considered. Funding for the Pilot Program was accommodated within the Frontyard Youth Services budget. Program development and implementation was supported by a detailed budget.

2.4.3. Reviewing Program implementation

Broad project management and program review tools were developed at the outset of the Pilot Program. These tools included both program attendance and retention records and qualitative feedback from young people and Program staff. Senior Management monitored the implementation of the Program and approved extensions as the Program progressed.

Program reporting measures included:

• The delivery of regular project update reports, and a final Program report detailing the Pilot Program to the Senior Manager, Intensive Youth Support;

e delivery of an externally written final report detailing Program implementation and outcomes.					

3. Methodology

3.1. Ethics approval

The University of Melbourne Human Research Ethics Committee provided permission to conduct the evaluation (Approval number: 1851686.1).

3.2. Program structure

Given the potential of AAI's to mitigate against the challenges faced by young people at risk of, or experiencing, homelessness, Frontyard engaged Lead the Way™ Psychology and Animal-Assisted Therapy (LTW) to deliver an initial 3-month pilot Program (Phase 1). Following, the Program was extended for an additional four 3-month programs (Phases 2-5). Each Phase of the Program conducted at Frontyard consisted of 12 weekly animal-assisted activity sessions of 3-hours duration with at least two therapy dogs. Each session was facilitated by a registered psychologist, certified in conducting AAI's, with support given by Frontyard staff. Young people were offered opportunities to take part in some semi-structured activities, including trick training with the therapy dogs (e.g. shaking hands, going through tunnels), or simply relax with the therapy dogs.

3.3. Assessing program implementation and outcomes (Phases 2-5)

To review the implementation of the Program and young people's engagement, routine Program attendance records and qualitative feedback from young people and staff, were examined. Service attendance records for young people accessing services from Frontyard and participating in the Program were also examined.

3.3.1. Data collection and analysis.

Data collection. Program attendance was routinely recorded for each session by Frontyard staff. Data for service attendance were gathered through a file audit of routine Specialist Homelessness Information Platform (SHIP) data collected from all young people who sought assistance from Frontyard. The file audit was conducted for young people who attended the Program at least once between April 2017 and August 2018 and was performed by Frontyard staff.

Qualitative feedback was gathered by Frontyard staff from both young people and staff. In some cases, young people's reading abilities were limited; in these instances, Frontyard staff read out aloud the feedback questions to young people and transcribed their responses. Frontyard staff explained that providing feedback was voluntary, and that young people were able to withdraw their feedback at any point. All feedback was collated by Frontyard staff and provided to Dr Heerde.

Qualitative feedback related to young people's perspectives on their participation in the Program including: how they felt before and after engaging with the therapy dogs; the benefits of participating in the Program session(s); their experience of the Program session(s); and potential improvements to the Program.

Qualitative feedback was also gathered by Frontyard staff from Senior MCM staff members. Staff were asked to reflect on young people's engagement with the Program; Program benefits; young people's engagement with multiple services across Frontyard; factors influencing the conduct of the Program sessions; and potential improvements to the Program.

Data analysis. The coding and categorization of qualitative feedback was supported by NVivo 11 software (QSR International, 2016). Inductive analysis was used to identify patterns and themes within the data. Several techniques were applied to ensure rigorous data analysis (Morse, 2015). After reading the qualitative responses, the feedback questions were used as a framework by which to identify emergent themes. A list of framing codes and categories were generated through this process. The identification of connections and patterns across the data was aided by multiple readings of the qualitative responses. Subcategories and sub-themes were then refined and collapsed into higher-level, more detailed themes.

Patterns and themes were analysed using narrative inquiry to understand the experiences of young people and staff in relation to the Program, the context in which these experiences occurred, and the meanings ascribed to these experiences (Brown, 2012).

As sensitivity to the safety and anonymity of all young people and staff who contributed qualitative responses was crucial, identifying information was removed from the analysis conducted. Where relevant, names of young people and staff were replaced with pseudonyms, removed or replaced with fictitious names. To foreground the perceptions of young people and staff, qualitative responses (including the language used by young people and staff) were deliberately not edited or "cleaned." This process provides a linguistic insight into the experience of Program involvement and implementation; these are integral in developing a comprehensive appreciation of how young people and staff describe and reflect upon their experiences of the Program.

4. Findings

This section documents the key activities and strategies used to implement the Program at Frontyard. It also details young people's engagement with the program and their reported outcomes and benefits.

4.1. Key elements of program implementation

- Consistent program staff with appropriate skills and expertise
- Regular sessions held at familiar and fit for purpose locations
- Clear guidelines and criteria for program participation
- · Careful planning around participant safety and risk
- Structured and semi-structured activities designed around the needs of young people

The consistent nature of the Program structure and organisation was key to its successful implementation. Melanie Jones, a qualified Psychologist, Animal-Assisted Therapist and the Director of Lead the Way, and her team delivered the Program across each Phase. Ms Jones was supported by a Program Officer at Frontyard and other co-located workers. Ms Jones engaged at least two therapy dogs for each Program session.

During each Phase, Program sessions were conducted on the same day, weekly, for 3-hours in the 'basement' of Frontyard (an open area in which young people are able to spend time interacting and relaxing) and from the temporary site in Flinders Street (due to office construction in late 2018 and early 2019).

The establishment and communication of clear guidelines and regulations, to staff and young people, concerning Program participation was also imperative to ensure program success. Inclusion criteria for participation in the Program included young people: displaying a stable state of mental health; not being at-risk of self-harm; and not posing risks to therapy dogs, involved staff, or other young people engaged in the Program.

The safety of all young people, the therapy dogs and Program staff was paramount. All young people were required to register for each Program session they attended. Each young person was informed of the guidelines underpinning their involvement in the Program. This included displaying respect for staff, other young people and the therapy dogs. Guidelines associated with interacting, handling and sharing the therapy dogs were also explained to young people prior to their participation. To ensure young people's health and safety, all young people were asked about any existing allergies to dogs and were briefed in hygiene associated with interacting with the dogs (i.e. hand washing and/or using hand sanitisers each time they touched one of the dogs).

During each Program session, young people were provided with the opportunity to take part in a range of structured and semi-structured activities or to simply have a break and engage informally with therapy dogs. The structured activities included engaging young people in learning the skills to instruct the therapy dogs to complete 'tricks' (e.g. going through tunnels, jumping over hurdles, sitting, shaking hands etc). Engaging in the learning and instruction of these activities offered young people opportunities to build a relationship of trust with the therapy dogs, as well as with Program facilitators and other young people engaged in the Program (as will be described in detail later in this report). Many young people who were present at the Program sessions, displayed confidence and pride in introducing the therapy dogs to other young people, and to teaching other young people the skills required to engage the dogs more effectively (e.g. to get the therapy dogs to perform tricks).

4.2. Strategies for engaging young people in the program

- Support from internal stakeholders and partner organisations to promote the program
- Use of social media platforms
- Follow-up strategies via SMS and email

The Program was available to all young people accessing services at Frontyard. The Program was extensively promoted prior to the commencement of Phase 1. As part of this promotion, a poster (see Appendix 1) was developed and distributed among the co-located services at Frontyard, all Melbourne City Mission refuges and other relevant services within the inner Metropolitan Melbourne area.

Co-located services at Frontyard and other internal stakeholders were asked to promote the Program to young people. This process was supported by case managers and management at Frontyard to further engage young people in the Program.

Following program commencement, strategies to ensure young people's continued engagement in the Program were implemented in addition to those strategies already in place to promote the Program. Social media, including the Frontyard Youth Services Facebook site and Twitter account were used to promote the Program further and to remind young people of the weekly Program sessions.

Last, following the commencement of the Program, a detailed data base of young people's attendance was developed. This database was cross referenced with databases for co-located services at Frontyard to ensure participation details were as accurate and comprehensive as possible. This database was used to send regular SMS's about the weekly sessions to young people who had taken part in at least one Program session. Weekly emails were also sent to all Frontyard co-located services, all Melbourne City Mission refuges and other relevant services within the inner Metropolitan Melbourne to remind them of the Program sessions.

These processes were integral to ensuring young people's ongoing engagement in the Program.

4.3. Program attendance

- Over 800 young people took part across all Program phases
- At least 20% of young people accessed co-located services following Program participation

Attendance data shows high levels of engagement in the pilot Program (Phase One). Across this Phase, 171 young people (males 80 and 91 females) aged 17 to 24 years took part in the Program over the course of the 12 weeks. The success of the initial Pilot Program is shown in its having run for an additional four stages. The 5 Phases are detailed as follows:

- Pilot Program (Phase One): 26 April 2017 to 26 July 2017
- Phase Two: 23 August 2017 to 29 November 2017
- Phase Three: 14 February 2018 to 23 May 2018
- Phase Four 29 May 2017 to 2 October 2018
- Phase Five 9 October 2018 to 15 January 2019.

To date, the Program has been extended to run again in Phase 6. This Phase began on the 20 February 2019 and will run for 12-weeks.

Attendance data shows there were 830 participants¹ across all phases of the program. Program attendance across the Phases are as follows:

- Phase 1, 171 young people
- Phase 2, 216 young people
- Phase 3, 158 young people

- Phase 4, 173 young people
- Phase 5, 112 young people

The analysis of SHIP data showed 266 young people who participated in at least one of the Program phases also sought assistance from co-located services at Frontyard. These young people ranged in aged between 17 and 24 years, with a mean age of 20.17 years. Approximately 43% of these young people identified as being male. Nine young people described their gender identity as 'other.'

SHIP data showed young people participating in the Program attended Frontyard to access a range of support services. The primary reasons for presentation included attending the following programs and services:

- Young People's Health Service (primary health care for young people experiencing homelessness);
- Melbourne Youth Support Service (the state-wide homelessness access point service);
- Young Women's Crisis Service (intensive crisis support for young women);
- Youthlaw (legal information, advice and casework for young people);
- Young and Pregnant Parenting Program (case management and drop in services for young parents at risk of or experiencing homelessness);
- Youth Action Group (advocacy group for young people);
- Gateway Reconnect and Detour (programs that provide early intervention for youth homelessness);
- Creating Connections (living skills training for young people experiencing homelessness); and
- The Hester Hornbrook Academy (independent school run by Melbourne City Mission that provides flexible, community-based learning)

Approximately 20% (n=50) of young people taking part in the Program accessed more than one of Frontyard's services. These services included those relating to checking in; outreach; housing; income/financial counselling, mental health, and living/job skills; Youthlaw; attending music therapy; attending a cooking class; attending the Young and Pregnant Parenting Program; attending the Young People's Health Service; to see an Intensive Support Worker; and to attend the Young Women's Crisis Services. Outreach assistance included: buying items for an upcoming job interview, obtaining a working with children check, registering to participate in 'Sleep At The 'G' activities, having a shower and obtaining something to eat.

4.4. Young people's reported outcomes of Program engagement

- Feelings PRIOR to Program participation: vulnerability, sadness, anxiety and stress
- Feelings FOLLOWING Program participation: Happy, calm, relaxed and alive
- Perceived benefits of Program participation: Increased emotion control and socialisation
- Suggested Program improvements: Increased variety of and time spent with therapy animals, increased session length and range of activities

Over 80 young people described their engagement in the Program through providing qualitative feedback (52 young people during Phase one and 37 young people during Phases two and three). Young people

¹ Based on program attendance data across all Program phases. Attendance data is likely to include young people who participated across multiple Program phases.

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typically provided their feedback after they had engaged in 3 to 4 Program sessions. Young people were provided with the opportunity to reflect openly about their experiences in the Program (as described in Section 2.3.1). Given the transient nature of young people, it was often challenging for Frontyard staff to locate young people who had engaged with the Program. Although many young people were comfortable providing feedback on the Program, others were uncomfortable with this process and declined to provide feedback.

4.4.1. Young people's feelings and emotions prior to Program participation

Central to the narratives of most young people were feelings of vulnerability and sadness. Many young people described their engagement in the Program as being predicted by feelings of unhappiness:

"suicidal, sad, upset with things" and "unhappy because of family issues."

Young people's recollections also conveyed feelings of stress and anxiety. In some instances, this stress and anxiety originated from the anticipation of engaging with other young people attending the Program:

"I get anxious around new people and I get stressed easily."

However, in most cases this feeling of anxiousness and worry stemmed from the circumstances leading to their seeking assistance from Frontyard:

"I was really stressed and worried about things" and "I was pretty stressed before engaging with the therapy dogs. I had a lot on my mind and was uneasy."

Despite describing feelings of sadness and worry, the anticipated contact with the therapy dogs through the Program was described using refreshing and welcoming terms. As these young people said:

"I felt excited before I saw the dogs" and "always excited to see them [dogs]."

4.4.2. Young people's feelings and emotions following Program participation

After describing their feelings prior to Program participation, young people reflected on their feelings following their interaction with the therapy dogs. This question prompted contemplations which contrasted with the sadness and anxiousness described earlier:

"relaxed," "happy," "I feel much better" and "I felt less stressed and lighter."

Specifically, young people's narratives reflected happiness, calmness and comfort. Upon reflection many young people reconsidered their emotions and the impact of engaging in the program on their mood:

"I feel extremely content and calm now", "I feel more at peace with myself" and "The dogs bring happiness and they are comforting, and it makes you forget your problems".

The responses of other young people reflected their capacity to be mindful and be in the present moment with the therapy dogs:

"I don't think about anything else but how I am going to get another hug from Opal", "The dogs make me feel happy and alive", "I forgot about my problems" and "Made me feel relaxed and be able to enjoy the time that I had with the dogs".

These self-reflections show an improvement in mood from the reflections and views young people had prior to Program engagement. Several young people also reflected on pets from earlier points in their lives and their desire to have a dog with them more often:

"The dogs are a great stress release. It reminds me of all the good times I had with my pets", "I would like to have a dog of my own when I find my own place", "I felt relieved and wanted to take the dogs with me" and "I get to have pets without having pets".

4.4.3. Benefits of Program participation

Being able to control feelings and be more social with others were benefits frequently described by young people when recalling their participation in the Program and interactions with the therapy dogs. Many young people described the therapy dogs as being non-threatening or intimidating:

"cute," "adorable," "affectionate" and "warm."

These feelings and perceptions frequently led to young people describing the effects of their program involvement positively. Words young people used when talking about the benefits of the program included:

"happy, fun, laughter," "content," "joy" and "security, relaxed safe, calm, comfortable".

Experiences in the Program and interactions with the therapy dogs were described across three major areas of benefit: a) decreasing negative emotions, b) inducing calming behaviour and c) increasing social interactions and relationships. Many young people described their participation in the Program as reducing **negative emotions**. As these young people described in relation to their 'external' emotions:

"The dogs have helped me control my anger" and "I felt less stressed."

Similarly, many young people described positive benefits to their 'internal' emotions:

"The dogs make me not want to hate myself" and "I enjoy seeing the dogs."

The essence of young people's narratives was the notion of Program participation having a **calming** influence. Young people's interactions with the therapy dogs appeared to facilitate the development of social connections, where they felt comfortable and calmer in themselves and with those around them. Young people spoke warmly of interactions with the therapy dogs:

"The dogs calm me down," "Feel comfortable. The dogs are like a warm water bottle" and "The dogs pick up on my emotions and make me feel more calm."

For other young people, the bond developed with the dogs was shown through narratives describing feeling safe and less anxious:

"I feel less anxious", "My mental health has improved I am a lot calmer and happier" and "Feel safe.

One of the reasons I keep coming back. The dogs make me feel very safe."

The narratives of many young people also explicitly referenced improvements in their **social relationships** following Program participation; improvements which enabled young people to interact with their peers. As these young people described:

"I'm more accepting of other people" and "More social, more talkative, less stress."

Several young people also described their interactions with the therapy dogs as benefiting their interactions with their workers:

"I have a better ability to engage with my workers after seeing the dogs" and "The dogs have made it easier for me to talk to other people at Frontyard".

4.5. Young people's suggestions for program modification and improvement

Feelings of needing to extend the Program to include a range of different animals (e.g. cats, rabbits) was paramount in young people's reflections on how the Program could be improved. Young people spoke decisively about including "different animals" with which to engage. As these young people described:

"More dogs! There aren't enough to go around", "More dogs, different kinds of animals", "More dogs to share with other people", "Have more and different animals – rabbits, cats" and "Cats also for cat people".

For many young people, wanting to spend more time in the Program (namely with the therapy dogs) was central. In many instances, young people's descriptions were related to increased interaction time within sessions:

"Having the dogs here longer," "I want more time with pups" and "Make the dogs stay for a bit longer."

Other young people described wanting to spend more time with the therapy dogs with reference to expanding the number of sessions and range of activities:

"Run more sessions because it is an excellent engaging program", "I would like to take the pups on a walk at a park", "Have the dogs around more frequently to support the young people with their mental health issues" and "The therapy dogs should be at Frontyard more often".

A smaller number of young people, in reflecting on their participation, named specific areas for modifications to the way the Program was implemented. For example,

"Text message notification on a regular basis to remind people of the dog therapy", "Could be used in the HHA [Hester Hornbrook Academy] classrooms across sites to improve engagement, attendance and promote calmer classrooms" and "Young people do 'pet care' course".

4.6. Staff-reported outcomes for young people's program engagement

Eighteen (18) Frontyard staff described their perceptions of young people's engagement in the Program. Staff described the young people's engagement with the Program, perceived benefits, and the influence of program participation on young people's behaviour and ability to engage with services. Suggestions about future program modifications and improvements were also provided.

Overall, staff recollections conveyed young people engaged exceptionally well with the Program, with many young people attending Frontyard on a regular weekly basis to engage with the therapy dogs. As one staff member said, "clients look forward to it – some will come two hours away on public transport to spend time with the dogs."

Most staff discussed the influence of taking part in the Program on young people's emotional state, behaviour and ability to engage with services. Staff recalled young people often presented as unsettled and agitated on arrival at Frontyard. Following their interactions with the therapy dogs staff reported young people were able to better regulate their internal states, were more relaxed and were able to communicate and talk about issues they were facing more effectively. Several staff commented on the social benefits of taking part in the Program, describing how they saw young people connecting with others in the space, engaging verbally with other young people and staff, and beginning to build trusting relationships with others. Staff perceived having the therapy dogs through the Program promoted a sense of environmental and internal safety for young people, where they were able to temporarily forget about the issues and problems they were facing; the dogs were both a distraction and a stress reliever.

Staff reported increases in young people's ability to engage with co-located services following Program participation, with the program providing a specific avenue by which young people entered Frontyard and provided a platform for engagement with workers. In some cases, young people made appointments to consult with staff specifically on the day the Program was running. In addition to the positive comments from staff regarding the program, staff offered suggestions for future program development such as: increasing the frequency of program sessions, including the therapy dogs in one-to-one therapy sessions, and having the therapy dogs available in the Frontyard waiting space for young people not participating in the formal Program.

5. Discussion

Results from the current report suggest it is feasible to implement an AAI Program in a service setting with young people experiencing homelessness.

The findings suggest the feasibility of implementing an AAI in this service setting is facilitated by a number of key processes and strategies:

- 1. **Building effective partnerships:** partnerships between internal Frontyard staff members (including management), co-located services at Frontyard, associated services (e.g. Melbourne City Mission refuges /other inner Metropolitan services) and external services (Lead the Way) contributed to the successful planning and delivery of the Program.
- 2. **Intensive planning and development:** research undertaken in the planning and development stage ensured that the Pilot Program was integrated alongside other programs and projects at Frontyard and enabled the key partnerships to develop.
- 3. Appropriate levels of project resourcing: establishing internal resourcing permitted the engagement of an external consultant (Lead the Way). It is likely that the delivery of the Program by a qualified Psychologist and Animal-Assisted Therapist in partnership with Frontyard case managers has contributed to the benefits reported by young people. These processes are likely to be important in ensuring young people are provided with access to debriefing or support during, or following, their program involvement.
- 4. **Data collection and evaluation:** project management tools and program evaluation measures were established at the outset of the program.
- 5. **Strategies for engaging young people:** the strategies devised and applied to engage, support and increase, young people's participation in the Program were a key part of its success. Although resource-intensive, these ongoing communication patterns with young people have underpinned the success of this Program.
- 6. **Safe and inclusive environment:** Although young people who engaged in the Program were from a range of co-located and sometimes external services, the fact that the Program was delivered in a safe, inclusive and friendly environment is likely key to its success and the benefits reported by young people.

The above processes ensured a clearly defined, supported and workable program was integrated, within the fiscal demands of the organisation.

Engagement in the Program resulted in many positive benefits for young people experiencing homelessness. The results suggest there is an important connection between engagement with the therapy dogs (through the Program) and both decreasing negative emotions and increasing social relationships. Frontyard adopts a trauma-informed care framework across the service settings; this was extended to the Program. This framework "is a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological and emotional safety for both providers and survivors and that creates opportunities for survivors to rebuild a sense of control and empowerment" (Hopper, Bassuk, & Olivet, 2010, p. p. 82). The continued development, implementation and evaluation of the AAI Program at Frontyard, and within the trauma-informed care framework is recommended.

6. Recommendations

Based on the results presented in the current report the following recommendations are made for the further development and implementation of AAI Programs in service settings with young people experiencing homelessness.

Recommendation 1: Engage young people in the planning and development of future AAI programs.

Collaboratively engaging young people in the development of services has been recommended in health and social care settings (Gillard et al., 2010). These practices are likely to encourage comfort, trust and non-stereotyped insights of young people experiencing homelessness, facilitating capacity-building, empowering and co-created projects (Heerde & Pallotta-Chiarolli, 2019; Pallotta-Chiarolli, 2018). These approaches, led by young people with lived experience of homelessness, may also assist in reducing the stigma and shame experienced by these young people, which has been found to prevent them from accessing required services (Heerde & Pallotta-Chiarolli, 2019). Young people who provided feedback on their engagement with the Program provided valuable insights and suggestions about program modifications and improvements. It is recommended that the future development and implementation of AAI Programs be deliberately planned in collaboration with young people who attended the current Program.

Recommendation 2: Trial the use of AAI's in other service settings.

There is limited research that documents the implementation of AAI's in homelessness service settings. The current study has identified a number of implementation strategies that have supported the successful implementation and sustainability of the Program at Frontyard Youth Services. It is recommended that the existing framework of implementation developed by Frontyard be further developed by designing and piloting a comprehensive AAI program trialled within Melbourne City Mission and eventually across broader settings within the homelessness sector and within services assisting young people experiencing homelessness.

Recommendation 3: Develop a research plan to examine the impact of AAI's in service settings on a broader range of health and social outcomes.

Future research should be more deliberately planned to examine the implementation AAI's in prevention and early intervention settings working with young people experiencing homelessness. An evaluation of effects of program engagement in areas including mental health, emotional distress, social relationships and coping skills and interactions with health professionals and service staff should be deliberately planned as part of future programming and research efforts. The positioning of AAI's in homelessness service settings within a trauma-informed care framework may be beneficial. This should include an investigation of the influence of distrust, detachment and defensiveness commonly described by young people experiencing homelessness in interactions with health care services (Heerde & Pallotta-Chiarolli, 2019).

6.1. Strengths and Limitations

6.1.1. Study strengths.

This report of implementation and outcomes has several strengths. To the knowledge of the author this is the first Australian report of its kind to examine the implementation and outcomes of AAI's in service settings working with young people experiencing homelessness. This report has used a range of detailed data to investigate the experiences of young people engaging in the AAI Program at Frontyard across an extended period of program involvement. Therefore, the study presents a unique opportunity to examine the implementation of AAI's and the experiences of young people engaged in the Program over multiple time periods compared to prior research. Thus, a noteworthy strength of this study is its ability to

contribute vital knowledge to the development and implementation of AAI's with young people in homelessness service settings.

6.1.2. Study limitations.

Several limitations to the present report are acknowledged. The findings of this report are based on self-report data, collected by staff at Frontyard Youth Services. Although young people were provided with assurances of confidentiality and anonymity when completing the survey, it is possible sensitivity associated with program engagement may be intensified in a survey where young people are likely to interact with program staff again. This study did not examine other factors associated with homelessness experienced by participants' (e.g. time homeless, social support networks, health status). Last, the findings presented in this report are generalizable only to the service and samples analysed.

7. Conclusions

Homelessness is a significant social and public health issue, particularly among young people. The incidence of homelessness among Australian young people continues to rise and engaging this group in support services is a complex task given their vulnerability for entering pathways to chronic homelessness and hardship. Against a background of activities and interventions designed to address a range of social and psychological problems, there has been an increasing focus on the use of AAI's. These interventions have been shown to positively influence social relationships and coping skills and decrease emotional distress. The current report has detailed the implementation and outcomes of an AAI delivered through Frontyard Youth Services. The present findings suggest that it is feasible to implement AAI activities in a service setting with young people experiencing homelessness. Further, program engagement appears to have positive benefits for young people's emotional regulation, the development of positive social relationships and young people's engagement with service staff.

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Appendix 1: Identifiable dissemination of program outcomes

Findings demonstrate the Program has both theoretical and practical value, and generated engagement with government, the service sector and media networks; these demonstrate the dissemination of the program's implementation and preliminary findings at the grassroots level and identifiable benefits to the service sector.

Invited speaker addresses

The findings from the Pilot phase of the Program was presented at the Victorian Homelessness Conference. This was a collaborative presentation between Frontyard Youth Services (Ms Poppy Fotiadis), Lead the Way (Ms Melanie Jones) and the University of Melbourne (Dr Jess Heerde).

- 1. Heerde, J.A, & Jones, M. (2019). Animal-Assisted Interventions in Mental Health and Socialisation. Australian Disease Management Association Public Health Seminar, Alfred Health: Melbourne, Australia.
- 2. Heerde, J.A., Jones, M., & Fotiadis, P. (2017). "Happiness is hugging a therapy dog": Exploring the use of Animal Assisted Interventions with Homeless Youth.' Victorian Homelessness Conference: Melbourne, Australia.

Publications

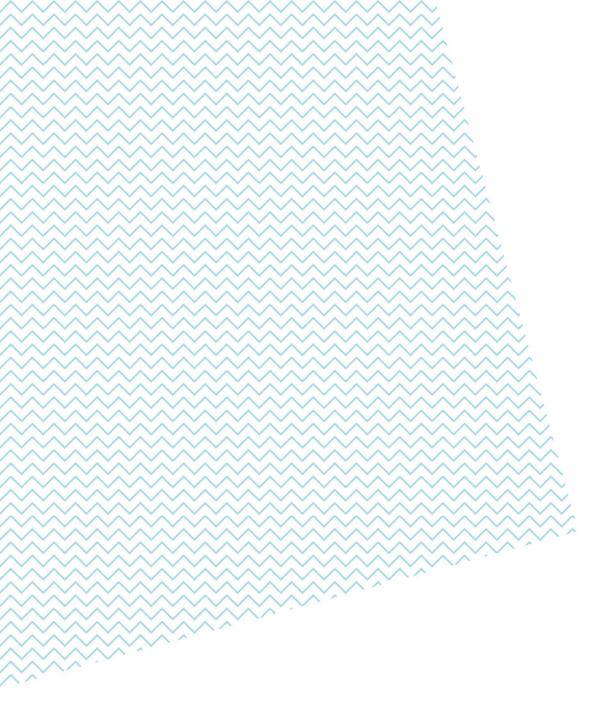
Following the presentation of pilot program findings at the at the Victorian Homelessness Conference, program findings were compiled into a journal article published in the Victorian Homelessness Conference edition of *Parity*.

3. Heerde, J.A., Jones, M.G., & Fotiadis, P. (2017). "Happiness is hugging a therapy dog": Exploring the use of Animal Assisted Interventions with youth experiencing homelessness. Parity, 30(10), 47-48. [WRF]

Invited commentary, media and news

The Program has generated significant media interest. We have accepted multiple invitations from media across print and radio mediums (listed below). The Pursuit article (#9) and radio segment with ABC Radio National Life Matters (#5) were undertaken collaboratively between Frontyard Youth Services (Ms Poppy Fotiadis), Lead the Way (Ms Melanie Jones) and the University of Melbourne (Dr Jess Heerde).

- 4. Department of Paediatrics Newsletter (2018). Dr Jess Heerde discusses how therapy dogs help homeless young people on 3AW and ABC. Issue 6, 22 March 2018.
- 5. ABC Radio National Life Matters (2018). *The use of therapy dogs with homeless young people* http://www.abc.net.au/radionational/programs/lifematters/therapy-dogs-get-to-work-to-help-homeless-youth/9546966
- 6. Adelaide Advertiser (2018). Man's best friends help the homeless. Section: Education Now.
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