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RESEARCH ARTICLE

Healthcare Provider Knowledge of Caring for Individuals with Disabilities Teamed with Service Dogs

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ABSTRACT

Background: Caring for individuals teamed with service dogs requires complex practice knowledge intertwined with knowledge of legal protections and institutional policy. While healthcare professionals report not feeling fully prepared to care for this population, little is known about the care experiences from individuals teamed with a service dog.

Purpose: This study examined characteristics of individuals teamed with service dogs and their perspectives of what their healthcare providers know about caring for them.

Method: Cross-sectional analysis of survey data representing N = 204 individuals teamed with service dogs in the United States. Survey questions included demographic characteristics and measures of healthcare provider knowledge in the care of service dog teams.

Discussion: Less than 50% of respondents strongly agreed that their healthcare providers saw them as an expert in being supported by a service dog and communicated with them on meeting their needs. Between 56% to 65% strongly agreed to healthcare providers having knowledge of additional aspects of communication and interaction, awareness of legal rights for service dogs, organizational policies on service dogs, and acting as their advocate.

Introduction

Individuals living with disabilities can benefit from the support of service dogs, and service dogs are increasingly becoming more present across healthcare settings¹⁻⁴. Overall, there is little empirical knowledge regarding individuals with disabilities who are supported by service dogs^{1,5,6}. One critical area related to this lack of knowledge is how individuals supported by service dogs receive healthcare. Most of what is known about the experiences and perspectives of these individuals is anecdotal and conceptual⁶.

SERVICE DOGS: KNOWLEDGE OVER MANY DECADES

A scoping review on service dogs⁶ provides many important insights overall, which can be applied to providing care for individuals teamed with a service dog. Although service dogs have been supporting humans for decades⁷, only 259 articles from 1958 through 2019 were located in this scoping review. The focus of these articles are predominantly on the history, health and management of service dogs, or legal and policy issues. Their findings reinforce the need for evidence-based knowledge to guide practice with individuals teamed with service dogs. Research is needed on healthcare provider knowledge, experiences of those teamed with service dogs including norms of service dog teams, and greater specificity of defining and reporting on the type(s) of service dogs in studies⁷.

WHAT IS A SERVICE DOG, AND THE RELATED RIGHTS OF THE PERSON WITH A DISABILITY UNDER THE AMERICANS WITH DISABILITIES ACT?

A service dog is an assistance dog, who is trained to perform a specific task or tasks to help meet a primary need for the person related to their disability, other than blindness or deafness?. There is a wide range of indications for a person to be supported by a service dog for primary visible and invisible disability needs. These individuals may also have secondary needs that may be met by the service dog.

In the United States the, Americans with Disabilities Act (ADA) supports individuals with disabilities and provides substantial legal protections to ensure the rights of those living with disabilities to engage with society to their fullest as independently as possible. 10 Individuals with disabilities have the right to be accompanied by their service dog in any setting where the public is allowed, which includes the majority of settings in which they receive healthcare. With this right comes many requirements for, the person teamed with the service dog, also known as the handler, the service dog they work with, the work they do together as a service dog team, and those they come in contact with in public settings.

HEALTHCARE PROVIDERS & KNOWLEDGE OF CARING FOR SERVICE DOG TEAMS

A national study of healthcare providers in the United States (N=441) reported that healthcare providers need more education to increase their knowledge of ADA regulations as well as health care organization policies and training to support quality care and manage legal risk when caring for individuals teamed with service dogs⁵ Over fifty percent of this sample reported a lack of feeling prepared by employers to work with patients or visitors with service dogs. In those healthcare organizations that have policies on

service dogs over a third of respondents reported lack of familiarity with the policy. Healthcare providers and organizations expose themselves to legal risks as well as challenges to ethical quality care with these knowledge deficits.

An informal case study of service dogs in the Emergency Department (ED) offers insights into actual practice situations of four ED nurses. Each was asked, "What do you do when you encounter a patient with a dog at triage^{3(p208)}?" Their answers ranged from full compliance with ADA (Nurse 1 and member of institutions ADA task force), to uncertainty on what to do (Nurse 2 and 3), to being certain in their response but legally inaccurate (Nurse 4). Through these interviews it was identified that lack of knowledge may have led to the individual teamed with a service dog to being challenged and not allowed to have their service dog accompany them into the ED. This is turn may provoke or exacerbate the individual's symptoms or conditions and is antithetical to the requirement in practice to stabilize and provide the patient with the best care for them based on their individual needs³. Excluding the service dog may also be a violation of the handler's legal rights.

PUBLIC PERCEPTIONS OF SERVICE DOGS
Healthcare providers who reported feeling ill
prepared in caring for service dog teams may
be more aligned to the perception of the
general public regarding service dogs. The
results of a survey that reports on perceptions
of individuals in the U.S. of service dogs and
other assistance dogs (N=284) points to
broad misconceptions about service dogs and
other assistance dogs¹¹. While respondents to
this survey were generally favorable of service

dogs helping those in need, they were not able to fully understand and be knowledgeable about the legal protections for individuals teamed with service dogs¹¹.

INCREASING UNDERSTANDING OF HEALTHCARE EXPERIENCES FOR SERVICE DOG TEAMS

Knowledge development is beginning to accelerate in this complex area that has legal and practice implications and considerations for healthcare providers and organizations. Service dogs support the independence of individuals with disabilities in their day-to-day functioning¹². Service dogs have and continue to be chosen by individuals with a wide range of disabilities because of their versatility in their ability to promote independence by supporting primary disability needs, as well as secondary needs across the person's home public access settings¹³. Limited conceptual and research publications provide some understanding of the challenges in supporting and caring for individuals with disabilities teamed with service dogs. Ethical principles, codes of conduct and scope of practice identify that clinicians provide care within the sphere of their competency. To deliver culturally sensitive, evidence-based, quality patient centered-care it is necessary to study the experiences and perspectives of individuals with disabilities teamed with service dogs when receiving healthcare¹⁴. The purpose of this study was to begin to develop this body of knowledge by asking individuals teamed with service dogs about their experiences with healthcare providers.

Materials and Methods

This study employed a cross sectional research design to increase empirical knowledge of individuals teamed with service (Pace University IRB#0004707 approved). In order to gain understanding of the characteristics of individuals teamed with service dogs, and their perspectives on several key knowledge areas including, values, assumptions and beliefs about service dogs, benefits of being teamed with a service dog, and healthcare provider knowledge of caring for individuals teamed with a service dog, a survey tool was developed. Further, for definitional clarity this study focused on those who met the Assistance Dogs International definition of service dogs8. A screening question was used to identify the primary disability need for the service dog and those who responded blindness or deafness were not included in the analysis. This study reports on the findings of individuals teamed with service dogs perspectives on their healthcare providers' knowledge in their care.

PARTICIPANTS

Individuals over the age of 18 years teamed with service dogs.

MEASURES

The Singleton Service Dog Survey (SSDS) was developed, and face validity was established with a review of the literature and from input from experts in the field including individuals with disabilities teamed with service dogs. The SSDS has 25 questions, which includes demographic/ characteristic questions (8 questions), and 17 scale items to assess perspectives of individuals teamed with service dogs. Responses are on a Likert type 4-point scale, of strongly agree to strongly disagree.

Within the 17 scale items are three subscales. This research reports on the Knowledge subscale. The Cronbach's alpha for the SSDS Total was .82 (95%), and for the Knowledge subscale the Cronbach's alpha was .81¹⁵.

PROCEDURES

The survey was created in Qualtrics, and volunteers were sought though the Qualtrics' data base, as well as from clients of two accredited service dog organizations. The survey identified that by completing the questions the person agreed to participate in. the study. No personal identifying information was collected, the survey was anonymous. The survey was opened in December 2021 and closed March 30, 2022.

DATA ANALYSIS

All questions were analyzed using descriptive statistics, with frequency/percentage calculations.

Results

There were 204 out of the 270 respondents who met the inclusion criteria for this study. The sample had an average age of 38.87 years (SD= 13.47). Respondents predominantly white (76%), and female (56%). Disability was reported as both physical and mental disabilities (38%) followed by mental disabilities (33%) and, physical disabilities (28%). Respondents were most often teamed with their service dog between 1 to 3 years (36%), followed by 3 to 5 years (27%), less than 1 year (16%), 7 or more years (12%), and 5 to 7 years (9%). The majority of service dog were trained by an ADI accredited service dog organization (55%), followed by self-taught with the assistance of a dog trainer (23%), and self-taught (22%).



Descriptive analyses focused on responses to reported knowledge questions as frequency/percentages. The range of aggregated responses across all seven knowledge questions showed 46-64% strongly agreed, 27-38% somewhat agreed,

3-10% somewhat disagreed, and 1% strongly disagreed, and are summarized by question in Table 1.

Table 1. What does my healthcare provider know about caring for me with my service dog?

	Question*	Strongly Agree	Somewhat Agree	Somewhat disagree	Strongly Disagree
1	My healthcare providers recognize me as the expert in working with a service and communicates with me about how to best meet our needs when receiving healthcare	46%	38%	10%	5%
2	My healthcare providers know that my service dog I are a team, my service dog mitigates my disability and lets me be independent and interact in society	64%	30%	3%	1%
3	My healthcare providers make me, not my service dog, the focus when I am receiving care	64%	27%	6%	1%
4	My healthcare providers know that it is okay to acknowledge my service dog, to me, but not to interact with my service dog without my directing the interaction	58%	31%	8%	2%
5	My healthcare providers are aware of my legal protections through the Americans with Disabilities Act	64%	25%	7%	2%
6	My healthcare providers are aware of their healthcare organizations policy on assistance animals	56%	35%	6%	2%
7	My healthcare providers advocate for me and my service dog should this be needed	62%	30%	5%	2%
* Across all 7 questions there was a 1% no response rate					

^{*} Across all 7 questions there was a 1% no response rate

Discussion

This study is the first to examine from the perspectives of individuals teamed with service dogs what healthcare professionals know about providing their care. This is also the largest study to date that focuses on individuals teamed with service dogs who provide support other than vision and hearing. These findings offer important insights into this group overall, and in particular providing in their Demographics identified the sample as slightly more female and less than one quarter non-white. Current national statistics of the over 61 million Americans living with disabilities, which is the largest minority group in the United States today, reflects greater diversity¹⁶. The lowest prevalence disabilities is reported in Asian populations. There is a slightly higher prevalence of disabilities in Black than White populations, with the highest prevalence among American Indian/ Alaska Native populations¹⁷. There are a variety of reasons why not all individuals with disabilities may desire or be suitable to be teamed with a service dog. This study focused on those who chose to be teamed with a service dog. Nevertheless, the demographic characteristic of race in this study suggests equity and inclusion challenges to greater diversity across individuals with disabilities being teamed with service dogs. Exploration of this is warranted. Benefits of being teamed with a service dog reported across categories of race suggests that individuals of greater diversity may benefit from being teamed with a service dog¹⁵.

The questions on the SSDS knowledge subscale relate to the complex intertwined

areas of knowledge needed to care for those in the cultural community of service dog teams¹⁸. Questions include: communicating and interacting with service dog teams (Questions 1-4), ADA rights pertaining to service dogs (Question 5), healthcare organization policies based on the ADA to guide providers (Question 6), and healthcare providers advocate for patients (Question 7). For example, the Ethical Code for Nurses identifies that nurses advocate for their patients. In order to advocate for service dog teams knowledge specific to meeting their needs is required¹⁹.

To effectively communicate and interact with service dog teams healthcare providers need to be aware of considerations for this cultural community^{9,18}. Distraction of a service dog is an example. Any type of human distraction of the service dog is a major source of concern for handlers. Engaging with the service dog can distract the dog from keeping their focus on their handler and being responsive to the needs of their handler. It is important to remember that service dogs are well trained to do their work, but they can be distracted. This may require handlers to be vigilantly proactive to keep their service dog from being distracted. When healthcare professionals unknowingly engage with the service dog they set off a cascade of actions that can result in the handler and/ or the service dog being injured. Once distracted the handler must use commands/ directions to refocus the service dog back to their work. Generally, individuals disabilities have higher requirements than those without disabilities, preventing or responding to distractions makes even greater energy demands on the handler.

While a handler may be proactive in preventing interaction with their service dog, this does not mean that healthcare providers should ignore that they are teamed with a service dog. Within the patient provider relationship and governed by HIPPA it is necessary to consider the service dog as part of the patient's plan of care and learn from the patient how the service dog supports them. Assumptions should not be made about the work of the service dog. Effective communication with the handler will help healthcare providers to gain understanding of how the handler is supported by their service dog and based on this how to support their care needs. In fact, the service dog can provide insights into how the patient is feeling. For example, it is an expectation that service dogs be kempt, which requires regular grooming. When a person is experiencing low energy, with depression for example, they might not be able to keep up with the dog's regular grooming, which may give cues to explore further what the patient experiencing.

Caring for individuals with disabilities in general is identified as a challenged area in healthcare, and the need for programs that educate healthcare professionals to address this specialized area of practice in a meaningful and tangible way within curricula has been identified by the National Academies of Science, Engineering and Medicine²⁰ It is not surprising then that content on service dog teams, also identified as a cultural community of service dog teams, is not routinely included in curricula¹⁸. Presently, this leaves healthcare organizations and practices with the responsibility of this education. Merk and colleagues⁵in their study

of healthcare professionals identified that over 50% of participants reported that they did not feel well prepared by their healthcare organizations to care for service dog teams or visitors with service dogs. Given the results of the Merk and colleagues⁵ study the range of strongly agree and somewhat agree ratings in this current study from the perspective of individuals teamed with service dogs is laudable. Nevertheless, the findings of this study may best be looked at from a cautionary and proactive perspective. While it is not realistic to have 100% strongly agree, given the legal and practice complexities, it must be asked, "Is a goal of anything less than strongly agree acceptable?"

Strongly agree must be the goal to support quality care as well as to minimize legal risks in providing care to the cultural community of service dog teams. The care experience of the individual teamed with a service dog can be impacted by the lack of knowledge of healthcare providers. This is turn may result in violating the rights of service dog teams. Excluding the service dog from the person's care may violate the handler's rights as well as impact their care. If a person with a disability believes that their rights have been violated they are encouraged to contact the Department of Justice to file a complaint. The number of complaints related to healthcare settings regarding service dogs miraculously remained low⁵. Nevertheless, healthcare organizations and providers expose themselves to this risk when they lack legal and practice knowledge about caring for individuals teamed with service dogs, and when healthcare organizations do not have a specific public policy on service dogs, or have a policy but staff are not educated about the



policy, and/or do not know who they should contact for support as needed^{2,5,21,3}.

Service dog teams are routinely being cared for across healthcare settings³. Merk and colleagues⁵ report that only 13% of the 441 healthcare professionals they surveyed had not encountered a service dog team in their practices, while almost the same percentage said they frequently care for service dog teams.

Conclusion

Policy considerations related to education and practice deserve to be explored to best prepare healthcare professionals with the knowledge and competencies to provide quality care to this vulnerable population of individuals teamed with service dogs. Future research examining more aspects of the care experiences of these individuals teamed with service dogs, as well as their healthcare providers, will help to develop an evidence-based approach to caring for the cultural community of service dog teams.

Conflicts of Interest Statement:

None

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This work is done in loving memory of Capt. (Ret USAR) Luis Carlos Montalván (1973-2016) & Tuesday, ECAD Alumnus (2003-2019). "It's hard to be a service dog,

just like it's often hard to be disabled...Please always respect service dogs and the people who need them (L.C. Montalván)."

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