

2021

Counselor Experiences with Clients Who Bring Emotional Support Animals to Sessions

Jennifer Reynolds
Walden University

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College of Counselor Education & Supervision

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Review Committee

Dr. Geneva Gray, Committee Chairperson, Counselor Education and Supervision Faculty
Dr. Patrice Bounds, Committee Member, Counselor Education and Supervision Faculty
Dr. Adrian Warren, University Reviewer, Counselor Education and Supervision Faculty

Chief Academic Officer and Provost
Sue Subocz, Ph.D.

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Abstract

Counselor Experiences with Clients Who Bring Emotional Support Animals to Sessions

by

Jennifer Reynolds

EdS, Jacksonville State University, 2009

MS, Jacksonville State University, 2007

BS, Athens State University, 2004

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Counselor Education and Supervision

Walden University

June 2021

Abstract

Limited research on emotional support animals (ESAs) has led to distorted viewpoints of ESAs and how they are used; many individuals are not utilizing ESAs appropriately, and heightened awareness of the negative uses of ESAs in media and other public sources. ESAs can be an effective intervention when working with clients during counseling sessions, but due to the limited research and the negative stigma media this intervention may not be adequately represented. The purpose of this hermeneutic phenomenological study was to explore lived experiences of counselors who allow their clients to bring ESAs to counseling session, the goal of reducing negative stigma of this intervention. In this study, 7 licensed professional counselors in a southeastern state provided their lived experiences using ESAs during their counseling sessions. The collected data was analyzed using the hermeneutic phenomenological psychological method. Seven themes emerged from data analysis : (a) participant experiences with allowing dogs to be brought into counseling sessions, (b) past positive experiences with animals which increased professional confidence, (c) lack of formal education or training on ESAs, (d) desire for future training and resources on the topic, (e) client more open and relaxed with the presence of the ESA, (f) client more present in the here and now with the presence of the ESA, and (g) rapport building between the counselor and client due to the presence of the ESA. The results from this study could inspire future research on this intervention, raise awareness in the current use of this intervention in counseling, and assist in the willingness of individuals to want to begin counseling if they know they can bring their ESAs to counseling sessions.

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Dedication

I dedicate this dissertation to my mom, Ellen Schroeder – your support, guidance, and always keeping me focused has kept me on the path that I am on today. Your tough love while I was an adolescent was difficult, but it has paid off and I thank you for making the decision to take me to Three Springs and not turning your back on me as many would have. I thank you tremendously for all your hard work raising me and my sisters. You are an amazing woman, and I would not be the person I am today without you. I love you.

Acknowledgements

I am so thankful and humbled to be at the completion of my counselor education and supervision doctoral program. There have been so many people that have been integral in this process. This journey would not have been possible without the support, dedication, and encouragement of key individuals in my life and journey. It would not have been possible to be at this point without the assistance of these individuals. First, to my family, mom (Ellen), sisters-Jill and Jodi, their families, and my father (James). Mom, the drive you instilled in me as a child has helped me to pursue and complete this degree and I thank you. Jill and the Daniels family, thank you for being supportive of me and giving me a break when I had to miss events and was not present in family functions. Jodi and the Bradley family, thank you for being supportive and not getting upset when I had to miss family events. Dad, I know you won't ever read this, but I hope that this milestone has made you proud. You left us towards the end of my program, but I finished, and I am now Dr. Jennifer Reynolds.

To my friends, I want to thank all of you for being supportive and seeing it through. Especially to my best friend, Lashonda James who I know you thought I would never get to this point of my program. You helped me so much to get here and keeping me focused. To my friend Royce D. Shye II, you stayed by my side throughout the entire process of my PhD program and kept me focused. Your methods were not always the most conventional, but you assisted me to remain focused and follow through with the goal that I gave myself to complete my dissertation in full. To my other friends, that kept me focused and never gave up on me. A huge thank you goes out to my mentor, Dr.

Jeffrey Moore. Without you I would not have been able to complete this milestone.

Thank you for keeping me focused, driven, sane, and dedicated. You have seen me from an associate counselor until now and I thank you tremendously for your support.

I also want to give a special thanks to my dissertation committee, especially my dissertation chair, Dr. Geneva Gray. You have been a crucial part of my success in this doctoral journey. I thank you for keeping me focused, assisting me throughout the entire process, and keeping me grounded. You are truly someone I look up to. To my committee member, Dr. Patrice Bounds, I thank you for assisting me in my dissertation. It has been a pleasure to work with you both in internship and throughout the dissertation process. Another thanks to Dr. Adrian Warren, my university research reviewer, who dedicated valued time, energy, and expertise to help me see this study all the way to the end.

I want to say I am tremendously appreciative to my online colleagues, especially Dr. Nakpangi Thomas, who has been an unlimited source of encouragement, support, and strength. Nakpangi, we met in internship and we both have finished. I am so proud of both of us. I also thank others that were met at residencies and internships. You all have helped so much, and I look forward to the success we have as CES. I also want to express my gratitude to those individuals who volunteered to serve as a participant in my study and share your personal experiences. This dissertation would not have been possible without the support, encouragement, positivity, friendships, and efforts from each and every one of you and I am sincerely grateful. Thank you.

Table of Contents

List of Tables	v
List of Figures	vi
Chapter 1: Introduction to the Study.....	1
Background.....	2
Utilization of Animals.....	4
Emotional Support Animals.....	6
Problem Statement	7
Purpose of the Study	8
Research Questions	8
Framework	8
Nature of the Study	9
Definitions.....	10
Assumptions.....	12
Scope and Delimitations	13
Limitations	13
Significance.....	14
Summary	15
Chapter 2: Literature Review.....	17
Literature Search Strategy.....	18
Conceptual Framework.....	19
Hermeneutic Phenomenology Research and Origin.....	19

Research Assumption and Framework	21
Literature Review.....	23
Literature and Research-Based Rationale	23
History of Therapeutic Benefits of Animals.....	23
Animal-Assisted Interventions.....	26
Assistance or Service Animals.....	30
Emotional Support Animals.....	32
Summary and Conclusion	34
Chapter 3: Research Method.....	36
Research Design and Rationale	36
Role of the Researcher	38
Methodology.....	39
Participant Selection	39
Instrumentation	40
Procedures for Recruitment, Participation, and Data Collection Plan.....	41
Data Analysis Plan.....	43
Trustworthiness.....	44
Credibility	45
Transferability.....	46
Dependability.....	46
Confirmability.....	47
Ethical Procedures	47

Summary	48
Chapter 4: Results	49
Setting	49
Demographics	50
Data Collection	51
Data Analysis	54
Evidence of Trustworthiness.....	56
Credibility	56
Transferability.....	56
Dependability	57
Conformability	57
Evidence of Trustworthiness.....	57
Results	58
Overview of Themes.....	67
Theme 1: Experience with Allowing Dogs to be Brought into Counseling	
Sessions.....	69
Theme 2: Positive Personal Experience with Animals to Increase	
Professional Competence.....	70
Theme 3: Lacking Formal Education or Training	72
Theme 4: More Training and Resources.....	73
Theme 5: Client More Open and Relaxed	74
Theme 6: Client More Present in the Here and Now	76

Theme 7: Rapport Building Between Therapist and Client.....	77
General Narrative.....	78
Summary.....	81
Chapter 5: Discussion, Conclusions, and Recommendations.....	84
Interpretation of the Findings.....	85
Dialogue with Literature.....	85
Theoretical Framework.....	89
Limitations of the Study.....	91
Implications and Recommendations.....	92
Positive Social Change.....	92
Recommendations for Counselors.....	94
Recommendations for Future Research.....	95
Conclusion.....	95
References.....	96
Appendix A: Interview Protocol.....	110
Appendix B: Demographic Questions.....	114

List of Tables

Table 1. Participant Demographic Information 51

List of Figures

Figure 1. Emergent Themes and Three Main Codes 68

Chapter 1: Introduction to the Study

Over a quarter of the population in the United States will face a mental health issue at any given time (National Alliance for Mental Illness [NAMI], 2018), but only half of the individuals who face mental health issues will seek treatment (Mental Health America, 2018). With the lack of treatment and assistance, many experience unnecessary symptoms that may reduce if these individuals utilized mental health services. Research shows that stigma, shame, embarrassment, and limited resources are the main reasons individuals will not seek treatment or assistance (NAMI, 2018). Some have a challenging time locating a provider with which they feel comfortable. Some have symptoms that hinder them from travel or engaging in social activities, or others have side effects from prescribed medication for mental health issues (Mental Health America, 2018; NAMI, 2018). Further, some individuals' lack of emotional support may cause resistance to seeking treatment and assistance (National Institute of Mental Health, 2014). But animals can be sources of significant emotional support for people (Dellinger, 2009).

In recent years, the utilization of animal-assisted therapy (AAT) interventions within the counseling environment has increased. Many studies have established empirical research on AATs, animal-assisted interventions (AAIs) and other goal-directed animal utilization. However, the use of emotional support animals (ESAs) research has been limited, which has led to many assumptions that ESAs have the same rights and benefits as assistance animals (Pet Partners, 2018). This research will assist by contributing to the current body of academic literature on ESA.

This chapter will include reviewing the gap in the current literature, problem statement, purpose statement, and research questions. The research framework for this study is hermeneutic phenomenology. This chapter will end with a brief description of the nature of the study, definitions, assumptions, limitations, delimitations, and significance.

Background

Over 43.6 million Americans suffer from a mental health disability, and emotional support is a crucial part of treatment for these individuals (NAMI, 2018). Due to the increased demand for emotional support, ESAs have become an intervention to assist individuals to live independently and travel (Pet Partners, 2018). ESAs are companion animals prescribed by medical doctors or mental health professionals to assist individuals who suffer from a mental health disability that hinders them in one or more activities in life (Chandler, 2010; Parenti et al., 2013; Pet Partners, 2018). ESAs do not have the same legal rights as assistance animals but allow prescribed individuals to have their ESA live with them in their home (U.S. Department of Housing and Urban Development, 2008). In the past ESAs were permitted to fly inside the cabin of an aircraft with their owners to allow the individual to travel via airplane when their mental health disability may not have allowed them to before (U.S. Department of Transportation [DOT], 2003). The government recognized the profound impact that the animals have on an individual's emotional well-being, which granted these protections for ESAs (Parenti et al., 2013; Pet Partners, 2018). However, on December 10, 2020, the U.S. DOT published a new law stating that ESAs are not seen as service animals and

airlines can view them as pets, and as of March 1, 2021, all airlines had banned ESAs (Velez, 2021).

Despite restrictions, over the past couple of decades, there has been increased utilization of AAT interventions in the counseling environment. Some of these interventions include equine therapy, AAT, animal-assisted activities (AAAs) and the inclusion of ESAs in the counseling sessions (Chandler, 2012). AAT is a goal-directed intervention using an animal that meets specific criteria during the treatment process. For example, equine-assisted therapy is a treatment that includes equine activities to promote physical, occupational, or emotional growth, which benefits individuals experiencing Attention Deficit Hyperactivity Disorder (ADHD), anxiety, autism, cerebral palsy, dementia, depression, developmental delay, genetic symptoms, traumatic brain injuries, behavioral issues, abuse issues, and many other mental health problems (Tania et al., 2016). Equine-assisted therapy also helps individuals build confidence, self-efficacy, communication, trust, perspective, social skills, impulse control, and learn boundaries (Selby & Smith, 2013; Tania et al., 2016).

Individuals using AAT in health and human services have undergone specialized training within the scope of their practice (Kruger & Serpell, 2010). Specially trained professional, paraprofessionals, or volunteers deliver these activities in many diverse types of environments, including but not limited to hospitals, jails, nursing homes, and residential facilities (Kruger & Serpell, 2010). Training has occurred with the animals before utilization which provides specific techniques that align with AAAs. Additionally, AAT in counseling (AAT-C) is a counseling-specific AAT technique that

follows all the American Counseling Association (ACA) competencies of using animals during counseling sessions and links the animal to the client's goals (Stewart et al., 2016). Before implementing this intervention in the counseling sessions, developing a structured treatment plan indicating the animal's presence should occur (Stewart et al., 2016). But unlike, AAT, AAAs do not have a specific treatment plan goal, and the providers who utilize this technique do not have to maintain detailed progress notes (Kruger & Serpell, 2010; Pet Partners, 2018).

Though the use of prescribed ESAs has increased significantly, there remains inaccurate information and many false assumptions of ESAs due to the limited specific research on this topic (Chandler, 2010; Pet Partners, 2018; Yamato et al., 2015). There has still been limited research conducted on ESAs and how this plays a role in counseling in therapeutic settings. Only 40% of practitioners have indicated experience and education with AAIs (Berget et al., 2013). It was also found that the presence of an animal had a positive impact on the perceptions of female therapists but not as much with male therapists (Schneider & Harley, 2006).

Utilization of Animals

Research has been conducted on the positive impact of pet ownership. For instance, having an animal or pet can be beneficial to children and adolescents in health care settings (Barker, 1999). Pet owners also have an increased sense of belonging due to their pet and an increased sense of meaning and purpose by being responsible for the pet (Chandler et al., 2015). Owning a dog increases satisfaction with an individual's life, increases happiness, increases overall well-being, and enhances human physical health

and psychological well-being (Bao & Schreer, 2016; O’Haire, 2010). Additionally, individuals who experience abuse, neglect, or traumatic experiences could gain healthy attachments from owning an animal or being in the presence of a companion animal, allowing for an emotional bond that was not negatively affected due to abuse, trauma, or neglect (Barlow et al., 2012; Crawford et al., 2006). The presence of a companion animal has also affected prosocial behavior in a workgroup of adults (Colarelli et al., 2017). For example, having a companion animal present during an interview can impact the perceived level of empathy and willingness to self-disclose (Goldman et al., 2015). Therefore, there is a positive benefit of pet ownership and the human–animal bond.

Further, there have been detailed studies on AAT and this intervention throughout counseling and mental health settings. This intervention is effective in health care settings, working with specific populations, and can be an intricate part of the therapeutic environment and processes (Chandler et al., 2010, 2015). AAT has promoted social communication between children with language impairments and typically developing peers and can be beneficial when working with students with emotional disturbances (Boyer & Mundschenk, 2014; Geist, 2011; Grigore & Rusu, 2014). This intervention also has the potential to unify itself with a myriad of cognitive, behavioral, psychosocial, physiological, and physical therapies (Chandler et al., 2010; DeCoursey et al., 2010). In AAT, the animal functions through a collaborative partnership with the therapist to provide a friendly, non-judgmental, compassionate, and stimulating bridge to the therapeutic alliance (Chandler et al., 2010; Pet Partners, 2018).

Emotional Support Animals

ESAs are companion animals that assist an individual who suffers from a mental health disability (Pet Partners, 2018). As described by the Americans with Disabilities Act (ADA) of 1990, a disability is defined as significantly limiting an individual's life (U.S. Department of Justice, n.d.). ESAs differ from service animals due to the lack of training to complete a specific task (Parenti et al., 2013; Pet Partners, 2018). But the presence of the ESA is what reduces the symptoms of the owner's mental health disability.

Despite the potential benefits of ESAs, there remains limited information and a lack of understanding about ESA. Guidelines for ESAs are ambiguous and confusing (Bourland, 2009; Chandler et al., 2010; Pet Partners, 2018). Further, many colleges do not allow students with mental health disabilities to have their ESAs with them, which has resulted in an increased number of lawsuits and consequences for the schools (Von Bergen, 2015). Additionally, many who use ESAs can experience adverse effects and an increased amount of mental health symptoms due to the assumptions made for the ESA, making the ESA not as beneficial as it could be.

Many also lack the knowledge of the importance of human–animal bonds and the benefit of using this intervention. Due to the lack of understanding, this is a cost-effective therapy modality overlooked (Silcox et al., 2014). After surveying the National Association of Social Workers members, less than 5% had any formalized training in human-animal relationships. The majority had not considered including animals in therapeutic interventions (Risely-Curtiss, 2010). Due to the lack of knowledge,

assumptions made that ESAs are equivalent to service animals, and the lack of recognition of how an animal can affect an individual, this intervention is underutilized.

Problem Statement

ESAs are companion animals that provide therapeutic benefits to an individual with a mental or psychiatric disability (Wisch, 2015). These animals provide an individual with affection and companionship and help an individual achieve emotional stability and unconditional love (Bao & Schreer, 2016; Barker, 1999; Chandler et al., 2015). ESAs assist an individual in being calm and relaxing, lowers anxiety, alleviates loneliness, enhances social engagement and interaction, normalizes heart rate and blood pressure, reduces pain, reduces stress, and reduces depression to increase pleasure (Chandler, 2012). For an individual to utilize an ESA for independent living support and airline travel, the individual must have a verifiable disability determined by a physician or mental health professional (Fair Housing Act of 1968, 2004; U.S. Dog Registry, 2013; Wisch, 2015). As of January 2021, the federal government has made the determination that ESAs do not have to be recognized as services animals and it is up to the discretion of the airline if they will allow ESAs to be present on flights (Velez, 2021).

Due to the limited research with ESAs, society assumes that AAT, ESAs, and AAAs are congruent (Wisch, 2015). Research has been conducted on the benefits, techniques, and utilization of AAT, AAA, and equine-assisted therapy; however, there is a gap in the literature related to the use of ESAs in the counseling process despite the prevalence of their use in counseling. There is also no information on the counselor's perception of the inclusion of ESAs in the counseling sessions. Without research in this

area, counselors and counselor educators may not provide appropriate care for clients who include ESAs in counseling.

Purpose of the Study

The purpose of this hermeneutic phenomenological study was to highlight the lived experiences of professional counselors who allow their clients to include ESAs in the counseling environment and address the gap in the current literature. Some individuals who suffer from anxiety and depression utilize ESAs to live independently and travel (Chandler, 2012; Stewart et al., 2016). However, there is a lack of research on the use of ESAs and how this relates to the counseling profession. By exploring the lived experiences of counselors who allow the inclusion of clients' ESAs in the counseling environment, this study can be the beginning of further research on the counseling profession. The outcomes of this study can also further research on animal-assisted counseling and techniques.

Research Questions

Research questions are developed to be an appropriate roadmap to the research (Kafle, 2011). One central question and 11 subquestions guided this study. The central question was "What are the lived experiences of counselors who allow for the presence of the client's ESA during counseling sessions?"

Framework

Hermeneutic phenomenology was utilized as the guiding conceptual framework for this study. Researchers use hermeneutic phenomenology to address the interpretation or determining the meaning of experience (Gadamer, 2004). Hermeneutics involves

studying the whole of the topic and not pieces; the hermeneutic circle explains how a topic is a whole, but then chosen parts of the topic are analyzed (2009). Perceptions of the topic are synthesized, and a new whole topic or phenomenon is established and explained (Gadamer, 2004; Heidegger, 2009).

Using hermeneutic phenomenology allowed the essence of ESAs to be studied, creating a new perception by analyzing the parts or experiences of the counselors who allow clients to bring ESAs to the counseling sessions. Due to the limited research on this topic, society has formed many assumptions of ESAs as equivalent to therapy dogs or assistance animals (Chandler et al., 2015; Stewart et al., 2016). These assumptions and other confusion have arisen due to the lack of clear distinction between emotional support and therapy animals. This study will begin with exploring the experiences of counselors that allow clients to present with their ESAs; these experiences analyzed and then synthesized to capture the essence of ESAs in the counseling environment.

Nature of the Study

This hermeneutic phenomenology study focused on the lived experiences of counselors who allow clients' ESAs during the counseling sessions. Using hermeneutic phenomenological methodology allowed me to interpret how each counselor utilizes this intervention, the experiences that have occurred, and then analyze the data to determine an interpretation of the phenomenon of ESAs as a whole. Utilizing the hermeneutic circle allows the researcher to explore all the individuals' experiences and develop an interpretation (Giorgi, 2012). This research design is the most appropriate for this study due to the limited research on this topic and the need for increased understanding of the

perceptions, attitudes, experiences, and behaviors that occur when clients bring ESAs to counseling sessions.

Definitions

Animal-assisted activities (AAAs): AAAs include an animal being present for hospital visits, nursing home visits, memory care, stress reduction events at airports/universities, hospice settings, and at-risk youth. These visits usually are just with the volunteer or owner of the animal, the animal, and the individual that is visited (Pet Partners, 2015).

Animal-assisted interventions (AAs): AAs are goal-oriented and structured interventions that intentionally incorporate animals in health, education, and human service settings for therapeutic gains and improved health and wellness (Pet Partners, 2015).

Animal-assisted therapy (AAT): AAT is a complementary intervention developed by Boris Levinson in the early 1960s. AAT is a therapeutic intervention conducted by a trained human service provider (e.g., mental health professional, health professional) and a certified animal (e.g., dog or horse; Dietz et al., 2012).

Companion animal: A companion animal should be domesticated or domestic-bred animals whose physical, emotional, behavioral, and social needs are met due to companions in the home or close daily relationships with humans (American Society for the Prevention of Cruelty to Animals, n.d.)

Emotional support animals (ESAs): An ESA is also known as a comfort animal. ESAs are pets that provide therapeutic support to a person with a mental illness. A

licensed mental health professional or medical doctor must prescribe the pet for the person with the mental illness. The prescription must state that the individual has an impairment that substantially limits one or more major life activities and that the animal's presence is necessary for the individual's mental health (Pet Partners, 2018). Per the ADA, individuals with ESAs do not have the same rights to public access as individuals with a service dog (Brennan & Nguyen, 2014). ESAs may only accompany their owners in public areas, which permits the ESA to be present. ESAs may live with their owner in locations covered by the Fair Housing Amendments Act (FHAA) regardless of a "no pets" policy. They may travel with their owners on airplanes with documentation as required by the airline. Dogs are most frequently utilized but maybe other domesticated animals (Pet Partners, 2018).

Human-animal bond: The human-animal bond is a mutually beneficial and dynamic relationship between people and animals that positively influences the health and well-being of both (Pet Partners, 2015).

Human-animal interactions: Interactions include, but are not limited to, emotional, psychological, and physical interactions of people, animals, and the environment (Pet Partners, 2015).

Pet Partners: Pet Partners was founded in 1977 as the Delta Society. This organization has been leading the way and connecting individuals with the healing power of animals. Their Therapy Animal Program is a leader in the field of AAIs.

Service animals: The technical name is "assistance animal." These animals are defined as dogs and, in some cases, miniature horses individually trained to do work or

perform tasks for people with disabilities. Examples may include guide dogs for people who are blind, hearing dogs for people that are deaf, or dogs who provide mobility assistance or communicate medical alerts. They are considered working animals and not pets. The work or task the dog was trained to provide must be causally related to the person's disability. Under the ADA, these animals can accompany a person with a disability to almost anywhere the general public is allowed (Pet Partners, 2018).

Therapy animal: A therapy animal is an animal that provides affection and comfort to members of the public, typically in facility settings such as hospitals, schools, and assisted living (Pet Partners, 2018). These animals have an aptitude for interacting with members of the public and enjoy doing so. Therapy animal handlers volunteer their time to visit with their animals in the community. They do not have any special rights of access, except in those facilities where they are welcomed. They may not enter businesses with "no pet" policies or accompany their handler in the cabin of an airplane regardless of their therapy animal designation (Pet Partners, 2018).

Assumptions

When exploring counselors' and experiences of allowing clients to bring ESAs to the session, a couple of assumptions emerged. One is that all counselors will experience ESAs in the counseling sessions the same. But not all counselors have the same experiences with animals and the human-animal bond. This understanding is significant in the study because all counselors do not have the same experiences throughout life and have differing viewpoints on interventions. Another assumption was that ESAs will be behaved and be an intricate part of the counseling session. This assumption is inaccurate

because not all animals have the same temperament. If an animal is highly active, this could distract the session and not a benefit. If a counselor fears animals or has an allergy to animals, this could be damaging to the counseling relationship.

Scope and Delimitations

The scope of this current study was defined geographically to Alabama. Due to the nature of the study, I tried to focus on cities that had more outpatient counseling offices and not just local mental health settings. I wanted to make sure that I worked with counselors who could allow clients to bring ESAs to sessions and are not regulated by agency limitations.

A delimitation of this study was the lack of a concrete definition of ESA. For this study, ESA was a companion animal or pet prescribed by a medical doctor or mental health professional to assist with a mental health disability. For this study to be effective, a prescreening assessment was given so that counselors who were unaware of ESAs and do not use ESAs would not be included in this research. Another delimitation to this study was that counselors who engage in equine therapy or other specific structured AAT were omitted.

Limitations

Every framework has inherent strengths and limitations. The limitations of this study are as follows. First, due to the geographical location, the information that will be uncovered may not be generalized to the country's entire population. Each geographical area of the country has differing viewpoints, which may not always be congruent. Second, counselors' responses may be influenced by external factors that occurred

outside of the interview meeting. If a counselor had a good session with an ESA, they might not be open to discussing a previously negative situation. Third, the perceptions of the participants may differ, which may have caused differing responses.

Another significant limitation was researcher bias. I had good and bad experiences with dogs and currently have an ESA. Though researcher bias is present in all qualitative research, I accounted for my biases within the study. To ensure that my biases did not affect the study, I used strategies such as triangulation of data, participant checks, reflexive journaling, thick and rich descriptions, and self-exploration (Morse, 2015).

Significance

AAIs have been utilized as goal-directed interventions to assist children and adolescents with behavioral problems, communication issues, emotional and mood disorders, and experiences with past trauma. For example, Levinson (1969), identified as the father of AAT, left his animal with his client, a young boy who was not communicative or receptive to the therapy process. After his client was left alone with the animal, he became communicative, built rapport, trust, and completed the treatment process. Furthermore, equine therapy has increased confidence, self-efficacy, self-concept, communication, trust, perspective, anxiety reduction, decreasing isolation, self-acceptance, impulse modulation, social skills, assertiveness, boundaries, creative freedom, and spiritual growth (Cumella & Simpson, 2014). Petting an animal also releases an automatic relaxation response by promoting the release of serotonin, prolactin, and oxytocin---the hormones that play an essential part in elevating moods. The

presence of an animal can lower anxiety, help people relax, provide comfort, reduce loneliness, increase mental stimulation, provide an escape or happy distraction, and act as a catalyst in the therapy process by breaking the ice or reducing the initial resistance in the counseling process (Morrison, 2007).

Over the past few years, the use of ESAs or companion animals has increased. But there is limited research on the use of ESAs and how they can be effective in the therapeutic process. To date, researchers have conducted qualitative research inquiries on animals in the counseling process; however, the existing research is related to other mental health professions, the clinician's animal and not the client's animal, and different animal-assisted techniques (Chandler, 2012; Kruger & Serpell, 2010; Stewart et al., 2016; Tania et al., 2016; Wilkes, 2009). Using an animal that belongs to an individual can reduce negative feelings to assist them in living independently and traveling. The findings of this study will provide insight into how utilization of the client's ESA throughout counseling sessions by identifying the counselor's experiences and perspectives when an ESA is present in the counseling session.

Summary

Research has shown the benefits of human–animal bonds and the increased use of ESA for independent living and airplane travel. But there have not been any studies on the use of ESA throughout counseling sessions. This hermeneutic phenomenological study was conducted to collect, describe, and interpret experiences of counselors who allow clients to bring ESAs to counseling sessions. This study will understand an additional therapeutic intervention used to increase counseling and reduce the millions of

Americans who have mental health issues and do not seek treatment. This study could also add to the literature on ESAs and start to bridge the gap that is currently present.

Chapter 2: Literature Review

Over the past couple of decades, counselors have started to utilize animals more in their practice. Some of these interventions used are equine therapy, previously known as hippotherapy, AAT, AAAs, and ESAs (Chandler, 2012). After conducting an extensive search of the literature, I identified numerous studies that explored the efficacy of AAT, limited studies on AAAs activities, and minimal research on ESAs and their involvement in the counseling process. Counselors and counselor educators do not have adequate research on this topic but utilize this intervention throughout the counseling process. As a result of this limited information, counselor and counselor educators are ill-equipped to use this intervention when working with clients who utilize ESAs. The purpose of this phenomenological study was to understand the lived experiences of counselors who allow their clients to use ESAs during counseling sessions, increasing the knowledge of ESAs and explore the essence of counselors' experiences. Prospective outcomes of this study include the inclusion of this intervention during counseling sessions, identification of potential issues when using this intervention, and the possible reduction of the negative stigma of mental health that hinders clients seeking treatment.

In this chapter, I focus on three main sections, with several subsections. First, I discuss the different AAs, use of these interventions, previous research on these interventions, and the laws and ethics surrounding each intervention. An overview of all the AAs will lay a foundation for discussing the possibilities of increased utilization of other animal-assisted interventions, such as ESAs, into the counseling sessions. The second section includes the research framework that will identify the effectiveness of a

qualitative phenomenological study. Hermeneutic research is the framework of this study, which allowed the essence of ESAs to be identified, explored, and discussed. In the third section of this chapter, I will focus on ESAs. I will first review the historical perspective of ESAs. Second, I discuss the current use of ESAs and the laws that surround this intervention. Lastly, I explore the growth of ESAs and everyday use in daily life and counseling sessions.

Literature Search Strategy

I implemented several modalities in the search for relevant literature for this research study. The primary databases searched were EBSCOhost, SAGE, ProQuest, and PsychINFO. The search terms covered numerous categories that included many different topics. Categories encompassed individual terms such as *emotional support animals*, *companion animals*, *animal-assisted therapy*, *therapy animals*, *therapy dogs*, *emotional support animals and counseling*, *and counselors using animals during counseling*, and *hermeneutics research*, and *phenomenological theory*. The Boolean method of database inquiry adds the words “and,” “or,” or “not” to assist the researcher in finding more valid results by expanding or simplifying the research results (Pratt, 2015). I used the Boolean method to produce more relevant results, which allowed the search engines to combine the keywords to display the relevant results. Additional searches focused on qualitative approaches, phenomenological approaches, ProQuest dissertation searches, and cross-discipline searches (e.g., nursing literature, social work literature, medical literature, and psychiatric literature).

Conceptual Framework

Hermeneutic Phenomenology Research and Origin

Hermeneutic phenomenology is a research method used as a pedagogical aid in cases where understanding a subject is not easily understood and describes how human beings experience a particular phenomenon (Gadamer, 2008). It is concerned with the live world or human experience, detailing aspects within the experience to create understanding (Wilson & Hutchinson, 1991). This type of research allows the researcher to explore the perceptions, perspectives, understandings, and feelings of the individuals who have been involved or lived the phenomenon or topic of interest (Giorgi, 2012). Modern hermeneutics is an interpretative type of research that uses verbal and nonverbal communication, semiotics, presupposition, and pre-understandings. This research method centers on the experiences of the individuals researched and does not regard social or cultural norms, traditions, or preconceived notions about the experience (Giorgi, 2012). Using this research method, a researcher attempts to unveil the world as experienced by the individuals researched through their lived experiences and real-world stories.

Husserlian Philosophy

Phenomenology is a research method that stems from philosophers like Edmund Husserl, Martin Heidegger, and Hans-Georg Gadamer (Giorgi, 2012). Husserl argued that people's understandings serve as the foundation of all knowledge (Husserl, 1970). In Husserl's early works, he attempted to combine mathematics, psychology, and philosophy to provide a foundation for mathematics. Husserl's investigations were the beginnings of the formal theory of wholes and their parts. He was one of the main

contributors to phenomenology due to his findings regarding consciousness and intersubjectivity (Zahavi, 2003). Husserlian terminology associates phenomenology with the goal of establishing the meaning related to a particular phenomenon, revealing the correlation of this interpretation to life experiences (Wimpenny & Gass, 2000).

Heideggerian Philosophy

Though Husserl was interested in the acts of attending, perceiving, recalling, and thinking about the world and human beings were knowers, Heidegger viewed humans as concerned creatures emphasizing their fate in an alien world (Wilson & Hutchinson, 1991). Heidegger suggested that understanding is a basic form of human existence that helps people know the way they are (Koch, 1995). Meaning is found through the world and background and experiences in the world (Koch, 1995). Based on Heidegger's thoughts, all understanding is connected to a given set of fore-structures, including past experiences, which cannot be eliminated. An individual must be aware that there may be interpretive influences. The interpretive process can be achieved through a hermeneutic circle, which moves from the parts of the experience to the whole experience and continues to do this to increase the depth of engagement and understanding (Annells, 1996).

Hans-Georg Gadamer

Influenced by the work of both Husserl and Heidegger, Hans-Georg Gadamer moved to extend Heidegger's work into a practical application (Gadamer, 2008). Gadamer saw the results of hermeneutics not as developing a procedure of understanding but to clarify the conditions in which learning occurs (Gadamer, 1998). He suggested that

understanding and interpretation are bound together, and interpretation is an evolving process; thus, a definitive interpretation is likely impossible (Annells, 1996).

Research Assumption and Framework

Through the development of hermeneutic phenomenological research, several assumptions developed. The ontological, epistemological, axiological, and methodological assumptions are the foundational aspects of this study. The use of these assumptions with hermeneutic phenomenology allowed the study to identify with counselors who currently utilize the intervention of ESAs during counseling sessions.

Ontological Assumption

When an individual takes on this assumption, they feel that there is a reality to be obtained through discovering cause--effect relationships behind social reality (Hoijer, 2008). Ontological knowledge can be seen as knowable knowledge using scientific methods in research (Sargent, 2011). Using the ontological assumption, the study identified why ESAs were used without empirical evidence. This finding will assist the illumination of the essence of the ESAs.

Epistemological Assumption

One of the main assumptions in science is associated with epistemology. Natural sciences incorporate epistemological assumptions. The subject--object problem is simple enough to manipulate as subjects can be removed from the scientist so that bias is removed and variables controlled (Carnaghan, 2013). Using the epistemological assumption, I used triangulation to reduce the possibility of the research influenced by my ideas and bias.

Axiological Assumption

The axiological assumption is associated with the role of the values in research (Sargent, 2011). Researchers must determine possible issues that can arise if personal biases and values are overlooked. The lack of focus on axiological assumptions can negatively impact research and research processes. Using the axiological assumption, I identified the values of this research and possible issues that may arise to develop a plan to maintain the authenticity of the research.

Methodological Assumption

The final assumption is the methodological assumption. This assumption involves how the researcher needs to be aware of the current trends and knowledge on the subject to determine which methods would be useless for the study (Carnaghan, 2013). Using the methodological assumption, I was aware of the current trends and knowledge present with ESAs with hope to raise awareness of the importance of continued research on this topic.

Dasein and Existenz

Many counselors and counselor educators have previously been exposed to ESAs and the utilization of this phenomenon and formed their *Dasein* to this phenomenon. Due to the limited research of ESAs, the *Existenz* of this phenomenon has not been illuminated. In increasing the knowledge of ESAs, counselors and counselor educators will see ESAs as *Dasein* or presence. Still, they will see them as *Existenz* or value and authenticity of this phenomenon. The only way to determine the authenticity of a phenomenon is through lived experiences and not just the *Dasein* (Heidegger, 1962).

Literature Review

Literature and Research-Based Rationale

The current research focused distinctly on ESAs is significantly lacking. There is mostly research related to AAT, AAAs, and other interventions utilized in helping professions. AAT is a broad intervention, and there are many misconceptions of the utilization of animals for psychological issues due to the broad scope (Fine, 2010). But many note that AAT is not a stand-alone profession and needs to be an adjunct modality that enhances the efficacy of existing professional practice (Chandler, 2012; Kruger & Serpell, 2010). It is essential to increase knowledge to recognize differences between services rendered through AAAs and AAT. Animals are utilized and accepted by psychological, educational, and medical researchers and practitioners (Fine, 2010.) Though all the noted research has the animal present during the psychotherapy to belong to the clinician (e.g., Wilkes, 2009), the use of animals in therapy has evolved over time. But no study involved the client bringing their ESA to the counseling session. Due to the lack of research, I found many assumptions about using ESAs, which led to further misconceptions, lack of validity of utilization, and other mixed messages about this intervention.

History of Therapeutic Benefits of Animals

The therapeutic use of animals has been used for many centuries, dating back to the ancient Egyptians and Greeks (Fine, 2010; Levinson, 1997; Serpell, 2010; Society for Companion Animal Studies 2010). Florence Nightingale also recognized the benefits of animals with patient care and recovery (All et al., 1999). This implication was one of

nursing's first use of animal-facilitated therapy in the United States. Her writings commented on how small pets can be companions for the sick, especially in long chronic cases (Matuszek, 2010).

Additionally, Sigmund Freud, the father of psychoanalysis, learned that animals could have a calming effect over people, sense an individual's emotional state, and were great judges of character (Serpell, 2010). He used his therapy dog Jofi, a Chow Chow, in his office during psychotherapy sessions. Jofi progressed from being a comfort to the psychoanalyst to becoming a comfort to his clients due to Jofi being present. When Freud worked with children and adolescents, he identified that people were more willing to open up when Jofi was in the room (Melson & Fine, 2010). He noted that they had an easier time talking about painful issues when Jofi was present (Serpell, 2010).

The first formal therapeutic work and research was conducted by Boris Levinson, the father of AAT (Serpell, 2010). In 1961, Dr. Levinson had an "accidental discovery" involving his dog Jingles. Levinson left Jingles alone with his client, a young boy, and when he returned, he found the client interacting with Jingles. The client was not responsive and not communicating with Dr. Levinson before leaving the client. Levinson (1997) found that the presence of a dog during therapy sessions had a positive effect on the impaired young clients. He used the word "pet therapy" about Jingle's beneficial effects on mentally impaired children in a therapeutic setting (Levinson, 1997; Serpell, 2010). Levinson (1969) found that through interaction with animals, people can reconnect with humans. This reconnection can occur through three stages: a connection with nature, animals, and finally, humans (Levinson, 1997).

Based on his discovery, Levinson (1969) developed seminal work titled *Pet-Oriented Child Psychotherapy* (Risley-Curtiss, 2010). According to Levinson, companion animals can strengthen the therapeutic rapport between the therapist and the client, which enhanced the therapeutic process (Risley-Curtiss, 2010; Zilcha-Mano, Mikulincer, & Shaver, 2011). Levinson continued to integrate the use of animals to psychotherapy sessions, studied the effects of the intervention, noted themes, developed techniques, and presented his findings through publishing papers and conference presentations. These pet-oriented techniques were gaining popularity, but few people were using this intervention until the early 1970s when Corson and Corson from Ohio State University started to work with these techniques (Behling et al., 2011; Levinson, 1997). However, additional research was still needed to determine the role of animals in various human cultures and ethnic groups over the centuries, the effect of human personality development in association with animals, human–animal communication, and the proper use of animals in formal psychotherapy (Levinson, 1997).

Since the development of pet-oriented psychotherapy in the 1960s with Levinson, there has been increased literature on the utilization of animals and the benefits of animals within the therapeutic relationship. Many reported that pet-oriented/AAT is a beneficial complement or adjunct therapy and not a therapeutic technique (Chandler, 2012; Kruger & Serpell, 2010). There are many benefits of animal utilization to the therapeutic process. Still, due to the lack of research on ESAs and limited research on the other animal-assisted techniques, there is little empirical support and statistical validity (Stewart et al., 2013).

Animal-Assisted Interventions

In the past few decades, the interest and use of animal-assisted techniques have increased (Raupp, 2002). There has been an increase in professionalism, practical guidance, ethics of animal usage, and animal matching to humans over recent years (Raupp, 2002). But there is a need to educate students at universities and colleges so that there can be an increase in the number of scholars on this topic (Fine, 2010; Raupp, 2002).

Animal-Assisted Therapy

AAT is a process in which animals are directly integrated into the therapeutic environment and processes (Chandler et al., 2010). AAT is a goal-directed intervention delivered by an appropriately credentialed health or human service professional (Pet Partners, 2016). AAT collaborates with many cognitive, behavioral, psychosocial, physiological, and physical therapies (Chandler et al., 2010; Marcus et al., 2013). The animal is a collaborative partner to the mental health professional to provide a friendly, non-judgmental, compassionate, and stimulating emotional bridge to the therapeutic relationship (Chandler et al., 2010; Fine, 2010).

Researchers have tested, explored, and experimented with the efficacy of AAT interventions among individuals suffering from pervasion development disorders, cerebral palsy, speech disorders, cardiovascular disease, depression, schizophrenia, Alzheimer's disease, cancer, spinal cord injuries, rehabilitation centers, and nursing homes (Marcus et al., 2013). Literature has indicated that AAT interventions can improve health conditions with cardiovascular stress, decrease systolic and diastolic blood

pressure, improve neurological stress markers, and increase the production of neurotransmitters such as endorphins and dopamine (Aoki et al., 2012; Marcus et al., 2013).

In addition to health benefits, the use of AAT has demonstrated significant improvement in emotional affect and attunement, depressive symptoms, socialization, enhancing self-esteem, and enhancing overall psychophysiological health (Chandler et al., 2010). The use of AAT can assist increased client motivation to attend and participate in therapy sessions, improve clients' sense of safety and calmness during sessions, increase client focus and attention during sessions, and provide nurturance and facilitating growth and healing for clients through client-therapy animal play, petting, and other appropriate interactions (Chandler, 2012). In addition, using AAT can promote social communication with children with language impairments and children with autism spectrum disorder (Boyer & Mundschenk, 2014; O'Haire, 2010). Bizub, Joy, and Davidson (2003) conducted research and found that equine therapy with clients with psychiatric disabilities can provide stress and anxiety relief, relaxation, joy, interest in participating in activities and diminishes isolation. Research has shown that AAT elevated self-esteem, satisfaction, coping skills, sleep hygiene, friendship, support, and unconditional love (Bizub et al., 2003; Chandler et al., 2010, Marcus et al., 2013).

AAT is an intervention that requires training of the animal utilized throughout the therapy process (Fine, 2010; Chandler et al., 2010). For equine therapy, the Professional Association of Therapeutic Horsemanship International (PATH International) states that a trained, licensed mental health professional or an appropriately certified equine

professional must be present during AAT (PATH International, 2012). Canines utilized for AAT must complete training to become therapy dogs (Therapy Dogs International, 2018). Over the years, AAT has progressed from being a topic of interest to become an integral part of an individual's treatment process.

Many equine therapy programs assist with communication disorders, autism, healthy lifestyle changes, health concerns, substance use disorders, and other mental health disorders (PATH International, 2012). Therapy dogs have become prevalent when working in correctional settings, residential settings, nursing homes, and hospitals (Chandler, 2010). Therapy dogs can work with individuals that experience chronic health conditions, mental health disorders, and other disabling conditions (Pet Partners, 2018).

Once a dog becomes a therapy dog, it can be part of an individual's treatment process and integrated into a treatment plan; however, they are not protected by the ADA (Pet Partners, 2018). Many assume that since an animal is a therapy animal, it can receive the same rights as a service or ESA (Von Bergen, 2015). However, this assumption is inaccurate, and therapy dogs do not have the same rights as a service or assistance animal (Brennan & Nguyen, 2014; Pet Partners, 2018). It is essential for the handler of therapy animal to be knowledgeable about the laws that surround this topic and make sure that they are taking care of the animal, maintaining self-care for the animal, and doing what is needed so that the animal does not experience burnout or other negative consequences from the intervention (Brennan & Nguyen, 2014).

For a mental health provider to utilize this intervention, they must be knowledgeable about the laws surrounding the therapy animal used, have been

adequately trained in the intervention, and maintain their scope of practice (ACA, 2014; Chandler, 2010; PATH International, 2012; Pet Partners, 2018). This intervention is still relatively new to research, and training programs are scant.

Animal-Assisted Activities

AAAs is an intervention that provides an opportunity for motivational, educational, or recreational benefits enhancing the quality of life delivered by a specifically trained professional, paraprofessional, or volunteer in partnership with an animal that meets specific criteria for suitability (Fine et al., 2010; Pet Partners, 2018). Research has been conducted on the connection of animals and humans and found that this connection has potential implications for individual stability and health, improved economic outputs, and healthcare cost savings (Takashima, 2014). AAAs are typically short meet and greet sessions of pets visiting individuals in a hospital, long-term care center, residential setting, etc. (Chandler, 2010). Specific treatment goals are not planned for each visit, there is no need for documentation, and visits are spontaneous and can be as short or as long as needed (Pet Partners, 2018).

There has been limited research on AAAs due to the lack of inclusion into an individual's treatment plan and lack of direct human/animal interaction in the formal treatment process (Chandler, 2012; Fine, 2010). AAAs involve goal-directed activities developed to improve patient's quality of life using the human/animal bond (Chandler, 2012). Animals and handlers are screened and trained (Pet Partners, 2018). AAAs may be therapeutic but are not utilized by a credentialed or trained clinicians. The tasks of AAAs include visiting with patients, friendly petting, some playful activity, or education about

or related to the animal itself (Chandler, 2012; Fine et al., 2010). This intervention is less formal than AATs.

AAA animals are not directly trained animals in AATs. The animal used for AAAs must have completed obedience training, respond to basic commands, and follow commands without distraction (Chandler, 2012). Due to the lack of exercise, the handler must be aware of the pet's behaviors, watch for any new or different behaviors, and make sure that the animal is appropriately cared for to prevent burn-out or vicarious trauma to the animal (Chandler, 2012; Pet Partners, 2018).

Animals used for AAAs are not protected under federal or state laws (Pet Partners, 2018). The handler is responsible for their animal and the animal's emotional well-being (Chandler, 2012; Pet Partners, 2018). It is essential to know that due to the lack of protection for the animal, the handler must be aware of how the animal behaves throughout all visits. Suppose the handler feels that the animal may not be behaving appropriately. In that case, it is their responsibility to end the visit and get the animal any needed assistance (Pet Partners, 2018).

Assistance or Service Animals

An assistance or service animal is an animal that works, aids, or performs tasks for the benefit of a person with a disability or provides emotional support that alleviates one or more identified symptoms or effects of a person's disability (ADA, 1990). For an animal to be considered a service animal, the animal must receive specific training to work or perform tasks to benefit an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability (ADA, 1990). Under Title II

and Title III of the ADA, service animals are limited to dogs and, under exceptional circumstances, miniature horses (Brennan & Nguyen, 2014). Many diverse service animals, including Guide Dog or Seeing Eye Dog, Hearing or Signal Dog, Psychiatric Service Dog, Sensory Signal Dog or Social Signal Dog, and Seizure Response Dogs. All these service animals are trained to complete a specific task and are not service animals unless this training has been completed and documented (ADA, 1990; Brennan & Nguyen, 2014).

There is limited research on service animals and how these affect mental health professionals. Past investigation has occurred to determine the need for Psychiatric Service Dogs. These trained dogs perform tasks that assist individuals with disabilities in detecting the onset of psychiatric episodes and reducing their effects. These tasks could be reminding the handler to take medication, provide safety checks or room searches, turning on lights for persons with post-traumatic stress disorder (PTSD), interrupting self-mutilation by persons with dissociative identity disorders (DID), and keeping disoriented individuals from danger (Brennan & Nguyen, 2014).

The utilization of service animals has increased over the years. Individuals diagnosed with PTSD, DID, and other mental health disabilities have started to use this research. The ADA allows service animals to be present with their handler in all locations, including public places. This allows the individual with a disability to have the same rights as other individuals that do not experience disabilities or disabling conditions (ADA, 1990; Brennan & Nguyen, 2014).

Emotional Support Animals

An ESA is a “companion animal” or pet that a medical professional or licensed mental health professional deems beneficial for a person that is disabled by a mental health condition or emotional disorder (Pet Partners, 2018). Individuals that are appropriate for an ESA have a disabling mental health condition or emotional disorder that hinders them in one or more aspects of their life. This could include the inability to live independently without experiencing an increase in symptoms or the inability to travel by airplane without a rise in symptoms (Pet Partners, 2018). As of January 2021, ESAs are no longer recognized as service animals by the federal government (Velez, 2021). Emotional support animals do not have any training and cannot accompany an individual to public places as a service animal could. Many have a misconception about an ESA and feel that they can take their animal with them for all daily activities if prescribed an ESA. Psychiatric service animals can also serve as emotional support; however, emotional support can not be considered psychiatric service animals due to the lack of training (Tedeschi et al., 2010).

There has been limited research on ESAs and the utilization during therapy sessions. Wilkes (2009) study found that in the presence of the three participants’ animals, the clients had a more beneficial therapeutic relationship, warmer therapeutic environment, and other positive impacts of the animal’s presence. ESAs have psychological benefits of increased communication and connections to others within the presence of an animal which has caused an increased recommendation of ESAs by health care providers (Tedeschi et al., 2010). There is limited research on ESAs and their

distinct effect on individuals if they utilize this intervention. Due to the scant research, many misconceptions form, the essence of the intervention may not have been found, and there are many formed negative or false beliefs.

Recently there have been different changes in the use of ESAs. In the past, Delta changed the guidelines needed for an ESA and does not allow passengers to have a letter for utilization. They also did not allow that pit bulls to be considered an ESA on the airline (“Delta Service and Support Animal Policy,” 2018). There has been an increase in online platforms that will enable individuals that meet specific criteria to get a letter for an ESA. Due to these platforms, people are overusing ESAs, and some of these individuals do not have psychological disabilities as the definition of ESA requires. In December 2020, the U.S. DOT made changes that airlines do not have to recognize ESAs as service animals and can be deemed as pets. As of March 1, 2021, all airlines have banned ESAs (Velez, 2021).

The definition of an assistance animal applies to ESAs as documented by the ADA, Fair Housing Act, and Air Carriers Access Act (Brennan & Nguyen, 2014; Pet Partners, 2018; Tedeschi et al., 2010). The act protects a person with a disability from discrimination in obtaining housing, must provide reasonable accommodations to people with disabilities so that they have an equal opportunity to enjoy and use a dwelling, and do not have the right to ask the applicant about the existence, nature, and extent of his or her disability (Brennan & Nguyen, 2014). The Air Carriers Access Act requires airlines to allow service animals and ESAs to accompany their handlers in the aircraft’s cabin (Brennan & Nguyen, 2014). The U.S. DOT has overruled the Air Carriers Access Act

ruling that allows ESAs to accompany their handler and the animal has to be a service animal (Velez, 2021). There is a blurred line between service animals and ESAs, which causes some misconceptions that can hinder the utilization of ESAs.

Summary and Conclusion

The utilization of animals during therapy sessions has been on the rise for many years (Chandler, 2012; Fine, 2010). Research has found that AAT can be effective for psychological issues, physical health, and increased social communication and interactions (Chandler et al., 2010). AAAs are beneficial to patients that received visitation from the animal (Chandler, 2012). Service animals are effective to assist in individuals with a disabling condition (Brennan & Nguyen, 2014). ESAs are effective in helping individuals that have a psychiatric or psychological disability that hinders one or more of their daily activities (Tedeschi et al., 2010). The difference between AAT, AAAs, service animals, and ESAs is that ESAs are untrained, and all the other animals utilized in these interventions have completed training. The laws surrounding these interventions differ, and due to the blurred lines, there are many misconceptions of each intervention, which has hindered the progression of these in many ways (Brennan & Nguyen, 2014; Chandler, 2012; Fine, 2010; Tedeschi et al., 2010).

One out of every five adults in the United States experiences mental illness in a given year (NAMI, 2018). Even though there is more prevalent access to services, 56% of adults with mental disorders do not receive treatment (Mental Health America, 2018). There is no specific reasoning or theme why individuals do not seek services. Due to the advancement of counseling and other mental health professions, clients may become

more open to receiving services. Animal utilization has increased over the past few decades, but there is a lack of research to support its efficacy. Through the framework of Hermeneutic phenomenology, this study explored the lived experiences of counselors that allowed their clients to bring ESAs to the counseling sessions. Semi-structured interviews and observations were conducted, evaluated, and triangulated to understand the lived experiences of these counselors. Chapter 3 will describe the methodological orientation of this study.

Chapter 3: Research Method

The purpose of this hermeneutic phenomenological study was to explore the lived experiences of counselors whose clients bring ESAs to sessions. There is a lack of research on ESAs and their use during counseling sessions, and this study's conclusions may increase awareness of the previous and current utilization of ESAs during counseling sessions. This study will educate professional counselors and others in helping professions about the therapeutic experiences of counselors who allow clients to bring ESAs to counseling sessions.

Chapter 3 describes the research design and rationale. I then identify my role as a researcher along with details of the chosen methodological approach. I will also address issues of trustworthiness, such as credibility, transferability, dependability, and confirmability about the quality of a qualitative research study. Overall, this chapter will serve as a methodological guide to the study.

Research Design and Rationale

Qualitative research is interpretative and allows the participants' experiences to be illuminated throughout the study (Gill, 2014). To add depth to a study, a hermeneutic phenomenological method can be used to explore and interpret participants' lived experiences (Gill, 2014). Phenomenology and hermeneutic phenomenology are interchangeable, but there are a few distinct differences. Phenomenology is related to examining the participants' lived experiences to gain a clear understanding of the phenomenon (Laverty, 2003). Hermeneutic phenomenology is concerned with the human experience as it is lived. It focuses on illuminating details within experiences to develop

meaning and a sense of understanding (Annells, 1996; Laverly, 2003). Hermeneutic research does not ask the researcher to bracket their biases and assumptions but allows them to become embedded and essential to the interpretive process. In doing this, the personal assumptions of the researcher and the philosophical bases from which interpretation has occurred will be documented in the findings, though it is important to use a reflective journal (Annells, 1996; Laverly, 2003).

I used a hermeneutic phenomenological approach to document the lived experiences of counselors who allow their clients to bring ESAs to sessions, answering the central research question “What are the lived experiences of counselors who allow for the presence of the client’s ESAs during counseling sessions?” Using this research method, the essence of ESAs can be understood by learning individual parts to expand the current knowledge of ESAs (Gadamer, 2008). This approach allowed for a detailed description of the precise, distinct, or shared lived experiences of counselors who permit their client to bring ESAs to counseling sessions (Sloan & Bowe, 2014). This method also allowed for the interpretation of the findings (Paterson & Higgs, 2005) as well as reflecting on the importance of the phenomenon through the lens of the participants’ experiences for added understanding (Kafle, 2011; Wilcke, 2002).

The decision to use hermeneutic phenomenological research further stemmed from the lack of research on ESAs and current assumptions. Research has used quantitative methods to emphasize what was observable (Laverly, 2003), but there is a lack of specific research on the use of ESAs in the therapeutic environment. Some counselors allow clients to bring their ESA to counseling sessions; however, due to the

lack of research, there is no way to discuss this intervention and details surrounding this intervention. Hermeneutic phenomenology was best for researching this topic because it allowed me to interpret the ESA phenomenon through the lens of the counselors who currently utilize this intervention regardless of the differences in the counselors' practices, modalities, and environments.

Role of the Researcher

Before beginning this study, I was aware of my role as a researcher. The researcher in hermeneutic phenomenology is the instrument (Patterson & Williams, 2002). My role in this study was that of researcher-observer in counselors' experiences with ESAs in counseling sessions. I was the primary investigative tool for the research process. I created an open, safe, and inviting holding space for my co-participants to share their experiences. I did not have control over the counselors' practice, treatment modality, the environment utilized for the counseling sessions, or the clients whom the counselors serve.

The idea for this study came from my personal experience with ESAs. Previously, I was a clinical director for a local mental health center. One evening, I observed an ESA that had been brought with a client. During an observation of the dog's mannerisms, I noticed that the dog appeared to become increasingly irritated with another client who had a communicative and development disorder. I asked the staff, psychiatrist, and clinicians for further clarification about the animal's training, how this was utilized during sessions, safeguarding that took place with the animal, and other topics. Through further investigation and research, I learned that ESAs are not trained as service animals

(Pet Partners, 2018) and were only utilized for independent living and airplane travel.

Due to the lack of training, they are not protected as a service animal and do not have the same jurisdiction as a service animal. I also found there was a lack of research on this topic. I further discovered periodicals that discussed individuals taking turkeys and other wildlife on airplanes, which affected the credibility of this topic. However, it appeared that the client who had brought the dog was invested in her counseling sessions, and this progression in attendance occurred when she was granted the ability to bring her dog with her to counseling and psychiatric appointments.

My positive experience with ESA could be a source of potential bias. Another bias that may have been present was my positive and negative experiences with dogs and certain breeds of dogs. Due to my own experiences with dogs and ESAs, there was not a need to address the potential biases. As a result, a set of distinct self-reflection questions was developed, and my dissertation committee members reviewed answers. The answers will be published in Chapter 5. The self-reflection questions were:

1. How will I know my interview questions are free of assumptions or bias?
2. What assumptions do I have about ESAs?
3. What assumptions do I have about the effects of ESAs?

Methodology

Participant Selection

The population for this study included licensed professional counselors (LPCs) who allow their clients to bring ESAs to counseling sessions in a southeastern U.S. state.

All the participants were located in this state. There was not a need to expand the location requirements.

Due to my location and the knowledge of the agencies that assist with the training and advancement of animal utilization, I began with purposive sampling. I also used snowball sampling to achieve the desired research participants. The criterion included counselors who have completed a graduate degree in counseling, are currently licensed by their state licensing board, provide counseling services in an outpatient setting, and allow their clients to bring their ESA to counseling sessions. For purpose of this study, participants with limited or provisional licensure were excluded from participation.

A small sample size, 7 to 10 participants, allows for the gathering of rich descriptions of the participants' lived experiences (Baker & Edwards, 2012; Dworkin, 2012). However, once the data become saturated, which may be possible with less than 7 to 10 participants, and data collection should cease. For this study, saturation occurred after eight interviews. Saturation is reached when the information gathered does not yield new themes or patterns (Dworkin, 2012). Thus, a small sample size allowed for the gathering of rich descriptions of the participants' lived experiences with the phenomenon through in-depth interviews (Baker & Edwards, 2012; Dworkin, 2012).

Instrumentation

In this qualitative research study, I was the primary instrument for investigation. Each participant was asked to participate in two points of data collection. Participants were screened to determine if they met the criteria to be a participant in the study. Once it was determined that they met the requirements, participants participated in a

semistructured interview with specific questions based on the main research questions and subquestions. In the following sections, I will identify the development of the research guidelines utilized throughout each of the three phases of data collection. These guidelines are based on the research questions and the selected research framework.

Procedures for Recruitment, Participation, and Data Collection Plan

I recruited participants by connecting with the director of an animal therapy organization in the designated southeastern state and contacting the executive director of the state's counseling association to obtain guidelines and approval needed to request participants on the association's ListServ. I ensured understanding to the counseling association through communication, drafted a detailed email for the Listserv, and explained the framework of the dissertation to provide clarity.

All the participants were in private practice, and there was no need to get further approval from agency settings. Using snowball sampling allowed participants to suggest new participants who met the criteria for participation of the study.

Screening

I facilitated screening of all potential participants to determine that they are counselors who have completed a graduate-level program, are currently licensed in their state of practice, provide outpatient counseling sessions, and allow their clients to bring ESAs to the counseling sessions. I completed this once the individuals initially contacted me from my recruitment procedures. Once the inclusion of criteria was determined, I asked for their participation in the study. I provided each participant with informed consent and disclosures for research, the demographic form, and the interview questions

for review. The informed consent and disclosures identified the study's goal, the privacy and confidentiality of the participants, and discussed that they can choose to end the study at any time without fear of repercussion. This disclosure and consent can be found in Appendix A. The demographic form will determine if the counselor meets the criteria for the study. This form can be found in Appendix B.

All demographic forms, informed consents, and disclosures are stored to maintain confidentiality. These forms are saved on my password-protected computer and a password-protected hard drive. Maintaining these in two different password-protected sources allows for the confidentiality of all participants.

Interview Data

Once the participant returned the demographic form, signed informed consent, and had the opportunity to review the interview questions, I set up a phone call to discuss the interview details and determine the time, date, and location. I scheduled the interviews for 45 to 60 minutes to provide adequate time for the disclosure, informed consent, and the interviews. Informed consent can be found in Appendix A. Before beginning the interview and research process, all participants were given a pseudonym so that their identities are protected throughout the study.

I asked all participants to be present in their office setting during the interview. By having the participants to be present in his or her office, I observed the counseling setting and any details or accommodations that the counselor may have present for the animals. Each interview was 45 to 60 minutes, was recorded via an electronic recorder, and I transcribed each interview using a confidential transcription protocol.

I used two different electronic devices to record interviews, to ensure accuracy, and also provided backup if one of the recorders failed. I transcribed all interviews once obtained. Once the interview questions were transcribed, they were stored on my password-protected computer and my password-protected hard drive. All transcriptions were stored on electronic file storage software Dropbox. All paper documents were scanned to the electronic file storage software Dropbox to ensure that the document is saved for the allotted time. All paper documentation were stored in a locked fire-safe filing cabinet at my office for five years after the study has been conducted. Once five years have passed, the documentation will be destroyed using a confidential file destruction service.

Data Analysis Plan

The goal of phenomenological data analysis was to transform participants' lived experiences into a written expression of their essence. This is done so that the effect of the text is a reflective appropriation of the meaning of the essence being studied (Ajjawi & Higgs, 2007). Patterson and Williams (2002) offered an organizing structure that I followed for data analysis. First, they identify to transcribe interviews to support engagement in the hermeneutic circle. I did this by personally transcribing all interviews. By doing so, I assisted in the immersion needed for this research. Patterson and Williams (2002) identify the need for an index system. I did this by organizing the transcribed interviews to facilitate themes and coding. I utilized computer-assisted qualitative data analysis software (CAQDAS). I then worked to understand the data by identifying first-order constructs by coding using NVivo software. Next, I participated in abstraction by

placing the second-order constructs and group these into sub-themes. Third, Patterson and Williams (2002) identify to review the data. I studied and triangulated my research by using a reflective journal and my member checks of the information. Fourth is the identifying of meaning units. The previously stated theme development did this identification. The first step in data analysis is developing thematic labels and the development of visual aids to help organize themes and support the identification of their interrelationships and create concept maps (Patterson and Williams, 2002). I did this by organizing the themes by hand to support the identification of their interrelationships and creating concept maps. Throughout the theme development, I engaged in active reflexive journaling so that triangulation can remain present. The last step is understanding the importance of writing an interpretative discussion and emphasize the importance of taking time and reflecting on each interview to review and reflect on the relevant findings (Patterson and Williams, 2002). I did this by working to illuminate and illustrate the phenomenon of ESAs through the interpretative discussion. I critiqued the themes and sought critique from my dissertation committee. Once all of these steps were completed, I reported the final interpretation of the research findings to my committee members (Ajjawi & Higgs, 2007; Van Manen, 2014). Chapter 5 will provide an interpretative discussion, including the final interpretation of the research findings.

Trustworthiness

To ensure the quality of a qualitative study, trustworthiness is implemented as a tool to assess both reliability and validity (Morrow, 2005). Four specific domains emerge within the concept of trustworthiness: credibility, transferability, dependability, and

confirmability (Ajjawi & Higgs, 2007; Morrow, 2005). Similar to internal validity, credibility explores the internal consistency of the research (Morrow, 2005). This can occur through continued exposure/engagement with the participants, participants' check-ins, reflexivity, and deep observations (Morrow, 2005). Like external validity, transferability explores the extent to which the study can be generalized (Morrow, 2005). This concept refers to whether the study's procedures could be compared to a broader population. In qualitative research, dependability is equivalent to the reliability, which focuses on the consistency through which the study (i.e., analysis, procedures, etc.) is conducted (Morrow, 2005). Finally, objectivity or confirmability surrounds the researcher objectivity or lack of objectivity, and steps to alleviate (Morrow, 2005).

Credibility

To achieve credibility, several techniques were applied. First prolonged engagement to the participants of the study will occur. I made sure that the appropriate amount of contact with the participants was provided. By having various levels of communication with the participants (email, phone calls, and semi-structured interview), more details were illuminated from the participants throughout the research process. I provided participant check-ins throughout the data analysis process. Check-ins were utilized to give the participants a copy of the transcripts from the study to determine if they have different or further responses. This member checking ensured that the participants did not have any discrepancies in the information or have any additional information. Also, after I had extracted the themes from all the interviews, I sent the information to the participants and asked participants to respond to these and add any

additional comments that they may have had (Ajjawi & Higgs, 2007; Morrow, 2005; Van Manen, 2014).

Transferability

Qualitative research is not intended to generalize the findings in a quantitative sense. But to adequately and accurately describe the themes developed within the context of the participant's lived experiences (Morse, 2015). It refers to how well the findings of this study can be found again if a researcher were to repeat this study with similar participants and contexts (Patton, 2002). To ensure transferability, I provided rich, thick descriptions and used purposeful sampling methods. The rich, thick descriptions can help to ensure that another researcher can replicate the study under similar conditions (Patton, 2002). The research process and data analysis process was highly detailed. Using purposeful sampling allows key informants for the study and provide in-depth findings (Morrow, 2005).

Dependability

Dependability is concerned with demonstrating replication and consistency of the findings (Morse, 2015). To establish dependability, I provided rich, thick descriptions, identify my researcher bias, and provide limitations and delimitations of the study. Data triangulation (interviews, reflective journaling, member checks) and audit trails (peer reviews, member checking) were utilized throughout the study. Peer review was used to assist in maintaining an objective standpoint throughout the study. I strengthened my dependability by having experienced researchers as part of my dissertation committee.

Confirmability

Qualitative researchers use confirmability to establish trustworthiness (Morse, 2015). Confirmability is centered on how well the research findings can be utilized by other researchers (Morse, 2015). To establish confirmability, I discussed my researcher biases, developed research protocols and follow them, triangulate the study, used an audit trail to include all raw data, notes, documents, and artifacts, and utilized a self-reflective journal to explore my experiences, beliefs, and thoughts throughout the study (Spence, 2017).

Ethical Procedures

When conducting research, ethical standards must be upheld to protect the study participants and the efficacy of the research. The ACA, Code of Ethics, Section G focuses distinctly on the guidelines for conducting ethical research (ACA, 2014). This section encourages counselors who conduct research to contribute to the knowledge base of the professional and promote a clearer understanding of the conditions that can lead to a healthier and most positive society (ACA, 2014). Counselors have research responsibilities, including conducting research appropriately, maintaining confidentiality, and developing different precautions to avoid participant injury. The researcher must provide all participants with the informed consent of the research, be knowledgeable of the rights of participants, the confidentiality of the information used, the commitment of the participants, and proper debriefing. The researcher must manage and maintain appropriate boundaries with the research participants. The researcher must properly and accurately report the data of the research study (ACA, 2014).

In learning about these ethical standards, I adhered to the developed guidelines to ensure adherence to ethical standards. I made sure that the confidentiality of the study participants was maintained by utilizing appropriate data storing methods and not using any identifying information in my conclusions. I developed a plan to properly educate, debrief, and provide care for participants if any issues arose throughout the research study. All data is stored in a locked fire-safe lockbox, stored in a locked fire-safe filing cabinet, and protected by passwords in a secure and encrypted location.

Each participant was invited to complete the two phases of the data collection (e.g., screening and semi-structured interview), and participants completed consent forms before being the research. Participants were allowed to review his or her interview transcriptions and make any amendments or corrections needed.

Summary

I am obligated to develop and maintain a detailed research plan. This plan allows the researcher to achieve the integrity of the study. I made sure that this research study adheres to all ethical guidelines and standards needed. In this study, I provided semi-structured interviews to counselors that allow clients to bring his or her ESA to counseling sessions. I considered and was prepared to overcome trustworthiness issues, including credibility, transferability, dependability, and conformability. In Chapter 4, I will present my findings.

Chapter 4: Results

The purpose of this hermeneutic phenomenological study was to explore LPCs' experiences with allowing clients to bring ESAs to counseling sessions, which fills a gap in research, identifies future methods of utilizing ESAs through counseling sessions, and encourages future research on ESAs. Chapter 4 presents the setting of the semi-structured interviews and the demographics of the eight participants. I will then discuss the data collection and analysis related to the research question. I will then identify the themes that were discovered from participant interviews. Next, I will discuss credibility, transferability, trustworthiness, and dependability during data collection and analysis. The chapter will then present the results before concluding with a summary.

Setting

As the researcher, I gave the option to participants to determine if they wanted to participate in the interview face-to-face, via video, or over the phone. Of the eight participants, three preferred the interviews to be conducted in their practice, two were interviewed via Zoom while at their office, one was interviewed Zoom at her home, one was interviewed face-to-face in her home, and one was interviewed face-to-face in a public location with privacy maintained.

I emailed the informed consent and demographics information sheets to all participants several days before the interview. This allowed adequate time to familiarize themselves with the study's purpose and procedures. They were also allowed to ask any questions or voice any concerns. There were no identified concerns or questions from the participants.

I encouraged all participants in the interview to choose a location that would provide them with as much privacy as possible. I asked them to reduce any distractions or disruptions that could have been present. There was only one participant who was interviewed Zoom at her home who had any distractions. This distraction was her child calling for her during the interview. But she was able to return to the interview after the distraction occurred.

Demographics

The eight participating LPCs all met the inclusion criteria of allowing their clients to bring ESAs to counseling sessions. Other criteria were to have graduated from a master's or doctoral program in counseling, be licensed as an LPC or an LPC licensing supervisor, practice in an outpatient or private practice setting, and have experience with allowing clients to bring ESAs to counseling sessions. For this study, all participants needed to be fully licensed to practice counseling; associate licensed counselors did not participate in the study. For this study, licensed counselors who have achieved their full licensure (LPC) and completed all necessary supervision needed to complete licensure and passed their National Certification Examination.

Of the participants, seven identified as White, and one identified as Black/Hispanic. Seven of the participants were female, and one was male. I was hoping to have a more diverse participant sample; however, no further data collection was needed due to saturation. The participants' counseling experiences in private practice ranged from 4 years to 40 years. The length of the participants' licenses ranged from 4 years to 39 years. The participants' ages range included 37 years to 77 years. All the

participants had at least a master's degree, one of the participants had a doctoral degree, and one participant had an educational specialist degree. All the participants were located in a southeastern state and licensed as an LPC in this state. Six of the eight participants were licensed as a licensing supervisor. All the participants had experiences with clients bringing ESAs (dogs) to counseling sessions. Two of the participants allowed other animals besides dogs to be present during counseling sessions. Eight participants had experience writing ESA letters.

Table 1

Participant Demographic Information

Participant	Age	Education Level	License	Gender	Ethnicity	Length of Practice	Length of License	Years in Private Practice
ALET	43	Masters	LPC-S	F	White	19 yrs.	9 yrs.	8 yrs.
BOLD	53	Masters	LPC-S	F	Black/Hispanic	19 yrs.	15 yrs.	4 yrs.
COXK	64	Masters	LPC-S	F	White	15 yrs.	15 yrs.	15 yrs.
HARJ	62	Doctorate	LPC-S	F	White	39 yrs.	39 yrs.	30 yrs.
HAYA	48	Masters	LPC	F	White	6 yrs.	4 yrs.	5 yrs.
HICD	37	Masters	LPC	F	White	6 yrs.	6 yrs.	6 yrs.
MALD	55	EdS	LPC-S	F	White	28 yrs.	17 yrs.	21 yrs.
YOUR	77	Masters	LPC-S	M	White	40 yrs.	39 yrs.	40 yrs.

Data Collection

To recruit participants for this study, I submitted a request to the Alabama Counseling List-Serv to post a participant flyer. I had to ask the List-Serv manager to post for this study three times in 6 months due to having a challenging time finding participants after the first publication. I did have many prospective participants who did not meet the criteria: a few were not fully licensed, some were social workers and not

counselors, and many individuals reached out and wanted to know the study results and were interested but did not have any experience with ESAs.

In the participant flyer and announcement, all participants were asked to email me if they would be interested in the study. Once initial contact was made, I sent the prospective participants a demographic questionnaire (Appendix B) and informed consent. I also had continued email correspondence with these prospective participants to answer any questions. Once they completed the questionnaire and determined that they would be a suitable candidate for the study, we set up a time and location for the interview. Before each interview began, I provided the participant with a pseudonym used throughout the study. They were informed of their pseudonym and informed confidentiality measurements of the study.

Data collection included multiple sources of evidence: demographic information questionnaire, interviews, and my reflexive journaling throughout data collection. The individuals were given a brief survey to determine if they met the criteria to participate in this study. I used a demographic information questionnaire to identify the background characteristics, demographics, licensing information, educational experience, length of practice, length of license, years in private practice, training on ESAs, type of training on ESAs, years utilizing ESAs, frequency of ESA prescriptions, theoretical orientation used in practice, and primary population of clients seen in practice.

I collected data for the study through semi-structured, open-ended interviews with eight licensed counselors, work in a private practice setting and allow their clients to bring ESAs to counseling sessions. Each participant had more than 2 years of experience

with allowing clients to bring ESAs to counseling sessions. Most participants had more than 5 years of experience being a counselor. The interviews occurred face-to-face with the counselor at their office location or via confidential teleconferencing. Interviewing the counselors in their offices allowed me to observe where the counselors practice and how a client would bring an ESA to the counseling session.

The interviews included open-ended questions, which allowed the participants to share their involvement with ESAs, experience, and observations. I asked all participants to respond to open-ended questions about their experiences with clients bringing ESAs to counseling sessions. Each question led toward the discovery of the counselor's experience with the phenomenon of ESAs. Each question asked the counselors' professional experience with animals and ESAs, firsthand experiences with animals and ESAs, education and training present for ESAs, and client presentation and experiences with clients that bring animals and ESAs to counseling sessions.

I digitally recorded each interview. In addition, I took notes during the interviews and kept a journal detailing experiences and observations. After each of the interviews, I journaled to identify my firsthand experiences and thoughts that resulted from the interview. I maintained active journaling throughout the transcription process and writing process. The interviews were uploaded to my secure computer and maintained on a password-protected drive. I stored all transcriptions of the interviews on a password-protected drive that was present on my password-protected computer.

Transcribing the data allowed me to engage myself in the data to understand the participant's experiences. After transcribing the data, I listened to the interviews to

review the transcripts for accuracy. I initially coded the data using keywords and phrases. After I completed the transcription of the interviews, participants were emailed their transcripts. They were asked to email back if there were any discrepancies in the transcripts. This allowed the participant to determine if there were any errors in the transcription. I did not receive any emails from the participants that there were discrepancies with their transcript.

Data Analysis

I followed Patterson and Williams's (2002) organization structure for data analysis. Before I began the word-by-word transcription process, I listened to each recording to determine if it was clear and concise. I did this to determine clarity and if the recording was transcribable (Patton, 2015). After I finished transcribing, I listened to the recording and read over the transcription two or more times to make sure that the transcription was accurate. I was able to become more aware of the immersion of themes that were present. I made notes regarding the themes that were emerging in all the interviews. Throughout the process, I also maintained reflexive journaling to remain focused, assist with the immersion of the themes found throughout transcription, and maintain triangulation.

After each transcription, I uploaded the transcription to NVivo to obtain the preliminary meaning units used in the following interviews. This assisted in confirming that the current nodes and create new nodes to appear in the subsequent interviews. Six initial nodes were generated in NVivo. The nodes were organized in hierarchies, which allowed the nodes to be organized and more structured.

Through this initial coding, three top-level codes were identified. Under each top-level code, other codes were identified. I then used NVivo 11, a computer-assisted qualitative data analysis software, to analyze the transcribed data. The data were coded and categorized, which allowed for the identification of themes. Through NVivo 11, interview data were combined into themes and subthemes.

The main top-level codes used to develop the three main themes were (a) experience with ESAs and animals, (b) education regarding ESAs, and (c) client presentation with ESAS or animals present in the session. Under the experience with ESAs and animal code, the two codes of professional and personal experience were identified. Under the education regarding ESAs code, the two codes formal education, training/supervision were identified. Under the client presentation with ESAs or animals, the four codes alertness, body language, communication, and rapport were identified. Of these eight codes, seven themes were developed for this study.

From the first theme of experience I was able to determine that each participant had different experiences with animals, but all were positive. In the second theme of education, I determined that each of the participants had no formal education on ESAs. Still, all completed independent research on the topic of ESAs to increase their knowledge. From the third theme of client presentation, I was able to determine that all the participants experienced clients being more present throughout the counseling sessions, more open to express themselves, and more relaxed with the presence of their ESA during the counseling session. While developing the immersion of the themes of the

participants, I was able to determine that thematic saturation occurred, and I did not need to further interview additional participants.

Evidence of Trustworthiness

Credibility

I implemented measures to maintain the credibility of the research process. I used triangulation of the data from various sources, including interviews, demographic information, and researcher reflective journaling, as triangulation requires collecting data from multiple sources (Nowell et al., 2017). I conducted member checking by emailing the participants a copy of their interview transcript, allowing them to review their statements, clarify any information, or edit the transcript. There were no amendments requested. I also maintained a journal and used reflective documentation to develop the themes of the study. Further, I maintained saturation by continuing to locate participants until no new information appeared (Patterson & Williams, 2002).

Transferability

Transferability is a component of qualitative research that assists in validity and generalizability as in quantitative research. Transferability is established by the researcher providing evidence that the study's findings could apply to other contexts, situations, times, and populations (Nowell et al., 2017). As the researcher, I established transparency by following the interview protocol to stay on course and maintain congruence between interviews. The interview protocol identified a list of open-ended questions and served as a guide to assist me in remaining focused. I allowed myself to remain flexible to add or change questions during the interview to assist in answering the

study's central research question. I utilized reflective journaling throughout the steps of the research process. I interviewed participants until saturation occurred to ensure transferability. This happened after eight interviews.

Dependability

I remained focused on answering the research question. This assisted in developing validity throughout the study. Throughout the study, I remained as objective as possible to achieve descriptive validity. I followed my research plan, accurately recorded the process, maintained detailed notes, and completed an audit trail to ensure the study's dependability.

Conformability

In qualitative research, confirmability is the researcher not allowing his or her bias to influence the study's findings (McLeod, 2011). I worked to achieve dependability and confirmability by honestly reporting the study results with as little bias as possible. I maintained appropriate documentation of the research steps and methods used throughout the study. I also kept consistent reflective journaling to reduce any bias that may have been present.

Evidence of Trustworthiness

As a qualitative researcher, I had to take all the steps necessary to ensure the validity or trustworthiness of the study (Patton, 2015). I used data triangulation and reflective journaling; this is imperative to the qualitative research process (Patterson & Williams, 2002). The triangulation increased the study's internal validity. I also used

reflective journaling to maintain focus and on the course of the study to produce the results and progression in the research.

Results

Participant ALET, a 43-year-old woman, is an LPC supervisor who has been practicing for the past 19 years, licensed for the past 9 years, and worked in private practice for 8 years. She did have some training on ESAs through counseling conferences but mostly did independent research regarding ESAs and the utilization of ESAs. She has had 5 years of experience utilizing ESAs and had clients bring ESAs to sessions 3–4 times throughout her experience. She works predominantly with clients with trauma and addiction issues and uses rational emotional behavioral therapy. She identified having majorly positive experiences with ESAs, but when the animals are untrained it can be a distraction for the counseling sessions. ALET also reported having some issues with property owners and not allowing ESAs due to the animals not having the same benefit as service animals: “I mean I get it and if they watch the news, they see the exploitation of ESAs which would make them not want them in their building. But we have worked through it.”

ALET identified the benefit of the presence of an ESA and the instant rapport between herself and clients: “That is the most rewarding part.” ALET has brought her dog to counseling sessions earlier in practice, which allowed clients to be more vulnerable, but now she just allows clients to bring their animals if they would benefit from having them in sessions. ALET also identified one of the essential principles of having an animal is unconditional positive regard, which helps with clients’ trust and

rapport. ALET stated that she sees clients be more grounded, present, and relaxed when the animal is present. She reported more eye contact, even if the eye contact is only with the animal. ALET can recognize the client's change in emotion by the behaviors that are present with the animal. She would like to see more research on this topic to give more concrete information on the intervention and utilization of intervention. She did feel that there is a liability due to the limited research on this topic, so she was eager to see more of this research and intervention in the future of the counseling field.

Participant BOLD, a 53-year-old woman, is an LPC supervisor who has been practicing counseling for the past 19 years, licensed for the past 15 years, and worked in private practice for 4 years. She denied any formal education or classes on ESAs but reported that she had completed independent research on the topic. She has had 3 years of experience utilizing ESAs in counseling sessions and had clients bring animals two times in the past 3 years. She stated that where she is currently working does not allow ESAs to come to sessions: "I wish they would understand but I have to follow their guidelines." She works predominantly with clients with mood disorders and uses cognitive behavioral therapy.

BOLD reported that she has had some good experiences with using ESAs in practice but would like to have more guidance or guidelines on this topic. She did have one client that she was not comfortable writing a letter because she did not feel that the client met the criteria for an ESA, and the animal was not appropriate for an ESA: "It was hard losing this client, but I had to follow my instincts." BOLD indicated that she feels that this was the only difficulty she has experienced with this intervention. However, she

noted that having the animal was positive in the client's progression in counseling and significantly benefited the client. She also reported having an untrained puppy, which caused distractions throughout the session. She commented that it is difficult to be upset when there is a wagging tail and how this can change the dynamic of counseling sessions.

Further, BOLD reported having animals as a child, but they were not allowed to come in the house. As an adult, she acquired her dog as a pet and reported feeling as though having her "fur baby" has changed the way she views animals. She did have some professional experience seeing animals being brought into a hospital as therapy animals and saw the benefit of this intervention with her acute clients. BOLD felt that an animal's presence allowed the client to be more relaxed, open, and present once the initial distractibility and rapport become established. She wanted to learn more about the intervention and have more resources available to use this intervention more actively in her counseling sessions.

Participant COXK is a 64-year-old woman, an LPC supervisor who has been practicing for the past 15 years, licensed for the past 15 years, and been in private practice for 15 years. She identified that she did not have any formal education on ESAs but did participate in continuing education classes for animal-assisted techniques online. She reported having 2 years of experience utilizing ESAs and had two individuals who brought their animals to counseling sessions. She predominantly practices with clients who identify as LGBTQ and uses an eclectic style of client-centered approaches. She reported having experience with allowing clients to bring dogs to counseling sessions. She felt that she had predominantly positive experiences when using this intervention. She

discussed working with a client with DID and the dog changing their persona to mirror the client's persona throughout the session: "It was great to see the dog work hand-in-hand with the personalities." COXK identified how this was an excellent resource for her when working with this client.

She has had positive firsthand experiences with animals throughout her life and currently has pets. She did recognize the negative publicity that has been occurring regarding ESAs and how this has a negative effect on the utilization of this intervention. She thinks that the main challenge with allowing ESAs is the backlash from property owners of her practice location and by feeling pressured by clients to write letters. But she thought that there have been some changes with utilizing this intervention and feels that this intervention is starting to be used more appropriately due to the changes. She identified that clients are more alert, focused, and attentive when ESAs are present throughout sessions. Her positive firsthand experiences with animals throughout her life assisted with being more open using this intervention in her practice. She wanted to learn more about ESAs and this intervention to use more in her practice in the future.

Participant HARJ, a 62-year-old-woman, is an LPC supervisor who has been practicing for the past 39 years, licensed for the past 39 years, and been in private practice for 30 years. She is the one participant that has received her doctoral degree. She denied any formal training or education on the intervention of ESAs. She did report having some independent research and past student papers that have been written regarding this topic. She has been utilizing ESAs for 5 years and reports that she has never prescribed an ESA but reports that she does write letters for clients. She was uneducated

that her writing the letters for her clients are her prescription for the presence of an ESA. She also did not know that ESAs do not have the same benefit as service animals and was under the impression an ESA could accompany the client to all public locations. “Its hard to know what to do when there isn’t research and we just kind of go with the flow.”

HARJ predominantly works with adults with histories of trauma, depression, anxiety, relationship difficulties, and other issues. She utilizes integrative, trauma-informed, narrative, constructivist developmental, and systems-oriented approaches to counseling. She reported that she had good experiences using ESAs, and all of the animals have been dogs. She has been present in educational workshops throughout her university on ESAs and recognized by disability support services. She does report having 3 active clients that currently bring their dogs to session. She has been utilizing ESAs for the past 10 years. She states that she gives all of her clients the invitation to bring their animals if they would like and feels that doing this allows them to be more open to utilizing ESAs. She reported pressure from one of her clients to write her a letter for an ESA on a plane and did not feel comfortable writing this letter.

HARJ is aware that the pressure with limited resources puts her in a difficult place at times. She discussed having experience with all types of animals as a child and currently having a pet. She reports that she had positive experiences with animals throughout life and could see if she had not positive experiences she may not have been comfortable allowing animals to be present in the session. She also feels that clients are more open, alert, less anxious, and relaxed in the presence of their animals. She thinks that she would like to know more about ESAs and feels that having a concrete definition

of an ESA could benefit the counseling profession. “I would like to learn more so that I can use this more accurately in the future.”

Participant HAYA, a 48 year-old-woman, is an LPC that has been practicing for the past 6 years, has been licensed for the past 4 years, and has been in private practice for the past 5 years. She denied any formal training on animal-assisted techniques or ESAs. She reports that throughout her internship, she observed a counselor bring her pet to the residential facility, and she saw the benefit of having an animal present throughout sessions. She has been utilizing ESAs for the past three years. She reports that she has prescribed 5-10 ESAs in the past three years. She predominantly works with women and couples. Her counseling approaches include cognitive behavioral therapy and solution-focused techniques. She discussed that she had had good and bad experiences with ESAs.

HAYA identified her guideline that she has to see her client for 6 sessions with their animal before writing an ESA letter. She feels that doing this allows her to see the dynamics between the client and the animal and verifying it is an appropriate prescription. “I need to see the dog, you know, I cant do it without seeing if it really helps.” She reports that there was an animal in the past that was muzzled during the sessions. This caused her not to feel comfortable writing the client an ESA letter. She thinks that this was hard for her to do but feels that she made an accurate professional opinion. “The dog wasn’t trained, how can it be an ESA if it is not behaved.” She believes that having the animal present allows the client to be more present and less anxious to assist in the progression of the counseling sessions. She reports only having dogs utilized throughout the sessions. She also feels that she enjoys seeing the clients

open up and gain rapport with her due to the presence of the ESA. She has had positive firsthand experiences with animals throughout her life and feels that she is more open to using animals throughout her counseling practice due to her positive experiences. She would like to know more about ESAs to help her become more knowledgeable about this intervention and provide further resources.

Participant HICD is a 37-year-old woman, an LPC who has been practicing for the past 6 years, been licensed for the past 6 years, and been in private practice for 6 years. She denied having any formal training in animal-assisted and ESAs but did complete independent research on this topic. She reports that she has utilized ESAs for the past 6 years and does prescribe letters 3-4 times a year. She predominantly works with adolescents and adults. Her primary counseling approach is cognitive behavioral therapy. She reports that she had good experiences with utilizing ESAs throughout the years. She had had experience with working with both dogs and also reptiles. "There are all kinds of animals in the office." She identified that she had had animals throughout her life, and at one point in time, she had 17 animals total. She does feel that since her past experiences with animals throughout life were positive, it has given her more openness to use this intervention in practice. "It helps when you are comfortable."

HICD does feel that there have been changes since she used them and thinks that the negative publicity has harmed the utilization of this intervention. She feels that having an ESA present adds an entirely different dynamic to the session and increases rapport with the client and counselor. She also thinks that it helps with the reduction of anxiety. HICD reports that there have been some challenges with kids due to being distracted by

the animal but feels more effective than a distraction. She also thinks that the client is more relaxed, present, and comfortable when the animal is present. She does believe that the intervention needs more research and training. HICD commented that she feels that having more training would be highly effective. She stated that maybe having training would help her learn how to use this intervention effectively. She used the example of having detailed training as play-therapists are trained.

Participant MALD, a 55-year-old-woman, is an LPC that has been practicing for the past 19 years, has been licensed for the past 17 years, and has been in private practice for the past 20 years. She is the one participant that has her Educational Specialist degree. She reports that she did have some formal training with AAT (equine therapy) but not for ESAs. She has been utilizing ESAs in her practice for the past 4 years. She reports that she has written 2 letters for ESA prescriptions but is highly selective about who she approves and completes letters. She noted that she does not like having her name on things that are not accurate. She stressed that she is cautious about the documentation that she completes. “I want it to be right if I put my name on it.”

MALD predominantly works with sexual offenders and clients with other problematic behavioral disorders. She uses behavioral conditioning as her counseling approach. She reports that ESAs have had negative publicity. There are also many “fly-by-night” agencies trying to gain money for writing ESA letters, so she is sure that she completes this intervention accurately. “I want to make sure that I am following the guidelines and doing things correctly.” MALD reports that she leads a group at a local college with males and one of her participants has an ESA, which was such a positive

intervention for him and was a great asset to the group. She reports having past experiences with animals and feels that this has assisted her in becoming more open with allowing animals to be present in sessions.

MALD has been using ESAs for the past 18 months and feels that she has learned more about this to be knowledgeable and use this intervention accurately. She also thinks that the animal's presence can allow clients to be open, alert, and more relaxed. "It helps my groups when the dog is there. It's interesting to see how things change." She did report that she has felt pressured by some clients but is firm on accurate letter writing. MALD discussed the importance of having boundaries with her clients. She thinks that more research is needed to be more concrete guidelines on the utilization of this intervention and writing ESA letters.

Participant YOUR, a 77-year-old-man, is an LPC supervisor that has been practicing counseling for the past 40 years, been licensed the past 39 years, and been in private practice the past 40 years. He denied having any formal training or education on AAT or ESAs. He reports that when he first started using ESAs, it was due to an intuitive feeling and feels that his past experiences with animals allowed him to be open to having animals present. He remarked that he "feels sorry for people" that don't have a dog. He has had dogs "all my life and doesn't know what it would be like without a dog."

YOUR does report that he has been utilizing ESAs for the past 40 years. He has had experience with dogs and allows one of his clients to bring a bird to the counseling session. He states that he prescribes ESAs monthly. He predominately works with adult males and utilizes family therapy techniques. YOUR discussed that he has had majorly

positive experiences with ESAs, but it can be a distraction when the animal is not trained. He discussed that he did have one client that reported his anxiety by pointing out the anxiety of his animal that gave him more insight into his feelings. He feels that the client is more relaxed, open, alert, and comfortable when an animal is present.

YOUR recognizes that he had positive experiences with dogs throughout his life, so he knows the benefit of having an animal present in the counseling session. He discussed having a couple that had conflict over a bird and bringing the bird to the session allowed the couple to progress through their disputes and decided to divorce. YOUR teaches a local community college and discussed that he incorporates animals into his classes to assist in teaching introduction to psychology courses. “It’s interesting to see what students say about their animals.” He does not feel he needs to learn more about ESAs but feels that having more research could benefit the counseling profession.

Overview of Themes

The central research question, “What are the lived experiences of counselors who allow for the presence of the client’s ESA during counseling sessions?” This question explored the participant’s experience with the central phenomenon. The 3 main codes of Experience, Education/Training, and Client Presentation expanded into 7 themes. The experience code expanded to professional experience of all participants to have experience with dogs attending counseling sessions and all of the participants having positive past experiences with animals which allowed increased professional confidence. The Education/Training code experiences to the lack of formal education and training of participants and the desire for more training and research. The Client Presentation code

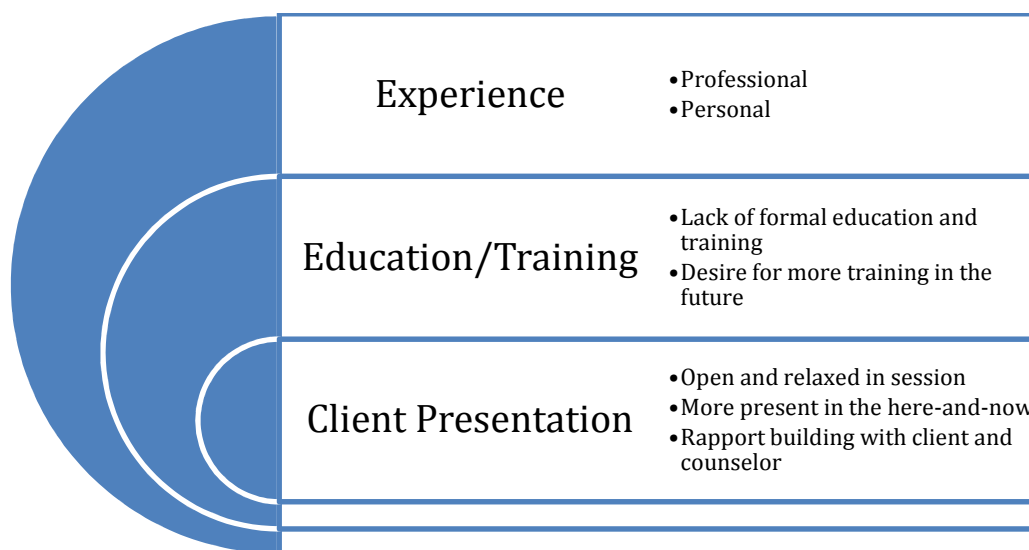
expanded to the client being more open and relaxed with the presence of an ESA, the client being more present in the here and now while the ESA was in session, and rapport building between the therapist and client due to the ESA.

In review, the 7 themes which emerged from the semi-structured interviews are:

(a) experience with allowing dogs to be brought into counseling sessions, (b) past positive experience with animals which allowed an increase of professional confidence, (c) lack of formal education or training on ESAs, (d) desire for more training and resources, (e) client more open and relaxed with presence of ESA, (f) client more present in the here and now with the presence of the ESA, and (g) rapport building resource between therapist and client. Figure 1 presents the emergent themes from the three main codes.

Figure 1

Emergent Themes and Three Main Codes



Theme 1: Experience with Allowing Dogs to be Brought into Counseling Sessions

During the interviews, the 8 participants discussed that they had experience with dogs being present in counseling sessions. 2 of the 8 participants allowed their animals to be present throughout the sessions. 2 of the participants also had experiences of bringing other animals (reptiles and a bird.).

Participant YOUR identified that he had a couple being seen due to discord in their marriage and had some conflict surrounding the bird. The bird was brought into session, and the husband was able to see how his wife treated the bird, and she admitted to having past negative behaviors towards the bird. Through counseling, the couple later ended the marriage due to the discord due to the bird. Participant YOUR stated that the husband had to see his wife in action with negative treatment of the bird. The husband experiencing this in counseling allowed him to gain the opportunity to achieve this experience. Participant YOUR also stated that he asks his clients during intake if they would like to bring their dogs to the session.

Participant HAYA discussed that she would not write an ESA letter unless she sees the client with his or her animal for 6 sessions. She stated that if she completes the sessions and feels that an ESA letter is appropriate, she will write the letter. She stated,

I only allow dogs that are better behaved. If I find out the dog is not working during session it would not work as an ESA. If you have to bring your dog in a muzzle it may not be an ESA. Even if the client doesn't want the letter, they can still bring the animal to session. It can give them a sense of relief. It helps when the client feels good about coming to counseling.

She said that she had a few negative experiences with animals because of their behaviors and would not have seen this unless the client brought the animal to the session. She noted that having to bring a dog with a muzzle to counseling indicates that the animal may not be an appropriate ESA.

Participant MALD discussed that she leads groups at a local college, and she allowed for one of her group participants to bring his ESA to the counseling session. She stated,

Having the dog there is like an instant relief. It is not like medication that takes time to kick in. It is great to see these tough guys in the group that are athletes with a puppy. It is like they change and they melt. You can see a whole other side of them with the presence of the animal. It does not only help the owner of the dog but the group as a whole.

She stated that the dog not only had a positive impact on the client, but the animal also had a positive impact on the group overall.

Theme 2: Positive Personal Experience with Animals to Increase Professional Competence

All participants discussed that they had positive experiences with animals throughout his or her life. All of the participants reported having a personal animal as a child* or currently. Participant YOUR stated that he thought all individuals needed a dog and “feels sorry for people that do not own a dog.” He remarked that you could also determine a lot from a person by the names chosen for their animal.

All of the participants noted that they had had firsthand personal experiences with animals, and the majority stated that they currently have personal pets. They reported that past experiences did not raise any concern for allowing clients to bring ESAs to counseling sessions. Having these past experiences has increased professional confidence in using this intervention. Participant HARJ stated that she feels that if she would not have had positive firsthand experiences with animals, she may have been more reluctant to allow animals to be present throughout counseling. She stated,

From very early childhood we had chickens, pigs, dogs, and the next door neighbor had horses. But I have always had at least one dog. My son recently adopted his first pet and I love it. I guess if I didn't like animals or didn't have good experiences with them, I may not be as open to allow them to come to my office. I may not be as friendly and affirming to this.

Participant BOLD discussed that when she was a child, animals were not allowed to come into the house, but she received her "fur baby as an adult." She stated,

6 years ago, when I got my "fur baby" I started to think that there may be something to this. It is different when the dogs can not come in the house but when it is an animal of your own things are different. Things changed once I experienced this.

Participant HICD discussed that she had animals throughout her entire life and at one point in time had numerous animals and types of animals in her home. She reported that having this experience with animals allowed her to open up more to this intervention in her practice. Participant HAYA discussed that throughout her life, she had animals.

The introduction of the use of therapy animals occurred during her internship. This experience opened her eyes to using this intervention in practice.

Theme 3: Lacking Formal Education or Training

The participants all denied any formal education on ESAs and AAT. The majority of participants stated that they had to complete individual research on ESAs, utilize ESAs, and the guidelines needed to completed ESA letters. Of the participants, only one said that she attended continuing education unit (CEU) classes regarding ESA utilization. 2 of the participants had experience with equine therapy or therapy animals. One participant, HAYA, stated that she did have a mentor at her internship site that brought her animal to the residential center. She stated,

Seeing how the presence of the animal changed the dynamic of the group. It just provided so much joy in the room to have the dog there. The dog would interact with the kids and be like a mentor to them. I thought wow that would be fun to have a dog. You know, in my office. I then thought of getting another dog because my dog, at the time wouldn't be a good emotional support but why not get another dog for this.

When asked about the utilization of ESAs, participant YOUR stated that "It was an intuitive thing" regarding the decision to allow clients to bring ESAs to counseling sessions. He said that he asks all of the clients if they would like to bring their animals to the session since he started asking. Participant MALD reported,

I wanted to make sure that I was doing it correctly. I don't want my name on a letter done incorrectly. I had to research because if I put my name on something it

means that it is done correctly. It would be nice to know how to complete this and have guidelines on letter writing.

She identified that this was why she started to complete independent research on ESAs and how to write ESA letters. She reports having some experience working with youth and equine therapy and animals and Special Olympics. Participant HARJ stated that she did participate in some meetings with her university regarding allowing students to bring animals to class. She was educated on utilizing this resource via the disability support services guidelines offered at her current university.

Theme 4: More Training and Resources

Most of the participants stated that they would like to gain more training and resources on the utilization of ESAs. Only one of the participants said that he did not want to gain more training. There needs to be a universal definition of ESAs and their utilization to be a more precise determination of this intervention.

Participant HARJ identified “it would help to have a definition” when asked if there was anything else she would like to report about ESAs. She did have some discrepancies in the use of ESAs and how she utilizes ESAs. She stated,

I haven’t had any training, but the school did talk about how faculty can use this resource with students. When you see things on the news and there are peacocks on airlines it is hard to determine ways that ESAs are used. It can be confusing. She noted that she thought an ESA could be present in all public locations if an individual has a prescription for the intervention. This assumption is inaccurate as ESAs do not have the same benefits as service animals.

Participant MALD stated that she would like to determine a more concrete guideline for using ESAs and writing ESA letters. She reports that she had completed independent research, but not all of the study she found was congruent. She was open to learning more about how to write letters because she feels that her reputation is at stake if she “puts her name on a document.”

Participant HICD stated that this intervention is in its “infancy stage,” and it would be beneficial to have trained as play therapists receive to determine the utilization of this intervention. She stated,

Right now, there are a lot of animals in the office. It can help to have more training on how to use them and how they would help clients. Some people can use them while others get distracted. When working with children, it can be hard to keep their attention, but an animal can help or hurt this.

Participant HAYA identified that she did see therapy animals in action throughout her internship, which allowed her to be more exposed to animals in practice. There were differing ideas regarding AAT and the beginning of these interventions.

Theme 5: Client More Open and Relaxed

All participants identified that the client was more open and relaxed when the ESA was present throughout the counseling session. They were able to determine that due to the animal’s presence, there was a sense of peace that was present with the clients. Only 3 identified that the animal could be a distraction at times, but this was when the animal was not trained and did not handle themselves well in public settings. Since ESAs do not require training, it can be hard to alleviate this hurdle.

Participant BOLD stated, “It is hard to be upset when there is a wagging tail around you” when she remarked on the client’s presentation in the presence of an ESA. Participant COXK discussed a personal experience with a client with DID and how the animal would behave when the client would change personas. She identified,

It was great seeing how the dog would change with the personalities. The dog was protective when she was younger and would change when she entered a different dimension. This really helped the sessions and also allowed the client to be more open to the changes that were occurring within herself.

Participant YOUR reported that he had a client who discussed his anxiety by pointing out the anxiety of his dog during the session, which modeled his presentation and reactions to anxiety. Participant MALD discussed her group with college-level males and how one of the member’s ESAs could assist the group in opening up more and being more vulnerable in their communication.

At times, ESAs can be a distraction. Participant ALET discussed that if the animal is not trained, it can be a distraction. She stated,

It’s hard when the dog is all over the place. The client can’t stay focused because they are so worried about what the dog is going to do. Is the dog going to go to the bathroom? Will the dog mess up things in the office? So, it is important that the dogs are trained so that it can help things not hurt things during counseling.

She reported that this only happened once or twice with untrained animals. Participant HAYA said that she experienced some issues when a client brought a dog that had to

wear a muzzle. She immediately determined that the animal was not a benefit to the counseling session or as an ESA.

Theme 6: Client More Present in the Here and Now

All participants stated that the client was more present, attentive, and alert throughout counseling sessions with the presence of an ESA. The client had to be present because they had to be vigilant due to taking care of their animal and being present. When the client got anxious or nervous, you could determine this through the petting or grooming of their animal.

Participant COXK discussed that working with the DID client, the animal took on the persona that the client was presenting, and this allowed her to be more present in her current state throughout counseling sessions.

I was able to show the client how the dog was changing to assist her in identifying the changes that were going on with her personality. This assisted the sessions to progress. It was interesting to see how she and the dog were so in sync.

Participant MALD stated that the ESA's presence benefited the client and the group that the client attended because the clients were present to the animal and the animal being an active member of the group.

It is great seeing these big guys in the presence of a puppy, things changed. It was very different from the way that they are on a daily basis. The whole demeanor changed in the person and also in the group. It is great seeing them want to take care of the animal and even take them outside to go to the bathroom.

Participant ALET discussed that the animal's presence allowed the client to be grounded and not too overwhelmed with feelings that were present throughout the counseling session. Participant HICD identified the client's presence and how they respond to the animal reflected their emotions and what is going on with them throughout the counseling session.

Theme 7: Rapport Building Between Therapist and Client

All participants noted that when the animal was present, the client appeared to be more relaxed, had a better sense of security, and was more open to being vulnerable throughout the session. When a client felt that the animal trusted the therapist, it was a sign that the client could state to believe the therapist and work on opening up and being more trusting. There was an instant rapport building when the animal was present, and it did not take as long as it would in a traditional counseling relationship. Participant YOUR stated,

When an animal would have a good rapport with him, it would allow the client to be more open and communicative. It helps when you ask about the animal before the session and show interest.

Participant BOLD stated,

Once the animal sniffed me and there was a connection the sessions were more relaxed. It is the beginning that is hard but once the animal likes me the client starts to feel more relaxed.

Participant MALD identified that it is different than medication that takes time to get in your system and it is an instant change in the dynamic of the groups that she leads at a

local college. Participant ALET stated that when the animal was behaved and appropriate, it would allow the client to be more engaged and open to communicating and discussing feelings throughout the session. Participant HAYA stated that when the animal would show interest in her during counseling sessions, it would allow the client to want to show interest.

General Narrative

The purpose of this hermeneutic phenomenological study was to explore LPCs' experiences of allowing clients to bring ESAs to counseling sessions. During the data collection phase of this study, I attempted to keep the central research question: "What are the lived experiences of counselors who allow for the presence of the client's ESA during counseling sessions?" to guide the process. I decided that hermeneutic phenomenology was the most appropriate approach to answer this research question.

Hermeneutic phenomenology was developed to determine individuals view the world through different lenses and interpretations, which could provide different and unique meanings (Heidegger, 2009). Heidegger (2009) identified that understanding the individual's perspective and interpretations would assist one in being able to explore the phenomenon more. The researcher must consider their understanding of the phenomenon before they can interpret the phenomenon, including a researcher reflecting on individual experiences, assumptions, and predictions while using the hermeneutic circle to review, identify patterns, and develop new ways to view the phenomenon as a whole (Gadamer, 2008). As the researcher in this study, I had to consider the participant's views as essential and become more knowledgeable about the phenomenon myself. I have had

firsthand experiences with animals throughout my childhood, both positive and negative. I am aware of the bond that can be present between a person and their animal, which allowed me to know about the phenomenon while being mindful of my bias.

I located 8 LPCs working in private practice, and that allowed clients to bring ESAs to counseling sessions as the participants of my study. I started the recruitment by utilizing the Alabama Counseling Association's ListServ and also by word of mouth. I did have some difficulty locating the participants as COVID-19 occurred throughout the latter portion of the study.

All participants received the option to complete the study face-to-face or via video (Zoom). 5 of the participants opted to face-to-face, 3 were in their offices, 1 was in her home, and the other was in a public location with privacy maintained. The other 3 completed their interviews via Zoom. One was due to the participant's location being more than 2 hours from myself, and the other 2 occurred during the quarantine.

The participants all had experience with allowing dogs to be present during counseling sessions. One of the participants did allow clients to bring reptiles, and one allowed a client to bring a bird to the counseling session. They all have firsthand experiences with animals throughout their life and feel that this positive experience allowed them to be more confident utilizing this intervention. One stated that she is unsure if she did not have such positive experiences if would allow clients to bring ESAs to counseling sessions.

Each of the participants stated that they did not have any formal education on ESAs or AAT. One participant said that she attended CEU classes for ESAs. The

majority of the participants stated that they conducted independent research to become more knowledgeable about the topic. All but one of the participants indicated that they wanted to learn more about ESAs and participate in education on this intervention.

All of the participants noted the changes in client presentation with an ESA and indicated that the client was more open, alert, and present throughout sessions. Only 2 stated that they could be a distraction with an untrained animal. When the animal had rapport with the therapist, the client was more open to having rapport with the therapist.

Counselors who allow clients to bring ESAs to counseling sessions are exceedingly rare and difficult to locate. I had some difficulty finding participants for this study. Not all participants met the criteria of being an LPC, working in private practice, and allowing clients to bring ESAs to counseling sessions. Counselors who utilize this intervention have personal experience with animals, and most have current animals or pets themselves. They did note that there was no formal education and training on this intervention but stated that they had completed independent research on this subject.

Creative counseling techniques assist in the growth and advancement of the counseling profession (Gladding, 2008). Many counselors are looking for more interventions and resources to help with the advancement of their counseling repertoire. Animal-assisted counseling techniques have had limited research, and there are different guidelines for using these techniques and interventions. ESAs have not been researched, and many counselors utilize this research due to their own positive experiences with animals and independent research that they have completed. The 8 participants of this study noted that they see the benefit of allowing clients to bring their ESAs to counseling

sessions and how this intervention can benefit the client in moving forward. There has been some negative publicity with this intervention which has hindered many from utilizing this intervention. Further research, concrete guidelines, and definitions would be highly beneficial to the utilization of this intervention.

Summary

In this study, hermeneutic phenomenology was used to explore the participants' experiences in allowing clients to bring ESAS to counseling sessions. I allowed the participants to tell their experiences using this intervention, firsthand experiences with animals, and professional experiences regarding this intervention. I applied the hermeneutic circle to integrate parts of each of the participants' experiences to the whole phenomenon of ESAs. The hermeneutic circle allowed a back-and-forth process in which I looked at the parts of the utilization of ESAs to understand the whole phenomenon of ESAs (Smith et al., 2009). The circle allowed me to gain a deeper understanding of the phenomenon of ESAs.

The hermeneutic circle allowed me to illustrate the experiences of each participant and how these relate to the whole phenomenon of ESAs. During the interviews, I understood the participants' firsthand experiences and how these apply to the whole phenomenon of ESA utilization. I was unfamiliar with the utilization of ESAs in counseling sessions, which piqued my interest in learning more about current counselors that utilize this intervention. There was limited research conducted on the utilization of ESAs during counseling sessions. I attempted to understand the experiences of licensed counselors that currently use this intervention in their practice. As a student

conducting the research, I had some but limited knowledge about the ESA phenomenon. When I became immersed in the data to analyze the counselor's stories, my understanding of the phenomenon advanced and was amended. Through this research, I understood how the counselors experience ESAs in practice, the lack of research about ESAs and their utilization, and the need for further research on this topic.

In Chapter 4, I discussed locating the participants of the study and selecting 8 LPCs that allow clients to bring ESAs to counseling sessions. I provided descriptions of the participants, including their narratives, backgrounds, and demographics. I explained how I collected data. I transcribed the recorded interviews and analyzed the data using hermeneutic phenomenological guidelines. I documented the steps used to collect and analyze data, indicate the themes that emerged, and used the themes to answer this study's research question.

In Chapter 5, I will explain the results as they apply to the research question: "What are the lived experiences of counselors who allow for the presence of the client's ESA during counseling sessions?" I will identify if there is any correlation to existing research. Chapter 5 presents the limitations noted during data collection and analysis. A discussion of the 7 themes will be discussed. I will also address the experiences of licensed counselors and their utilization of ESAs.

The concluding chapter will include the findings from the study and how these can be applied to the counseling profession. I will discuss how the utilization of this intervention can be beneficial to the counseling process. I will also provide recommendations for future research to elaborate on the findings of this study. I will

conclude this chapter with my reflections and what was learned from completing this study.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this hermeneutic phenomenological study was to explore the lived experiences of counselors whose clients bring ESAs to counseling sessions. Exploring these experiences allowed me to identify the limited information present regarding ESAs, how the presence of ESAs can change the dynamic of the counseling sessions, and different firsthand experiences that counselors had regarding the utilization of this technique. There is limited research on ESAs in counseling sessions, so this study can be a beginning for future research on this topic. Understanding the lived experiences of LPCs could help present and future counselors by providing a deeper understanding of LPCs' experiences allowing clients to bring ESAs to counseling sessions.

In Chapter 5, I will present a discussion of the study's results related to the three main codes---experiences, education/training, and client presentation---and the seven emergent themes: (a) each participant had experiences with allowing dogs to be brought into counseling sessions, (b) past positive experiences with animals which increased professional confidence, (c) lack of formal education or training on ESAs, (d) desire for future training and resources on the topic, (e) client more open and relaxed with the presence of the ESA, (f) client more present in the here and now with the presence of the ESA, and (g) rapport building between counselor and client due to the presence of the ESA. This chapter also includes the implications for future research after a discussion of the study's limitations. The implications and recommendations highlight implications for future positive social change. A conclusion will then follow.

Interpretation of the Findings

Dialogue with Literature

The participating counselors identified benefits of utilizing ESAs as an intervention in counseling, challenges of limited research, differing resources, and limited resources of the ESA intervention. AAT techniques are a topic that is just recently included in the counseling practice. In 2014, the ACA started an interest network involving human–animal interactions. The competencies for this interest network were developed in 2016. They are currently working to become a division of the ACA. This network promotes the professionalization of AAIIs to enhance the welfare of animals, counselors, and clients involved (ACA, 2019). This network allows counselors to network with other counselors that utilize AAIIs throughout the country.

Despite the growing recognition of AAIIs, ESAs have been minimally researched, so there is limited research on the guidelines of ESAs, the definition of an ESA, and the utilization of this intervention. A challenge in conducting this study was the lack of a clear definition of ESAs. The ADA does not recognize ESAs as service animals because they have undergone specific training to perform a task for a person with a disability. Since they do not qualify as service animals, ESAs are not given the same access as benefits and do not qualify under Title II and Title III of the ADA (Brennan & Nguyen, 2014). This hinders clarity of the definitions of ESAs and utilization of this intervention. In the following discussion, I will identify the findings reported and interpreted in Chapter 4 and correlate this with the literature presented in Chapter 2.

All participants identified having experience with allowing clients to bring their ESAs (dogs) to counseling sessions. One of the participants allowed reptiles as well as dogs. Another participant indicated that he allowed dogs, but he also allowed a couple to bring their bird to a counseling session. This finding is contrary to a previous finding that only trained dogs or miniature horses can be used in AAIs and AAAs (Chandler, 2012; Selby & Smith; 2013; Stewart et al., 2016; Tania et al., 2016).

The participants all did not have a precise determination of what animal would be considered an ESA. Based on the research, ESAs are companion animals prescribed by medical doctors or mental health professionals to assist individuals who suffer from a mental health disorder that disables or hinders them in one or more activities in their daily lives (Chandler, 2010; Parenti et al., 2013; Pet Partners, 2018). But since there is no concrete determination of what kind of animal is considered a companion animal, this increases confusion and what animals can be used as ESAs. ADA only recognizes trained dogs or miniature horses as service animals (Brennan & Ngyuen, 2014). Participants were all more comfortable using dogs and allowing dogs to be present during counseling sessions.

The participants also discussed having positive firsthand experiences with animals in the past that allowed them to have professional confidence in this intervention. The participants of this study are familiar with animals, the benefits of animals, and the unconditional positive regard for animals, which allowed them to utilize this intervention and maintain appropriate ethical standards. The participants all reported that they completed independent research on this topic to learn more about this intervention. There

were differing definitions, guidelines, and utilization of this intervention, which did cause some confusion. This is of concern because the ACA Code of Ethics (2014) stated that a counselor should not practice out of their scope of practice; therefore, participants may not meet this standard without clear guidelines for allowing ESAs in counseling sessions.

The participants reported the positive benefits of utilizing ESAs throughout the counseling sessions, including clients being more open, alert, and present, and assisting in the rapport building between the counselor and client. The participants reported that the presence of an ESA could alleviate stress and anxiety for the client, allow them to relax and open up more throughout sessions, and be more present in the counseling sessions, which correlates to previous research on interventions like equine therapy (Bizub et al., 2003). Even without formal education and training, the participants utilized ESAs to help current clients in their practice. This finding is aligned with previous research indicating that many have formed a skewed viewpoint about this intervention and falsely assume that this intervention follows the same protocol as other AAIs (Wisch, 2015). Throughout this study, participants identified how having the client's animal present served as a rapport builder between the counselor and client, which assisted in enhancing a therapeutic relationship. Animals are collaborative partners to mental health professionals by providing friendly, non-judgmental, compassionate, and stimulating emotional bridge to the therapeutic relationship (Chandler et al., 2010).

In previous research, researchers have also connected AAT to elevated self-esteem, satisfaction, coping skills, sleep hygiene, friendship, support, and unconditional love (Bizub et al., 2003; Chandler et al., 2010; Marcus et al., 2013). The participants of

this study noted that clients could utilize this intervention to assist with alleviating anxiety and other disabling mental health conditions that hindered their participation in daily activities. When an individual alleviates hindering mental health conditions, it can increase their quality of life. This alleviation can decrease many presenting issues, which brings clients to seek mental health services. This alleviation correlates with Chandler's (2012) research, indicating that an individual's quality of life may be increased by utilizing AAAs.

In following the ethical standards of an LPC, counselors must participate in CEUs on an annual or bi-annual basis to maintain licensure. All of the participants in this study report that they would like further education on ESAs, how to utilize this intervention, instructions on writing ESA letters, and more details regarding this topic. There is limited or scant research on this topic which hinders counselors from participating in CEUs on this topic. There needs to be further research on AAAs, AAs, and ESAs due to the infancy of some of these interventions.

Animal inclusion in the therapeutic process has been used for many centuries and dates back to ancient Egyptians and Greeks (Society for Companion Animal Studies, 2010). However, there is limited research on how animals can affect the counseling relationship. Participants of this study noted that due to the limited research on this topic, agencies are looking to achieve financial gain for inappropriately writing ESA letters. Past media reports reported that individuals were identifying peacocks as ESAs and attempting to fly with this alleged ESA. Many still experience negative viewpoints of

counseling and utilizing this research, so having negative publicity can hinder individuals attempting to reach out for mental health conditions or mental health assistance.

Fine (2010) identified the need to educate counselors and counselor educators on this topic so that there are more scholars of this intervention. I conducted the interviews to illuminate the phenomenon of ESAs and how LPCs currently use this in private practice. All 8 participants reported no formal education or training; 2 identified that they had participated in some CEUs, 2 had seen colleagues utilize animals in the hospital. Residential settings and all reported having to conduct independent research on this topic. This correlates with the need for research on this topic and how using ESAs can be utilized throughout the counseling process. The participants noted that having more specific training on ESAs can assist them in being better prepared for using this intervention with clients in the future.

Theoretical Framework

I used a hermeneutic phenomenological framework to explore the experiences of LPCs who allowed their clients to bring ESAs to counseling sessions. Using this framework allowed me to uncover meaning through interpretation and pay attention to the relationships and interactions between the researcher and the participants. With phenomenology, I explored the viewpoints of each of the participants to maintain the authenticity of the study. Using the hermeneutic circle, I attempted to understand an individual's perspective and develop interpretations to understand and explore the phenomenon of ESAs (Heidegger, 2009). As I became immersed in the research, I was able to see how the counselors' experiences affected their relationship with this

phenomenon. Participant HAYA identified that she does not feel that she would have been as open to allowing clients to bring animals to counseling sessions if she would have had a negative experience with animals throughout her life. Participant YOUR identified that he has had a dog throughout his entire life and “feels sorry” for individuals that do not have a dog. They both had positive experiences with animals, allowing them to be more open to utilizing ESAs and having clients bring ESAs to counseling sessions.

Using the hermeneutic circle enabled me to identify the themes and patterns among the participants to answer the research question, reflect on my experiences, personal viewpoints and beliefs, and identify a new way to look at the phenomenon of ESAs (Gadamer, 2008). As I immersed myself in the data, I began to understand that more education and training on ESAs could reduce the negative viewpoints of this phenomenon, allow the phenomenon to be utilized more effectively, and increase knowledge of ESAs and the benefit of utilizing this intervention. The participants allowed clients to bring ESAs to counseling sessions, but there were differing ideas of what an ESA was, how they were used, and how to write an ESA letter.

Each of the participants had different reasoning for using ESAs, but all reported that allowing ESAs to be present in the sessions enhanced the counseling progression. Participants were aware of the diverse ways that ESAs were used, but no one could define an ESA. All of the participants stated having one or two individuals or animals distracting or did not effectively benefit the counseling session. In addition, participants identified that when the animal behaved and the client was trusting, the benefits of this intervention were highly effective. There is limited or scant research on the phenomenon

of ESAs, so this caused skewed viewpoints and feelings. The participants would like to learn more about the phenomenon and feel that this research would be effective in the counseling field and further advancement.

Limitations of the Study

As discussed in Chapter 1, the study's limitations included the representation of the sample. I only recruited participants who lived in a southeastern state, was an LPC in this state, worked in private practice, and allowed clients to bring their ESAs to counseling sessions. Due to the geographical location during the recruitment process, the findings may not be generalized to the country's entire population. I wanted to locate a diverse sample; however, 7 of the 8 participants were White, and 7 of the 8 participants were female, which may not have provided a representative sample of the counselors utilizing this intervention.

Another limitation is that counselors may be influenced by external factors that occurred outside of the interview meeting. I was aware that the participants might not be open to identifying negative experiences of the intervention if they felt it was a meaningful intervention. However, all participants identified both positive and negative experiences with allowing clients to bring their ESAs to counseling sessions.

Another limitation is that I was conducting an interview using open-ended questions, and the perceptions of the participants may differ. Open-ended questions can be leading or too vague (Allen, 2017). Throughout this study, all the questions were developed not to be leading questions and allowing the participant to provide their own

experience. However, each of the participants did complete the interview appropriately, and there were not differing responses.

Limitations that occur in all phenomenological designs include the subjective nature of the data. Data collection is specific to the participants' lived experiences and how they determine the use of the phenomenon (Smith et al., 2009). I only focused on the participants' experiences and their perceptions to maintain the validity of the findings in the absence of numerical data and objectivity present in quantitative research.

Implications and Recommendations

Positive Social Change

The study has implications for positive social change by understanding the utilization of ESAs by licensed counselors that allow clients to bring their ESAs to counseling sessions. At the time of this study, scant research on licensed counselor experiences allowed clients to bring ESAs. Before I started this research, I was unaware of the benefit of an ESA and how this can be an asset and benefit to counseling sessions. I had a negative outlook of ESAs when they were first presented to myself as a clinical director. If I was able to have a negative viewpoint of this intervention, I am certain that there are many other counselors that have this same negative outlook or are unaware of the benefits of this intervention in counseling.

There have been recent changes in the utilization of ESAs on airlines due to a federal law change that occurred in January 2021 (Velez, 2021). There are numerous negative media posts regarding ESAs, many organizations that provide ESAs inappropriately, and recent issues with ESAs on airlines which resulted in the federal

government having to get involved. This study can show that ESAs can have a positive impact on the counseling relationship, the client's presentation during counseling sessions, and also illuminate positive experiences with counselors that allow clients to bring their ESAs to counseling sessions. This study can assist this intervention in having more positive feedback and reduce the negative feedback that has been present throughout the past couple of years.

The results of this study indicated that counselors have had to personally complete independent research on this topic and have not been provided any formalized education or training on this topic and utilization of this intervention. As we all know, there is so much differing research about a certain topic that it can cause an individual to get a negative representation or outlook on a topic. This research is able to provide real—life examples of how licensed counselors utilize this resource the positive benefits of this resource and how this can be utilized in the future. When a counselor can have these detailed examples, it can help them to become more confident when utilizing this intervention in their practice.

Due to the recent COVID-19 pandemic and nationwide crisis, mental health has been on the rise, and there has been an increase in mental health issues. Before the pandemic, there was a negative cognition regarding counseling services. Many do not attend counseling because they do not want to be seen as “crazy” or feel that they can overcome the issues on their own (NAMI, 2018). Pet owners have an increased sense of belonging due to his or her pet and an increased sense of meaning and purpose by being responsible for the pet (Chandler et al., 2015). This research identifies the benefits of

having animals present throughout counseling sessions; if individuals experience a sense of belonging due to owning a pet, an ESA during a counseling session could assist with the client being more comfortable throughout the counseling sessions. This intervention could assist in the willingness of clients to begin counseling sessions.

Recommendations for Counselors

Data analysis indicated limited research on the topic of ESAs, and the participants all had to complete independent research, which was not all congruent. Although the participants felt confident using this intervention throughout counseling sessions, they all indicated that they would like to learn more about the topic, have more guidelines regarding the topic, and more structured training. Following are the recommendations based on the findings of the study:

1. Develop a clear and concrete definition of ESAs, how counselors, and guidelines can use the intervention for ESA letters. It would help to this baseline for the intervention so that there is a more concrete approach to be used by counselors.
2. Develop more guidelines on what animals are considered ESAs and determine which animal would be best for this intervention.
3. Education and training on the use of ESAs during counseling sessions. The education could occur in a counseling program providing classes addressing ESAs as well as other animal-assisted techniques. Additional training can occur through ongoing professional development in workshops and

conference settings on more concrete guidelines and utilization of this resource.

4. It would be helpful to learn more about what individuals would best benefit from the utilization of ESAs and are there specific mental health issues that could benefit most from this intervention.
5. Presenting more research and data to the ADA could assist the authenticity and benefit of ESAs to be more actively noticed.

Recommendations for Future Research

1. Expand the research on ESAs to other locations other than the southeast region
2. Expand research to LPCs that provide counseling in agency settings, not just private practice.
3. Complete quantitative research on the topic to determine if there is a correlation between ESAs and progression in counseling.

Conclusion

The purpose of this qualitative hermeneutic phenomenological study was to explore the experiences of LPCs that allow their clients to bring ESAs to counseling sessions. Counselors currently utilize this intervention in their current practice; however, it is hard to determine how this intervention affects counseling and client progression due to the lack of research. Learning more about the counselors' that utilize ESAs in counseling can reduce the gap of research on this intervention and increase knowledge for counselors, counselor educators, and future counselors. I conducted a hermeneutic

phenomenological study through semi-structured interviews with 8 LPCs who allow his or her client to bring ESAs to counseling sessions.

Seven themes emerged from the data: (a) experience with allowing dogs to be brought to counseling sessions, (b) past positive experience with animals which allowed an increase of professional confidence, (c) lack of formal education and training on ESAs, (d) desire for more training and resources, (e) client more open and relaxed with the presence of the ESA, (f) client more present in the here and now with the presence of the ESA, and (g) rapport building resource between the counselor and client. I presented the study's findings, limitations of the study, and implications for change based on the results. Lastly, I provided recommendations for future research.

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Appendix A: Interview Protocol

My interview with participants will consist of a brief introduction followed by the definition of animal assisted therapy, animal assisted activities, and emotional support animals which will then lead to the central question. The central question will then be followed by open-ended sub-questions. If a sub-question has already been addressed by the participant before it was asked, it will not be asked. If emergent themes arise, I will utilize additional open-ended questions to explore the themes.

II. Interview procedures

- a) Purpose of Study- I would like to thank you for choosing to participate in this therapist as I know your time is valuable. I would like to explore the lived experiences of counselors that allow his or her clients to bring their ESAs to counseling sessions. The purpose of this hermeneutic phenomenology study is to gain an understanding of the essence of ESAS for counselors that allow clients to bring them to sessions.
- b) Obtain completed forms
 - a. Informed consent
 - b. Consent to record interview (video or audio only)
 - c. Demographic information sheet-give an opportunity to discuss the information sheet and add information if the participant chooses to do so.

III. Introduction

- a) Animal assisted therapy is a therapeutic intervention conducted by a trained human service provider (e.g., mental health professional, health professional) and

a certified animal (e.g. dog or horse) (Dietz, Davis & Pennings, 2012). Emotional support animals (ESA) are pets that provide therapeutic support to a person with a mental illness. For a person to be prescribed an ESA they would need to be seen by a licensed mental health professional or medical doctor and be deemed appropriate for this prescription. The prescription must state that the individual has an impairment that substantially limits one or more major life activities, and that the presence of an animal is necessary for the individual's mental health (Pet Partners, 2018). Over the past few years there have been blurred lines with the differences of animal assisted therapy, therapy animals, and ESAs.

Initial Question

What are your experiences with allowing clients to bring ESAs to counseling sessions?

Sub-questions

- a) When did you begin using ESAs in your counseling practice and what has changed since you started to use these throughout your practice?
- b) What is your level of training in regard to animal assisted training and emotional support animals?
- c) What has been the most rewarding experiences using ESAs during counseling sessions?
- d) What has been the most challenging experiences using ESAs during counseling sessions?

- e) What are your previous personal and professional experiences with animals before allowing clients to bring ESAs to counseling sessions?
- f) To what extent do your firsthand experiences and beliefs with animals drive your utilization of ESAs?
- g) What ESAs cause changes in the client's presentation during counseling sessions, how?
 - a. Discuss potential changes in body language, emotional presence, attentiveness during counseling, or differences in verbal and non-verbal communication
- h) What coursework or experiences during your counseling program or supervision prepared you to utilize animal assisted techniques or ESAs?
- i) Looking back at your utilization of this intervention, what could have prepared you more actively for using ESAs during counseling sessions?
- j) What are some obstacles you have had to experience with this intervention?

IV. Closing

- a) What else would you like to add to the conversation?
- b) Thank you for your time and participating in this interview. You will be provided by email message a summary of your interview to review and ensure what you said is documented correctly. I will make any corrections that are needed. I will also contact you by email message once I have developed some themes regarding this topic based on my interviews with you and other

counselors and will ask for any reactions that you may have to the themes that were developed.

Appendix B: Demographic Questions

Age: _____

Education Level: Master's Doctorate Gender: Male Female

Ethnicity:

 Asian or Pacific Islander Asian Indian African American/Black (non-Hispanic) Caucasian/White Native American Latino/Hispanic Puerto Rican Other (Specify):

How long have you been practicing counseling? _____

How many years have you been in private practice _____

Do you have any training in animal-assisted techniques or ESAs _____ If so, what and when did you receive this training? _____

How many years have you been utilizing ESAs throughout counseling sessions: _____

How often would you say that you prescribed ESAs to clients?

What would you say is your primary theoretical orientation?

What is your primary population of clients that you serve?
