

Pet Visitation: A Study of Hospital Volunteer Motivations

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Abstract

Volunteers have been a valuable resource in healthcare. Effective recruitment and engagement of volunteers help drive the Institute for Healthcare Improvement's (IHI's) triple aims of improved patient experience, care and cost reductions. IHI is a not-for-profit organization seeking to improve health and health care worldwide by partnering with "visionaries, leaders, and front-line practitioners around the globe to spark bold, inventive ways to improve the health of individuals and populations" (IHI, 2018). Volunteer recruitment and engagement requires understanding motivations for volunteers and matching that motivation with opportunities to give back. This study explores the unique motivations for volunteers who bring in their certified dogs to visit children in a pediatric hospital system. Data was collected to explore motivational trends in this volunteer's sample (n=26). This study found that these volunteers, when compared with general hospital-based volunteers, are significantly more motivated by an altruistic drive to serve others as well as a sense of personal development and learning. These powerful themes are developed and discussed along with recommendations for future efforts to nurture the growth of volunteerism in similar settings.

Keywords: altruism, volunteerism, volunteer motivation, pet visitation

Background

As the general demographics in the United States shifts to engage an active, yet aging baby boom generation, there is increasing energy being invested in volunteering opportunities to leverage this generation's talents and gifts (Bruno & Fiorillo, 2012). Volunteerism has blossomed into an important component of the workforce and covers value-added services in various sectors of the economy from legal issues (Jones, 2016) to business (Haski-Leventhal, Kach, & Pournader, 2016) and into health care (Ferreira, Proença, & Proença, 2012). The Bureau of Labor Statistics notes that in 2015 approximately 62.6 million people volunteered through or for an organization (Bureau of Labor Statistics, 2016). This paper will explore a unique aspect of volunteerism, the motivations of people who bring their certified dogs to visit children in need.

Volunteerism in Healthcare

Dating back to the early 1900's, volunteers have been a core component of the delivery of health care as the professionalization of hospitals and care centers became a formal structure in health care delivery (Jenkinson et al., 2013). The candy striper movement of the 1930's ushered in a community consciousness that supported the role of charitable gifts of time to care for the infirmed (Center, 2017). In 2011, there was an estimated 24.8% increase in hospital based volunteers (Pietra, 2011) with that growth projected to continue.

As part of the Triple Aim, a framework developed by the Institute for Healthcare Improvement, volunteers are key contributors to improving the patient experience of care (including quality and satisfaction); improving the patients' health outcomes and reducing the per-capita cost of health care (AHA, 2017). The time volunteers spend with patients makes the somewhat impersonal environment appear more personal, increasing patient satisfaction.

Volunteers play many cost-effective roles, such as preventing falls in older hospitalized patients through engaging them in activities and summoning help to assist them in moving from bed (Donoghue, 2005; Giles, 2006; AHA, 2017). Human touch, through care for infants in need, is another opportunity for volunteer engagement through volunteer “cuddler programs” which have been associated with improved premature infant wellbeing, weight gain and earlier hospital discharge (Fritsch-deBruyn, 1990). The increase in patient interaction, the assistance provided to hospital staff, and the improved sense of calm and welcoming environment all add to the perception of quality service. Some of these services would not otherwise be offered based on hospital staff shortages.

Hospital based volunteerism offers numerous benefits both to the hospital system (staff, patients and milieu) and in many cases to the volunteers themselves. As health care costs continue to rise, the use of volunteers may enhance patient care without a considerable increase in costs (Hotchkiss, Unruh, & Fottler, 2014). Similarly, volunteers derive direct benefits from increased social engagement, improved skill development and an altruistic connection through giving back to their community. Physical health may be improved through social integration and enhanced social support systems, this has been found to reduce stress and disease risk. Social integration has also been linked to perceived sense of well-being (Wilson & Sethi, 2015). Many volunteers report their volunteer service made a difference in the lives of others, and this improved their life as well. This may be due to increased self-esteem and self-efficacy, as well as the increased socialization (Tang, Morrow-Howell & Hong, 2009; Willigen, M.V., 2000).

Animal-Assisted Activity and Therapy

There is a developing body of literature (MacDonald & Barrett, 2016; Palley, O'Rourke & Niemi, 2010) that supports the use of various animal-assisted activities

(AAA) and animal-assisted therapies (AAT) to improve the patient experience and their care outcomes (Kinley & Reyno, 2016; Stewart, Dispenza, Parker, Chang & Cunnien, 2014; Amiot & Bastian, 2015). There is limited information as to the experience of the volunteers.

It is estimated that nearly 90% of hospitals in the United States have begun to offer some form of animal engagement in their care stream (McKinney, 2015). AAT and AAA are being utilized successfully in many health care areas including nursing homes (Kaiser et al., 2002), group therapy (Perry, Rubinstein, & Austin, 2012), hospitals (Abrahamson, Cai, Richards, Cline & O'Haire, 2016; Perry, Rubinstein, & Austin, 2012), including preoperative areas (Miller & Ingram, 2000), mental health units (Nepps, Stewart, & Bruckno, 2014; Berget, Ekeberg & Braastad, 2008; Ruzek & Rosen, 2009), waiting rooms (Creagan, Bauer, Thomley, & Borg, 2015), and critical care (Connor & Miller, 2000), palliative care (Engelman, 2013), inpatient psychiatric units (Perry, Rubinstein, & Austin, 2012), educational institutions (Perry, Rubinstein, & Austin, 2012), outpatient pain management facilities (Marcus et al., 2013) and occupational therapy (Beck et al., 2012). These animal-assisted activities have been found to decrease stress and improve the patient's and their family's morale (Morrison, 2007).

Researchers have found that human-dog interactions have a physiologic effect on the patient through an increase of oxytocin, and decrease of cortisol (Hannibal & Bishop, 2014). Research looking at human cognition and behavior from a hormonal perspective has identified the hormone oxytocin as a moderator of social attachments, trust, emotion recognition, and cooperation (Baumgartner et al., 2008; Macuglia, 2014; MacDonald, & MacDonald, 2010; Nave et al. 2015). Short-term interaction between a dog and its owner has been linked to a significant increase in oxytocin levels. As Macuglia (2014) points out, oxytocin is a powerful hormone that helps to regulate and promote health social interaction among other social important benefits.

Increases in levels of oxytocin has been found to increase trusting behavior in humans. Research has also shown Oxytocin enhances cognitive mechanisms involved in affiliation and social communication, as well as having a calming effect, and the ability to counteract the effects of cortisol (Uvnäs-Moberg, 1998). Oxytocin levels were found to almost double in both the companion animal and their owner following positive time spent together (Handlin et al., 2011). This may suggest a similar response in the animal-assisted volunteers as the human animal contact offer an indirect link to physiologic changes leading to increased bonding and improved emotional health.

Another biochemical indicator of the impact of animals on human functions is measurement of cortisol levels in saliva. Rising cortisol levels has long been linked to environmental stressors and efforts to lessen stress can be tracked indirectly through static or declining cortisol levels. Social support provided by dogs have served to attenuate salivary cortisol levels beyond the reduction shown when compared with human support in the form of a friend, even for those who were not previously familiar with the dog before the interaction (Polheber & Matchock, 2014). Engelman (2013) studied AAT in palliative care. He concluded the therapy dog “appeared to ‘lighten the atmosphere’ and bring a ‘bit of home’ and ‘normalcy’ to the healing environment of the hospital room.” Further, patient report less pain with exposure to AAT. Research findings have demonstrated that health care staff members view AAA as a positive experience (Kaiser et al., 2002), and that their benefits to the hospital staff. They reported reduced stress (Abrahamson, Cai, Richards, Cline & O’Haire, 2016; Engelman, 2013), increased social interactions, and a perception that the patients found comfort in their interactions with the animals (Abrahamson, Cai, Richards, Cline & O’Haire, 2016).

While the dog is an essential part of the AAA team, Bibbo (2013) found what the handler is actively doing with the dog is an important contributing factor. The dogs ease and promote communication between two strangers, the handler at the same time interacts with the patient which can augment perceived social support (Kaiser et al., 2002). In further exploring these constructs, this study proposes to explore the role that volunteers, as a conduit to AAA and AAT, are engaged to offer supportive care in the context of pediatric healthcare. It is the nexus of these constructs which drives this study to explore the unique motivations and benefits that volunteers who leverage their pets as a therapeutic tool in the health care process. The study objective is to explore what factors, motivate and influence individuals' decision to volunteer with their pets in a pediatric hospital, to identify what benefits the volunteers derive from this experience and to catalog lessons learned for others who are interested in establishing this type of program to serve others.

Methodology

Study design

This study was approved by the health system's Institutional Review Board and employed a cross sectional design using survey research methodology. An electronic survey was conducted that asks volunteers about their motivations to volunteer their time and talent in a pediatric hospital setting in which they are invited to bring their certified pet to visit pediatric patients. The survey items used in this study were taken the survey developed by Ferreira et. al. (2012) which explores their unique motivation for volunteering in hospital settings. Ferreira et. al. (2012) developed this survey by using a factor analysis Clary's (1998) Volunteer Functions Inventory (VFI) which was developed to general motivations for volunteering.

The findings from Ferreira et. al. (2012) offer a comparison group which is compared with this studies data related to hospital volunteers who bring their pet as their primary asset in volunteering. This survey was divided into subsections designed to gather demographic and quantitative data. The survey items used in this study (Ferreira et al., 2012) explore constructs to four key themes for this unique volunteer group (development and learning, belonging and protection, career recognition and altruism). This data along with lessons learned are summarized and explored in the discussion section of this paper.

Intervention

This study was conducted in a 95-bed pediatric hospital in Central Florida. The pet visitation program (PVP) engages pets to help patients and families reduce anxiety, distract from upcoming clinical encounters. These health care experiences can be fear inducing and often painful. In an effort to reduce fear and pain the PVP attempts to normalize the health care experience through distraction and direct interaction with animals in congregate areas, such as ambulatory and surgical waiting areas, as well as pet visitations conducted at the bed side of hospitalized and bed ridden patients.

All the pets in this program have successfully completed a structured certification process that involved training and testing of the dog/handler team, registration and insurance, and animal health and behavior screening. In order to participate in this hospital's pet visitation program, the hospital requires participation in an approved therapy animal program and American Kennel Club's Canine Good Citizen certification. The American Kennel Club requires successful training in ten domains to achieve Canine Good Citizen certification (<http://www.akc.org/dog-owners/training/canine-good-citizen/>). Further, this hospital requires a written statement from the dog's veterinarian stating the dog is in good health, has an unblemished record of good behavior,

and they attest to the animal's suitability to provide therapeutic emotional support. Once they have demonstrated that they are physically, emotionally and behaviorally safe for patient contact the volunteer and pet are gradually introduced to care stream to align the pets' unique characteristics with the needs in the pediatric health system.

Sample

This study was conducted in a pediatric hospital in Central Florida and drew responses from the volunteer program that averages 120 volunteers a year. The volunteer program oversees the pet visitation program (PVP) that includes 30 dog/handler teams. All 30 PVP volunteers were invited to participate through an email invitation and in person group meeting in which a simple study description was shared, and procedures were described.

Data Collection

An electronic survey was created using Qualtrics software (Qualtrics, Provo, UT). The online database services, and this electronic survey, was hosted by research team members at Saint Leo University. The research team sent three email messages to the cohort of 30 volunteers to recruit participation and all data collected was secured using password protected systems. The data was deidentified to ensure anonymity of responses.

Analysis

Demographic data were compared to the established sample from Ferreria and colleagues to explore similarity of groups. Secondly, the mean scores from the Pet Visitation Program (PVP) sample were tested against the established motivations for the comparison group of volunteers across each of the key constructs (Table 1) using a one sample T test. These results were summarized and presented with an analysis of results and implications reviewed in the discussion.

Table 1. Volunteer motivational factors defined

Motivational factors	Definition
Development and Learning	enhance their understanding of society, develop social skills, gain new perspectives, increase self-esteem, and to remain physically and mentally active.
Belonging and Protection	making new friends and meeting people, appreciation of others, and social interactions.
Career Recognition	increasing one's welfare through tangible rewards or benefits, opportunities to network with potential business contacts, enhance their resume, and to develop skills which may benefit them for future employment.
Altruism	the pleasure the volunteers achieve through improving the welfare of others.

Results

Demographics

The descriptive data from the PVP sample is presented in table 1 with a side by side comparison with the established sample from Ferreria and colleagues (Comparison Group). These data suggest that both samples are highly similar along numerous axis but differ considerably in the areas of current work status and frequency of post graduate education. These data indicate that the study sample tends to be more likely to be currently working full time and to have a post-graduate education when compared with the comparison group. Implications will be discussed in later sections.

Table 2. Demographic data compared to the referenced comparison group

Gender		Frequency	Percent	Comparison Group	Variance
Valid	Masculine	7	26.9	11.2	15.7
	Feminine	19	73.1	84.2	-11.1
Age					
Valid	18-34 years	2	7.7	8.6	-0.9
	35-51 years	7	26.9	12.5	14.4
	52-68 years	9	34.6	47.7	-13.1
	69 and older	8	30.8	19.7	11.1
Ethnicity					
Valid	Caucasian	25	96.2	NA	NA
	Hispanic	1	3.8	NA	NA
Current Work Situation					
Valid	Full-time	11	42.3	13.2	29.1
	Part-time	1	3.8	2.6	1.2
	Unemployed	1	3.8	8.2	-4.4
	Retired	12	46.2	52.6	-6.4
	Other	1	3.8	11.8	-8
Marital status					
Valid	Married	17	65.4	53.3	12.1
	Widowed	1	3.8	15.8	-12
	Divorced	5	19.2	9.5	9.7
	Never married	3	11.5	13.2	-1.7
Education					
Valid	Graduated high school	5	19.2	20.4	-1.2
	Graduated college	8	30.8	25	5.8
	Post-graduate	13	50	3.9	46.1

Outcomes

Analysis of the quantitative data from the hospital adjusted VFI compared average scores from study subjects to the respondents in the study by Ferreira, Proença and Proença (2012) on each factor (development and learning, belonging and protection, career recognition and altruism) with lower mean scores indicating higher motivational influence. Responding volunteers who brought their pets in for visitation scored significantly lower on the Development

and learning subscale ($t(25) = -18.632, p = .000$), and the Altruism subscale ($t(25) = -29.80, p = .000$) and significantly higher on the Career Recognition subscale ($t(25) = 8.04, p = .000$) when compared with the hospital based volunteers described in Ferreira, Proença and Proença 2012 sample.

Table 3. One Sample T Test

Motivational factors	Control Mean (SD)	Pet Mean (SD)
Development	5.5 (1.1)	2.6 (1.1)*
Belonging	3.7 (1.4)	3.4 (1.5)
Career recognition	2.0 (1.4)	4.6 (1.9)*
Altruism	5.2 (1.6)	1.8 (0.7)*

*Significant with p value less than .05

Discussion

These data indicate that volunteers, involved in a PVP at a children's hospital, are significantly more motivated by themes of altruism and belonging than a comparative control group noted in the literature. It appears that these volunteers are highly motivated by the pleasure they receive through engaging others and belief they are improving the welfare of others. Similarly, they are driven by the opportunity to enhance their understanding of society, develop social connections, gain new perspectives, and to remain physically and mentally active.

These findings lend guidance to the effective recruitment and engagement of volunteers in this area of healthcare. It suggests that efforts to highlight the opportunities prospective volunteers will have to contribute to the welfare of the children they serve can be the most critical factor in the initial engagement of the volunteers. Another key finding is that the ongoing retention and engagement of these volunteers can be facilitated by highlighting the ways they have given back as well as creating collegial platforms for information exchange. These

two-way communication loops serve as an opportunity for volunteer and program level process improvement and can help to draw a straight line to how their efforts improved patient care.

Despite the compelling findings from this study it is important to keep several competing factors in mind when extrapolating these results. One of the fundamental limitations with this study is with the sample size and its representativeness. Though the sample response rate was considerably strong (93%) there was still a small group surveyed (n=26). A large sample taken from multiple sites may afford more generalizability for results. It is also important to point out that these data indicate that the study sample tends to be more likely to be currently working full time and to have a post-graduate education when compared with the comparison group. This finding may have an influence on the outcomes with older volunteers being more driven by altruism and younger by possible career advancement. Future research would benefit from exploring these findings with a broader sample to assess if these findings are truly related to being volunteers in a PVP or are they reflective of their work, education status or their developmental stage. An application of this knowledge could help to explore if younger volunteers are influenced by a different set of motivations lending them to a different recruitment and retention strategy.

Despite these limitations, the study explores the unique motivations found in a sample of volunteers who engage their pets as therapeutic agents in the care for children. Pet volunteers appear to differ from other volunteers. Their motivations center around altruism, personal development and belonging. In recruiting these volunteers, it is important to cultivate ways to promote their ability to give to others, invest in personal development and connect with others. Understanding that altruism ranks significantly high in their motivation is a key finding that

should help to cultivate a synergistic relationship between volunteer and patient especially when done with mindfulness of their development stage.

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