Animal-Assisted Intervention International
Recommended Competencies
for Animal Assisted Interactions
Revisions for Animal Assisted Intervention International Recommended Competencies for Animal Assisted Interactions:

**Competencies Chairs:** Melissa Winkle & Claire Dickson

**Working Group:** Leslie A. Stewart, Cynthia Chandler, Greta Kerulo, Bridget Simpson and Risë VanFleet

**Original Author** Leslie A. Stewart

**Original Major Contributors** Amy Johnson, Laura Bruneau, Mary Margaret Callahan
Table of Contents

Document Origins and modifications ........................................................................................................4
Background and Overview ....................................................................................................................... 6
Purpose of AAI Competencies ................................................................................................................7
Definitions ................................................................................................................................................ 8
Animal-Assisted Intervention (AAI) Core Competencies .......................................................................10
   Knowledge ..............................................................................................................................................10
   Skills ..................................................................................................................................................11
   Attitudes ............................................................................................................................................11
Animal-Assisted Intervention (AAI) Intermediate Competencies .........................................................12
   Knowledge .............................................................................................................................................12
   Skills ..................................................................................................................................................13
   Attitudes ............................................................................................................................................14
Animal-Assisted Intervention (AAI) Professional Competencies ............................................................15
   Knowledge .............................................................................................................................................15
   Skills ..................................................................................................................................................16
   Attitudes ............................................................................................................................................16
Additional Support ..................................................................................................................................18
References ...............................................................................................................................................22
Document Origins and Modifications
Animal Assisted Intervention International (AAII) recommends that you read the original document in its entirety. The original document was based on the findings of a Grounded Theory (Guba & Lincoln, 2008; Charmaz, 2006) Investigation of the knowledge, skills, and attitudes required of competent animal-assisted therapy (Figure 1) (Stewart, 2014) retrieved from: http://scholarworks.gsu.edu/cps_diss/100.

The knowledge, skills and attitudes can be further organized into tiers for the variety of handlers and practitioners and the type of work that they do (Figure 2).

The original competency items, which are counseling-specific and currently endorsed by the American Counseling Association, have been adapted for AAII with direct permission and collaboration with the original primary author and the members of AAII working groups to fit a broader AAII audience with diverse disciplines around the world. These competencies include animal assisted activities (AAA), animal assisted therapy (AAT) and animal assisted education (AAE). The working group also collected other frames of reference and models that shared similar philosophy to add to the construct of the AAII Competencies for Animal Assisted Interventions. Animal Support (AS) competencies appear in a separate document.
Figure 1: Animal-Assisted Therapy Competencies Framework (Stewart, Chang, Parker, Grubbs, 2016)

Figure 2: Tiered Model of Animal-Assisted Interventions Competencies (Stewart, 2014)
Background and Overview

During AAII Conference Visionary Meetings from 2015-2018, AAII members participated in surveys relevant to the identification and development of themes for animal assisted intervention (AAI) provider competencies and standards. Based on these surveys, AAII leadership began working towards the goal of developing AAI provider best practice competency recommendations. The initial steps of this initiative involved a thorough literature review to identify and extrapolate information from existing work (AAII, 2019). One such empirical work included Dr. Leslie Stewart’s (2014) research on the essential knowledge, skills, and attitudes required of competent providers of animal assisted therapy in counseling (AAT-C). The manuscript represented the only work of its kind at the time. In 2018, working groups met at the AAII International Conference to begin organizing the current AAII standards into AAI provider-specific competencies. Dr. Stewart attended this meeting to present her work and to consult in the AAII competency development initiative. During this meeting, Dr. Stewart and AAII leadership quickly recognized a great deal of alignment between Dr. Stewart’s research and the existing AAII Standards. Thus, AAII leadership and Dr. Stewart collaborated to modify Stewart’s AAT-C competencies to fit the broader interdisciplinary and international needs of AAII. This document reflects the outcome of this collaborative effort between Dr. Stewart and AAII working group members, and is produced with full permission and support from Dr. Stewart. This document is intended to address the clear call for such standards of provider competence by many researchers, AAII members, and experienced practitioners of AAI around the world.

Stewart’s original work addressed the need for specialized knowledge and skills in Animal Assisted Interventions (AAI) in counseling by recruiting 20 experts in AAI to participate in a Grounded Theory investigation (Lincoln & Guba, 2008; Charmaz, 2006) of the Knowledge, Skills, and Attitudes required of competent AAI in counseling providers. The participants (therapists) of this study represented a wide variety of professional identities (professional counselors, counselor educators, psychologists, and clinical social workers), practice settings, participant (client, student, patient) populations, and choice of animal species. Based on the themes and subthemes that emerged from the data, the research team constructed a theoretical framework, which represents provider competencies in AAI in mental health-specific disciplines. A total of nine essential competency areas for utilizing AAI emerged, and were divided into three domains in accordance with the professional competency framework that includes Knowledge, Skills, and Attitudes (Myers & Sweeny, 1990). These have been modified as follows.
**Purpose of AAI Competencies**

As described by Stewart, 2014, when implemented with the appropriate education and training, AAI has the potential to impact the therapeutic experience of a diverse range of individuals across a wide variety of settings in a highly positive manner (Fine, 2015; Chandler, 2017). AAI is growing in use and popularity, and the empirical support for its efficacy is steadily increasing (Stewart, Chang, & Jaynes, 2013). The intervention’s broad and flexible applicability and positive impact on the AAI process makes it an attractive and valuable option for many volunteers, paraprofessionals, and licensed professional, educational, healthcare or human service providers. If volunteers and professional providers are to deliver this intervention ethically and effectively, specialized knowledge and training are necessary.

The AAI competencies presented in this document represent the minimum standards for AAI handlers, trainers, educators, healthcare and human service providers. AAI hopes that individuals and organizations strive to achieve even higher standards. Just as any other specialty training, AAI requires the pursuit of many different learning opportunities. Professional Competencies require not only initial and ongoing knowledge and evaluation, but also progressive skills (only given by years of experience and mentorship/supervision), and attitudes that reflect the current state of the professional and specialty area. The AAI provider competencies are developmental, reflexive, and integrative so that they may serve as a guide/framework, rather than a measurable checklist, specific directives, or credential/certification. Since ethical and competent professionals continually learn and integrate new information, the competencies don’t technically have an “end” to be met, and they will continue evolving over time to reflect the ongoing development of knowledge, research, and best practice recommendations in the field of AAI. Members will strive to demonstrate functional skills, knowledge and attitudes in each area within the scope that they are working (AAA, AAT, AAE, AS). All AAI handlers, dog trainers, volunteers, paraprofessionals, educational, healthcare and human service providers must have well-rounded education in the many areas that encompass competencies for theory, research, and practice. This includes considerations for the dynamics of AAI providers, participants, and dogs involved.

Further, because a significant proportion of both the ACA and AAI competencies are aspirational (involving continuing education, ongoing evaluation, provider characteristics, and professional values) neither can be fully ‘satisfied’, ‘accomplished’, or ‘met’ by any individual provider, program, organization, or training curriculum. Thus, AAI training programs/experiences/curriculums may be based upon, aligned with, or informed by ACA and/or AAI competencies, but the authors of the ACA and AAI provider competencies do not endorse training programs, curriculums, consultants, or supervisors who claim to ‘meet’, ‘satisfy’, or ‘accomplish’ the ACA or AAI competencies. We recommend that as you seek out continuing education, you become familiar with the experience and credentials of the individual or organization offering the coursework.
Definitions

Animal-Assisted Intervention (AAI)- AAI “is an interdisciplinary term that encompasses Animal-Assisted Activities (AAA), Animal Assisted Education (AAE), Animal Assisted Therapy (AAT), and Animal Support (AS).” (AAII, 2019).

Animal Assisted Activities (AAA)- “AAA refers to a membership organization whose teams participate in activities in which a specially trained dog-handler team is an integral part and which provides opportunities that are recreation and leisure based. AAA is provided in a variety of settings, may be group or individual in nature and may be implemented for persons of any age. Depending on the amount of training the team has received, some are also qualified to advise institutions and coordinate their AAT/AAE programs with remuneration. Professionals, para-professionals, and animal handlers who are specially trained by an organization and meet the minimum standards set forth by AAII may deliver AAA. Teams who provide AAA may also participate in AAE or AAT when the team is working directly with an education, healthcare or human service provider, if they abide by the AAT/AAE standards of practice.” (AAII, 2019).

Animal Assisted Education (AAE)- “AAE teams offer goal directed interventions designed to promote improvement in cognitive functioning of the person(s) involved and in which a specially trained dog-handler team is an integral part of the education process. AAE is directed and/or delivered by an education professional with education, licensure, and specialized expertise and within the scope of education. AAE may be provided in a variety of settings, may be group or individual in nature and may be implemented for persons of any age. There are specific educational goals for each student involved and the process is evaluated and documented.” (AAII, 2019).

Animal Assisted Therapy (AAT)- teams offer “goal directed interventions designed to promote improvement in physical, psychosocial, emotional and/or cognitive functioning. AAT is directed and/or delivered by a healthcare/human service professional with education, licensure and specialized expertise within the scope of practice of his/her profession. AAT may be provided in a variety of settings, may be group or individual in nature and may be implemented for persons of any age. There are specific goals for each participant involved and the process is evaluated and documented.” (AAII, 2019).

Core AAI Competencies: Knowledge, Skills, and Attitudes required of dog-handler teams operating at all levels and in all capacities including AAA, AAT and AAE (volunteer, paraprofessional, and professional).

Countertransference: Redirection of a therapist’s feelings/emotional complications toward a client based on prior experiences that had nothing to do with the client (For example, a therapist becomes very uneasy with a client, because that client reminds her of someone she used to date, that ended poorly). Countertransference happens in AAl when a therapist’s personal relationship with an animal impairs or clouds his/her ability to effectively evaluate the animal or facilitate helpful client-animal interactions.
Grounded Theory Investigation: A set of rigorous research (inductive methodology) that systematically generate a theory and leads to the emergence of conceptual categories.

Human-Animal Bond: Mutually beneficial emotional, psychological and physical interactions that lead to a relationship that supports the health and well-being of both humans and animals.

Human-Animal Interaction: General reference to any exchange between a person and a non-human animal. This encompasses the human-animal bond.

In-service: A brief training intended for collateral staff about AAI programs that will be taking place within the organization, center, etc.

Intermediate AAI Competencies: Knowledge, Skills, and Attitudes required of dog-handler teams providing animal-assisted interventions including handlers who work under the direction of professional providers of AAE/AAT (paraprofessional and professional).

Participant: any individual who receives AAI services such as patients, students or clients.

Professional AAI Competencies: Discipline-specific knowledge, skills, and attitudes employed in a professional capacity as an appropriately trained, qualified and/or licensed/credentialed professional providing AAE or AAT.

Program Proposal: A detailed description of intent, specific criteria, and assessment required to launch a program such as an AAT program. It may include risk assessment, liability issues, needs assessment, models/frames of reference, team member’s roles and training/experience, population served and environments, budgets, timelines, etc.

Transference: Unconscious redirection of a client’s feelings for one person to another person. It may occur when a client makes attributions about a helper based on past experiences/relationships (For example, difficulty with women in power positions). Transference in AAI happens when a client’s history with animals impacts their current perception or experience of what is going on with the current animal.
Animal-Assisted Intervention (AAI): Core Competencies

This category of AAI competencies is comprised of the foundational Knowledge, Skills, and Attitudes required of competent dog-handler teams operating within all levels and in all capacities (Stewart & Callahan, 2016) including volunteer, paraprofessional, and professional. Handlers must review and comply with policies and procedures relevant to AAI's with their home organization, as well as the facility in which the work takes place. Core competency recommendations aim to outline the basic skills for teams for casual interactions.

Knowledge

1) Competent handlers/providers of AAI possess in-depth knowledge about the dog on an individual, breed, and species level. *(See AAI Standards of Practice section 1.2-1.8, 2.1-2.5, 3.1)*

a) Extensive, species-specific ethological knowledge about the dog(s)
   i) Physiology, behavior & history
   ii) Care & husbandry
   iii) Understanding that knowledge about one particular species is not necessarily generalizable to other species, and that there may be intra-species differences
   iv) Knowledge of dog handling, behavior, preparation and training techniques
   v) Positive, non-coercive preparation and training methods
   vi) Ability to manage, train and advocate for dog(s) in a variety of environments and situations
   vii) Ability to facilitate dog’s socialization, desensitization and comfort

b) Establish & maintain a strong working relationship with the dog(s)
   i) Ability to work effectively as a team with the dog
   ii) Knowledge of triggers to stress; ability to identify stress to novel stimuli
   iii) Ability to educate others about the dog’s preferences and triggers
   iv) Ability to recognize and apply effective calming interventions to a stressed dog

c) Understanding the social, religious and cultural factors relevant to AAI and multicultural implications of human-animal interactions
   i) Respecting the attitudes of others, particularly those concerned with the dog’s presence
   ii) Understanding that human-animal interaction may hold different meanings across a variety of cultures and beliefs

d) Ability to maximize the potential for safe interactions between participants and dogs
   i) Infection prevention/control and consideration of other zoonotic agents
   ii) Considerations for allergies, phobias, history of witnessing or participating in animal abuse or neglect, and history of animal-related trauma
**Skills**

2) Ability to prevent and respond to dog stress, fatigue, and burnout. *(See Standards section 1.8)* (One Health, 2019)

   a) Actively prevent dog burnout and fatigue
   b) Proactively plan stress-relief and stress-prevention strategies for the dog(s)
   c) Ability to accurately predict, prevent and immediately address unexpected dog stress
   d) Ability to identify and respond to dog’s signals and body language, especially when the animal does not want to interact whether on or off lead
   e) Ability to provide for the dog’s needs, both at the site and in general living conditions
      i) Access to water, a quiet rest/retreat area, and regular bathroom breaks
      ii) Attend to dog’s overall wellness through appropriate provision of quality nutrition, exercise, grooming, enrichment and veterinary care

3) Ability to objectively assess a dog’s suitability, strengths, and limitations despite the handler/provider’s potential emotional bond with or personal bias towards the dog. *(See Standards section 1.7)*

   a) Ability to identify and address personal biases towards the dog(s)
   b) Ability to objectively assess a dog’s suitability for AAI, according to environment, population, activities, individual situation and general situation
   c) Ability to objectively assess a dog’s suitability for each AAI session on an individual basis
   d) Ability to objectively document the dog’s response to participation, overall behavior, and strengths and weaknesses on a daily or weekly basis

**Attitudes**

4) Competent providers of AAIIs prioritize their responsibility to dogs involved in AAI and are effective dog advocates. *(See Standards section 1.8, 2.1, 2.2, 2.4, 3.3)*

   a) Understanding that the dogs involved are the handler’s/provider’s responsibility
      i) Understanding that animal welfare, well-being and advocacy directly impact participant safety
      ii) Understanding that animal advocacy is essential to the ethical practice of AAI
   b) Respecting animal rights, animal welfare, well-being, and recognition that dogs have a right to choose their level, duration, and frequency of participation
      i) Awareness and avoidance of the potential for dog exploitation, either accidentally or intentionally
c) Promoting awareness of AAI at micro and macro levels (individual, community, public)
   i) Awareness that AAI handlers/providers are ambassadors for the field
      a. Maintaining appropriate professional behavior when representing AAI
      b. Willingness to speak to and educate individuals, groups, and organizations/institutions about AAI
   ii) Supporting learning opportunities for AAI enthusiasts, students and trainees
      a. Supporting and advocating for the development of AAI specialty credentials

5) Competent handlers/providers of AAI strive towards AAI specific professional values. (*See Standards section 2.5, 3.1*)
   a) Enthusiasm and passion for AAI
   b) Flexibility, openness, and creativity
   c) Calm demeanor during unexpected events/situations
   d) Effective expressive and receptive communication with participants, caregivers and interdisciplinary team members
   e) Adequate/Appropriate empathy for humans and animals
   f) Willingness to embrace the experiential nature of AAI by being cognitively present and responsive to ever-changing situational factors
   g) Accurate representation of own education, training, expertise, and experience level without intentionally or unintentionally misrepresenting knowledge, qualifications, scope of practice, or credentials
Animal-Assisted Intervention (AAI): Intermediate Competencies

This set of competencies is comprised of intermediate-level knowledge, skills, and attitudes required of competent animal-handler teams providing AAI in paraprofessional and professional capacities. Handlers must review and comply with policies and procedures relevant to AAI with their home organization, as well as the facility in which the work takes place. This includes informed consent, confidentiality, risk management and incident reporting. Competent paraprofessional providers of AAI demonstrate the core competencies in addition to the intermediate-level competencies outlined in this section.

Knowledge

6) Competent paraprofessionals/providers of AAI acquire AAI specific training, assessment, and supervision. *(See Standards section 2.5, 2.9, 3.1, 3.2, 3.4, 4.1)*

a) Successful completion of formal, discipline-specific coursework
   i) Knowledge of how dogs are incorporated into therapeutic settings
   ii) Evaluation of AAI knowledge
      a. AAI Professional Identity
      b. History of AAI in general and in the paraprofessional/provider’s specific discipline
      c. Literature and evidence based practice of AAI
b) Understanding the impact of the human-animal bond
   i) Understanding the physiological & neurological impact of human-animal interaction
   ii) Understanding that human-animal interaction can elicit unexpected vulnerability and disclosure in others
   iii) Knowledge of how the human-animal bond can impact the treatment process
      a. Advantages
      b. Limitations
      c. Indications & contraindications
c) Effective risk management strategies and skills
   i) Knowledge of liability issues related to AAI
   ii) Confirm personal and professional insurance coverage for AAI
   iii) Completion of risk assessments and solutions
   iv) Knowledge of legal issues associated with AAI such as your regional privacy/confidentiality practices. For example, in the US: HIPPA (Health Insurance Portability and Accountability Act), FERPA (Family Educational Rights and Privacy Act)
**Skills**

7) Competent paraprofessionals/providers of AAI demonstrate intentional incorporation of AAI into the participant relationship, plan, and process. *(See Standards section 2.3, 4.5, 4.6, 6.5, 6.6)*

   a) Knowledge that AAI is a skillful intervention
      i) More than owning/loving animals
      ii) More than simply including a dog in the treatment setting
   b) Skillful selections and assessment of AAI strategies
      i) Screening and selection of potential AAI participants
      ii) Collaborative selection of appropriate interventions and strategies for each participant, in each session, based on treatment goals and preferences and abilities of dogs
      iii) Ability to assess the outcome of AAI
      iv) Clear and accurate documentation to include participant’s performance and progress directly related to client goals in the context of discipline specific formal documentation requirements (ex: daily treatment/progress notes or reports)
      v) Inclusion of appropriate documentation procedures including dog’s participation in sessions
      vi) Awareness of transference/countertransference considerations related to AAI i.e. awareness that situations in AAI may trigger feelings, memories, and/or experiences from the handlers’ or participants’ past that could impact therapeutic rapport

8) Competent paraprofessionals/providers of AAI recognize that AAI is a specialty area with a learned and practiced skill set. Competent AAI providers demonstrate specialized skills and abilities that are appropriate to the specialty area of AAI. *(See Standards section 2.5-2.9)*

   a) Understanding the experiential nature of AAI
   b) Ability to attend to/care for the participant(s) and dog(s) simultaneously
      i) Effective judgment when assessing the session’s impact on the dog(s)
      ii) Understanding of the potential emotional impact of participant disclosures, behaviors and situations on themselves, others in the environment and the dog
      iii) Effective judgment when assessing the session’s impact on the participant(s)

9) Competent handlers demonstrate beneficence, non-maleficence, and autonomy for the dog and the participant. *(See Standards section 3.1, 3.2, 3.3)*

   a) Knowledge of potential outcomes of diagnosis for populations they may be working with
   b) Ability to avoid undue influences such as overlooking inappropriateness or not seeking remediation of behavioral outcomes from participant(s) or dog(s), even if they are transient
   c) Knowledge of dog’s preference for environments, populations, and activities
   d) Ability to respect consent from participants and from dogs to ensure safety
   e) Ability to cease AAI services if they are no longer appropriate for participant or dogs
   f) Ability to effectively process loss and bereavement of a dog (self and participants)
g) Ability to teach participant(s) appropriate interactions with dog(s)

10) Competent handlers perform a risk-assessment to evaluate and eliminate/decrease risks within AAI programs (See Standards section 2.9)
   
a) Ability to evaluate and decrease potential participant or population risks  
b) Ability to evaluate and decrease potential dog risks  
c) Ability to evaluate and decrease environmental risks  
d) Ability to evaluate and decrease handler/staff risks  
e) Ability to evaluate and decrease activity risks

**Attitudes**

11) Competent providers prioritize their own formal education, assessment and supervision for general and discipline specific AAI history, theory and practice and dog specific care, training, communication, etc. (See Standards section 3.1, 4.2, 5.2 and 6.3)
   
a) Formal general and discipline specific AAI coursework including history and current literature  
b) Understanding the human-animal bond and how it impacts the intervention strategies  
c) Understanding the importance of formal education pertaining to humane care, training, communication, enrichment and general well-being of dogs.

12) Understanding that AAI is a skilled service and not appropriate for everyone  
    (See Standards section 3.2)

13) Understanding ethics and duty to all parties (See Standards section 3)  
    a) Participants  
    b) Dogs  
    c) Self/Discipline
Animal-Assisted Intervention (AAI): Professional Competencies

This set of competencies is comprised of advanced-level Knowledge, Skills, and Attitudes required of competent animal-handler teams providing AAE or AAT (or equivalent professional discipline) and in a professional capacity as an appropriately licensed or credentialed education, healthcare or human services professional. Competent licensed/credentialed professional providers of AAI demonstrate the core and intermediate-level competencies as listed above, in addition to professional competencies.

Knowledge

14) Knowledge of AAI specific techniques & principles appropriate to the provider’s professional discipline. *(See Standards section 3.1, 4.2, 4.4, 6.2, 6.4)*

   a) Implications for specific participant populations
   b) Implications for specific presenting concerns

15) Participation in supervised professional practice. *(See Standards section 3.1, 4.3, 4.4, 5.2, 5.3, 6.3, 6.4)*

   a) Applied experience under the supervision of an appropriately qualified professional to supplement didactic knowledge
   b) Integration of AAI into provider’s personal model/philosophy of practice
   c) Feedback and assessment of AAI skills from a mentor experienced in AAI and the provider’s own discipline if possible

16) Competent providers of AAI demonstrate integrated ethics. Thus, competent providers of AAI are aware of AAI specific ethical considerations and can incorporate ethical professional practice with ethical AAI practice. *(See Standards section 3.2, 4.2, 6.2)*

   a) Able to recognize and discuss the ethical implications of AAI
      i) Inform patients/participants of purpose of AAI
      ii) Discuss and address potential safety issues
      iii) Maintain respect for the dog(s), the patient(s)/participant(s), and the treatment process
      iv) Awareness of the provider’s personal biases, including the impact of the provider’s emotional bond with the dog and its impact on the treatment process
Skills

17) Competent providers of AAI demonstrate a mastery of discipline-specific professional skills prior to integrating AAI interventions. AAI is practiced only within the boundaries of a provider’s professional scope of practice. *(See Standards section 3.1, 3.2, 4.2-4.6, 6.2-6.6)*

   a) Awareness that AAI is not recommended for beginning-level practitioners
      i) Knowledge and experience with basic discipline-specific skills before integrating AAI
      ii) Familiarity and competence with participant population and presenting concerns before integrating AAI
      i) Demonstrating professional effectiveness without the integration of a dog
      ii) Recognizing that AAI is utilized to enhance the treatment process rather than as a stand-alone intervention
   b) Knowledge and integration of theory-based interventions
      i) Ability to articulate the role of AAI within a provider’s personal model/philosophy of treatment
      ii) Understanding of the goals of AAI interventions
      iii) Awareness of current literature outcomes for the AAI selected interventions
   c) Ability to accurately read, interpret and respond to dog body language
      i) Ability to link dog-participant interactions to participant behaviors/goals/conceptualization
      ii) Ability to link unexpected events or interactions to participant goals or presenting concerns
      iii) Ability to model appropriate, respectful, and empathetic dog care and interactions

Attitudes

18) Competent providers of AAI have a well-developed professional identity and are professional advocates for AAI. *(See Standards section 4.3, 4.4, 6.3, 6.4)*

   a) Active involvement in continuing education and engagement in professional development
      i) Regular consultation and collaboration with other AAI providers
      ii) Regular consultation and collaboration with professional dog specialists
   b) Maintaining familiarity with existing and emerging discipline-specific AAI literature
      i) Familiarity with current AAI language/terminology
      ii) Encouraging and supporting the continued development of AAI literature
Additional Support from Similar Models

Melissa Winkle, OTR/L, FAOTA

Based on the 2011 Animal Assisted Intervention International development meeting, Winkle (2011) constructed an initial model depicting a tiered approach to skill development for human and animal teams, identifying that the process might be seen on a continuum, rather than a hierarchy (Figure 3). AAA, AAE and AAT can be vastly different in scope, and can be practiced by volunteers, paraprofessionals and professionals. All categories are of equal importance, and they do all share the need for similar core competences. Note that while the placement of competencies is different, the components are similar.

In this model, the first tier is Resource Building in which anyone interested in AAI would begin to gather information in their specific interest area (AAA, AAT or AAE). It includes reviewing general theoretical foundations and understanding of human-animal interactions and the human-animal bond, and beginning core animal handling, preparation, communication and training. Animal welfare and well-being techniques are a foundational skill. This tier generally equates to the content in Stewart’s Core AAI Competencies.

The second tier is preparatory and describes the mechanics that may be required for the team’s target interest area. Regardless of interest area (AAA, AAT or AAE), teams would benefit from identifying a visiting organization and exploring the coursework, skills and opportunities that will lead to the next phase. However, sometimes the volunteer organization expectations may not be compatible with some of the qualities that we deem important in professional sessions. The goal is to strengthen the relationship, bond, and trust between the human-animal team. During the second tier, the team continues to gain social skills, community skills, and may want to begin exploring core evaluations of relationship, preparation and basic obedience, by an objective third party. Winkle’s second tier would also generally equate to Stewart’s Core AAI Competencies.

Tier three is a potential visiting phase. For some teams, this is the end goal. For education, healthcare or human service providers, visiting is an excellent way for teams to get to know each other in semi-structured manner without the pressure of multitasking formal treatment or education plans, equipment, and participants. Teams are trained on lead for specific skills and aptitude, then evaluated and registered by an objective third party for intermediate skills needed for visiting. While some of the training and evaluation items in the intermediate level may not be conducive to those expected later in the professional level skill set, having a team that is flexible in both may be beneficial. Handlers must become fluent in reading, interpreting and responding to dog body language in all situations- on or off lead. This is the time to put animal welfare and well-being into practice and the human partner learns to advocate for their animal, sets rules of engagement for participants, and learns to identify what settings, populations and activities the dog enjoys. These aspects are part of creating the dog’s profile. This is also the time for teams to work with a mentor until they can demonstrate the ability to be independent. For those moving into AAE and AAT, this is the time to initiate formal program development and construction of policies and procedures that are expected in the formal application of AAE or AAT. Additional professional
development in discipline specific AAE or AAT is ongoing and proceeds to tier four. Winkle’s third tier generally equates to Stewart’s Intermediate AAI Competencies.

Tier four is AAE or AAT. Education, healthcare and human service providers, along with their dogs, are evaluated in the setting, with the population and activities in which they will be working and according to the unique skills that each educator or practitioner would expect for their professional work setting. AAE and AAT are complementary to setting participant treatment or education goals according to discipline specific theories, frames of reference, treatment models, skill sets and scope of practice. AAE and AAT are integrated into the formal treatment or education plan and outcomes of participant performance and progress are measured and documented. Tier four generally equates to Stewart’s Professional AAI Competencies. For additional information on Figure 3, contact the author melissa@dogwoodtherapy.com

Figure 3
Tiered Approach for AAIs

[Winkle, 2011]
In her original manuscript, Dr. Stewart (2014, 2016) cited an earlier work by Dr. Cynthia Chandler as a foundational inspiration. Dr. Chandler presented the first known competencies in AAT-C and guidelines for practice – these competencies were published in 2012 in the 2nd, and later 3rd, edition of her book (Chandler, 2017, pp. 351-352). Dr. Chandler outlined 6 main competency areas and accompanying performance guidelines for each as seen below. These competencies clearly dovetail with the more recent work of Stewart which has now been adapted for AAII and its broader audience.

1. Describe the history, evolution, and current status of animal assisted therapy (AAT) applications, training, and credentialing related to counseling.
   Performance guidelines:
   1.1 Have knowledge of historical and current AAT applications in the mental health field.
   1.2 Stay current with, describe, and critically evaluate quantitative and qualitative counseling-related research on AAT.
   1.3 Have knowledge of the origins or current status of major AAT training and registration/credentialing organizations and institutions.

2. Understand and explain the benefits, role, and function of AAT in counseling.
   Performance guidelines:
   2.1 Understand and explain the potential benefits of AAT in counseling.
   2.2 Have knowledge regarding the impact on the counseling environment when a therapy animal is present.
   2.3 Have knowledge and awareness of the unique dynamics presented in counseling relationships when a therapy animal is present.
   2.4 Understand the therapy animal’s role as a transitional being and therapeutic agent in the counseling process.

3. Integrate AAT in a manner consistent with the counseling process.
   Performance guidelines:
   3.1 Assess client needs that may be met through AAT interventions.
   3.2 Develop counseling treatment goals and plans that integrate AAT.
   3.3 Have knowledge and skill in the application of AAT interventions (techniques and intentions), and apply them in a manner consistent with the goals of counseling.
   3.4 Be knowledgeable of animal behavior and be able to interpret therapy animal vocal and non-vocal communications during a therapy session, as well as consider how these communications may be beneficial in understanding and assisting a client.
   3.5 Assess the efficacy of AAT interventions in moving a client toward treatment goals.

4. Comply with ethical, legal, and professional standards and guidelines related to AAT applications in counseling.
   Performance guidelines:
   4.1 Follow ethical codes and standards of practice established by animal welfare and AAT organizations.
   4.2 Follow ethical codes and standards of practice of professional mental health organizations.
   4.3 Follow local, state, and federal guidelines governing the welfare and protection of humans and animals.
   4.4 Apply AAT in a manner that is culturally sensitive; consider cultural, racial, ethnic, and other individual differences, especially differences in attitudes toward animals, before and during application of AAT with a particular client and in a particular environment.

5. Work as a team with a therapy animal in a counseling facility, practice, or program.
   Performance guidelines:
   5.1 Evaluate client appropriateness for participation in AAT.
   5.2 Evaluate a facility or counseling environment for appropriateness of AAT.
   5.3 Network with appropriate facility staff regarding the intent and activities of therapy animal’s working in a facility or program.
   5.4 Follow facility or program policies and procedures regarding the practice of AAT in a particular facility or program; where no policies or procedures exist, establish policies and procedures with the assistance of appropriate facility and program personnel.
5.5 Demonstrate competency in orchestrating a therapy animal to enact appropriate behaviors and comply with appropriate commands under circumstances consistent with the demands of AAT in a counseling environment and in a manner that protects the welfare and safety of all involved, including both humans and animals.

6. Serve as an advocate for the therapy animal.

   Performance guidelines:
   6.1 Establish and maintain a healthy and functional owner-handler relationship with an animal that will be or is participating in the counseling process as a therapy animal.
   6.2 Assess an animal's ability to work as a therapy animal.
   6.3 Provide a comfortable environment for the therapy animal to participate in AAT. This includes providing a space and allowing time for food, water, rest, exercise, recreation, and so forth as needed.
   6.4 Identify and acknowledge when an animal is communicating fatigue, stress, distress, discomfort, or a lack of desire to participate in AAT, and provide for the animal’s needs.

Risë VanFleet

Another model that coincides with the content of the previous two models can be found within the International Institute for Animal Assisted Play Therapy® (IIAAPT) competencies (VanFleet, 2018; full document at www.iiaapt.org). This organization’s competencies speak to AAIs intermediate and professional level competencies and focus heavily on relationships and animal well-being. The IIAAPT competencies and education include “demonstrated competencies acquired through considerable training, relationship work with one’s animals, and supervised experiences” (VanFleet, 2018). The content describes the importance of animal behavior knowledge (ethology, behaviorism, applications, communication, handling, well-being and advocacy), animal specific evaluation with (a) a personality assessment on the broad dimensions of physical/sensory functioning, social functioning, adaptability, and psychological functioning, (b) demonstration of the animal’s trained behaviors, and a therapy involvement plan detailing how the handler will tailor any involvement of the animal to the animal’s preferences and capabilities. It also addresses the skills involved in the ability to read and respond to animal body language with fluency in real time. The organization also expects positive animal training and handling skills so that the entire experience is positive and enjoyable for the animal. The instructors expect therapists to leave with in-depth knowledge in each of the above aspects and further requires supervision in AAPT until professional skill demonstration is met and the therapist can become independent in these aspects. These are also consistent with Stewart’s, Chandler’s and Winkle’s models.
**VanFleet’s Animal-Related Competencies**
- Ethology
- Behaviorism (theory & applied)
- Communication (fluent reading of body language; clear communication to the animal)
- Animal assessment (personality, trained skills, therapist planning for maximizing animal preferences/enjoyment and eliminating animal stress)
- Positive animal training
- Handling skills
- Animal welfare, well-being, and advocacy
- Therapy Involvement Plan that tailors animal involvement to the animal’s preferences, enjoyment, and capabilities

**Therapeutic Competencies**
- Core therapy/intervention skills without animal (e.g., mental health, allied health, education)
- Animal Assisted Play Therapy™ skills
- Flexible application of principles and methods of AAPT to address a variety of client needs
- Simultaneous attention to human and animal communication/needs during interventions
- Proactive attention and responsiveness to animal needs during interventions

**Relationship Competencies**
- Mutually beneficial attachment relationship between handler and animal
- Reciprocity in the handler-animal relationship
- Facilitation of healthy client-animal relationship development
- Facilitation of client-animal interactions in the service of client goals
- Integration of all competencies for ethical and effective therapeutic decision-making
References


Stewart, Leslie A., (2014) "Competencies in animal assisted therapy in counseling: a qualitative investigation of the knowledge, skills and attitudes required of competent animal assisted therapy practitioners." Dissertation, Georgia State University. https://scholarworks.gsu.edu cps_diss/100


