

# **GUIDE DOG OWNERSHIP AND PSYCHOLOGICAL WELL-BEING**

CINDY WIGGETT

**Thesis presented in fulfilment of the requirements for the degree of Master of Arts (Psychology) at the University of Stellenbosch**



Supervisor: Mr. H. Steel

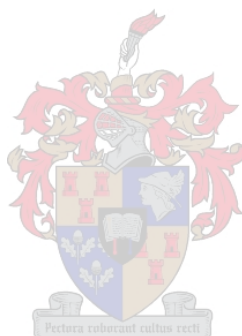
April 2006

### STATEMENT

I, the undersigned, hereby declare that the work contained in this thesis is my own original work, and that I have not previously in its entirety or in part submitted it at any university for a degree.

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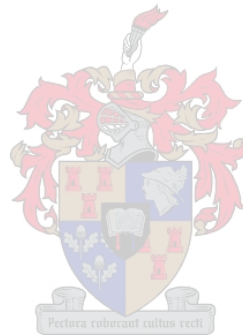
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## ABSTRACT

This study explored the dynamics of guide dog ownership from a psychological point of view. The research was explorative in nature and employed two historically distinct methodologies of enquiry (both quantitative and qualitative). This explorative study relied on a very comprehensive literature review, which combined literature from three distinct fields of research: disability research, psychofortology and the human-animal interaction. Based on this literature review, three research questions were formulated. The first part of the study focused on the concept of well-being. The first two research questions dealt with the question of whether differences exist between the well-being of persons with blindness and guide dog ownership and persons with blindness without guide dog ownership. These two questions were answered in a quantitative fashion by employing Ryff's Scales of Psychological well-being (1989) to two naturally occurring groups (n = 65). In general, no group differences emerged, but the properties of the questionnaire and some confounding may have skewed the results. The final research question explored the lived experience of anticipating and owning a guide dog in a qualitative fashion. Two interviews were conducted with each of six participants (one interview before guide dog ownership and one after acquiring a guide dog). The qualitative methodology yielded some very promising findings on the nature of guide dog ownership. Seven themes emerged from the first interview and eight from the second. Guide dog ownership seems to be a life-changing experience, with both negative and positive consequences for the owner and his/her psychological well-being. This study concludes with a strong argument for the complementary use of quantitative and qualitative methodologies. Recommendations are given for several service providers

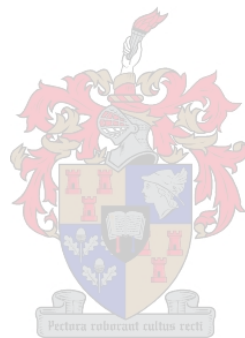
in and for the community of persons with disabilities, and suggestions are made for future research on a topic of this nature.



## OPSOMMING

Hierdie studie ondersoek die dinamiek van gidshondeienaarskap vanuit 'n sielkundige oogpunt. Die navorsing was eksploratief van aard en het twee histories, soms teenstrydige metodologieë van ondersoek behels (beide kwantitatief en kwalitatief). Hierdie eksploratiewe studie het gesteun op 'n baie deeglike literatuuroorsig, wat literatuur van drie verskillende navorsingsareas omsluit, naamlik navorsing oor persone met gestremdhede, psigofortologie en die mens-dierinteraksie. Vanuit hierdie literatuurstudie is drie navorsingsvrae geformuleer. Die eerste deel van die studie het gefokus op die konsep van psigologiese welstand. Die eerste twee navorsingsvrae het gefokus op die kwessie of daar verskille is tussen die welstand van persone met blindheid en gidshondeienaarskap en persone met blindheid sonder gidshondeienaarskap. Hierdie twee vrae is op 'n kwantitatiewe manier beantwoord deur Ryff se Scales of Psychological Well-being (1989) toe te pas op twee natuurlik gevormde groepe (n = 65). Oor die algemeen het geen groepeerse verskille te vore gekom nie, maar die vraelys se eienskappe en sekere onbeheerde faktore kon die resultate negatief beïnvloed het. Die finale navorsingsvraag het die werklike ervaring van die antisipering en besit van 'n gidshond op 'n kwalitatiewe manier ondersoek. Twee onderhoudsintervoue is gevoer met elk van ses deelnemers (een onderhoud voor gidshondeienaarskap en een nadat besit geneem is van 'n gidshond). Die kwalitatiewe metodologie het baie belowende resultate oor die aard van gidshondeienaarskap opgelewer. Sewe temas het vanuit die eerste onderhoud te vore gekom en agt temas vanuit die tweede. Gidshondeienaarskap blyk 'n lewensveranderende ervaring te wees, met beide negatiewe en positiewe gevolge vir die eienaar en sy/haar psigologiese welstand. Hierdie studie sluit af met 'n sterk argument ten gunste van die aanvullende aard wat

die toepassing van beide kwantitatiewe en kwalitatiewe metodologieë bied. Aanbevelings word gegee vir 'n aantal dienslewerende organisasies binne en vir die gemeenskap van persone met gestremdhede, en voorstelle word gemaak vir toekomstige navorsing oor 'n onderwerp van hierdie aard.

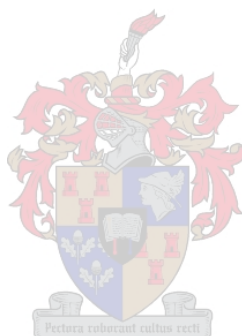


## STATEMENT REGARDING NRF BURSARY

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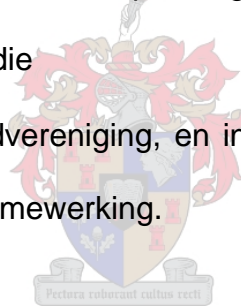
As witnesses (1) \_\_\_\_\_ (2) \_\_\_\_\_



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Hiermee spreek ek my innige dank uit teenoor:

- my hemelse Vader, vir al sy genade;
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- die Suid-Afrikaanse Gidshondvereniging, en in die besonder Eugene, Lynne en Anthony, vir hul vriendelike samewerking.





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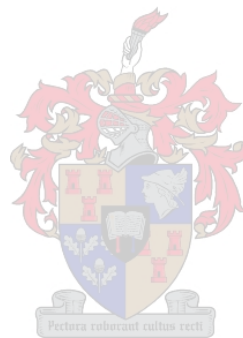
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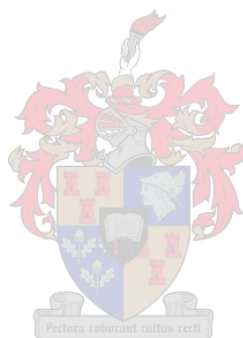
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# CHAPTER 1

## STATEMENT OF PROBLEM AND PURPOSE OF RESEARCH

### 1.1 Statement of problem

It is estimated that about 5 to 12 percent of the South African population has some or other disability, according to the Integrated National Disability Strategy (INDS) (1996). A press release by the South African Revenue Service (SARS) reported that at least 2.2 million people in South Africa have a physical disability, and that the largest sub-group is people with blindness. The South African National Council for the blind also reported that persons with disabilities are the most unemployed group in the country (South African Revenue Service, 2003). These statistics would suggest that persons with disabilities represent a significant proportion of the population of South Africa. The high amount of unemployment also highlights the environmental and social barriers that face this substantial sub-section of the population.

Ways in which to enhance the lives of persons with disabilities and minimise the social/environmental barriers that influence their lives need to be identified. The South African government has changed its policies regarding persons with disabilities. The previously deficits-based approach was criticised and a strengths and cooperational orientation was adapted. The minister of finance, Trevor Manuel (SARS, 2003), said that government and the private sector should support and

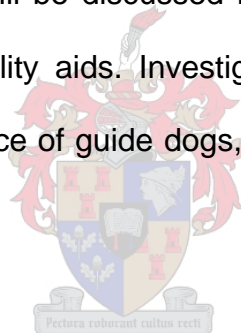
create opportunities for persons with disabilities. This provides the foundation for researchers to explore ways in which to enhance the lives of persons with disabilities.

The field of psychology lends itself to answer the questions related to the enhancement of human lives. Mental well-being is a concept very often associated with a strengths-based approach. Ramphele (1997) writes that “the fact that mental well-being is central to the functioning of any human community is not often reflected in the place accordance. Mental health policy formulation, appropriate implementation and adequate resourcing should be placed on national, continental and global agendas” (p.i). Although mental well-being and health are such an important concept, it is rarely the focus of psychological studies, with researchers rather opting to launch studies from a psychopathological perspective. Studies are needed to scientifically inform the global policy makers as to how the mental well-being of people can be improved, and in this instance, persons with visual impairment.

If persons with disabilities, and more specifically persons with blindness, face a myriad of social and physical challenges, there is a need to identify tools or aids to help them function in mostly inaccessible environments. One form of aid to persons with blindness that have been employed in South Africa since 1953 is dog guides. Gladys Evans brought the first guide dog to South Africa in 1953 and formed the South African Guide Dog Association (SA Guide Dogs). Today, over 50 years later, SA Guide Dogs is still the only recognised organisation in South Africa to provide guide dog training for people with blindness.

No known scientific literature exists on the psychology of guide dog ownership in South Africa, and only limited studies have been conducted internationally on this subject. A further reason for conducting the current research was to investigate in a scientific manner whether the claims by SA Guide Dogs and current guide dog owners about the advantages of guide dog ownership can be empirically proven.

Personal accounts, such as the one by Eugene Pierce (personal communication, July 30, 2004), the representative for SA Guide Dogs in Cape Town, suggest that a guide dog may help the owner maintain a positive outlook on life and gain more independence. What was apparent from this interview and previous literature on the human-animal relationship (as will be discussed in section 2.3), is that guide dogs cannot only be viewed as mobility aids. Investigation is also needed in order to explore the psychological influence of guide dogs, something quite often overlooked in literature.



Promotional pamphlets by SA Guide Dogs also places emphasis on the independence and self-respect a person can gain through guide dog ownership (South African Guide-dogs Association for the blind, 2003). One such pamphlet makes reference to “a vision beyond sight” (South African Guide-dogs Association for the blind, n.d.<sup>1</sup>), which implies that guide dog ownership has more benefits than merely providing mobility aid. In another pamphlet (South African Guide-dogs Association for the blind, n.d.<sup>2</sup>), guide dogs are highlighted as companions, friends, and agents which give mobility and life to a person with sight disability, painting an attractive picture of guide dog ownership. However, there has been no scientific investigation in South Africa regarding the psychological influence of guide dogs, and



there is no scientific proof to justify the use of guide dogs in the current South African context.

This investigation will focus on strengths and well-being. It will critically examine guide dog ownership, through the process of application, training and adjusting to a guide dog, and will ask questions about the positive and negative aspects of ownership. This will be done to ultimately formulate a clear picture of the psychological effects of guide dog ownership on the mental well-being of the individual with sight disability.

One cannot, however, consider guide dog ownership in isolation. It was also necessary to explore persons with disabilities in general in order to provide a more complete picture of the challenges facing a person with blindness. Only when the challenges are known, can one begin to understand what, if any, influence a guide dog may have on a person with blindness in South Africa.

It is necessary to determine how one should go about to answer the questions regarding the potential of guide dogs to enhance the lives of persons with blindness. When considering a topic such as “guide dog ownership and psychological well-being” there are several constructs and assumptions that need to be clarified. This study will be conducted in a methodical, scientific fashion, which means that specific questions will be asked in order to gain a better understanding of a natural phenomenon (Graziano & Raulin, 2000). There are, however, several natural phenomena that will need investigation in order to answer the research questions that will be posed at the end of this section.

Firstly, it is necessary to understand what guide dog ownership means. Guide dogs are mobility aids for persons with blindness. Two distinct fields of research are incorporated in the study of guide dogs and their influence on their owners. Guide dogs are living beings, and need to be considered within the broader human-animal interaction field. They also have a very specialised task: extensive training is invested in them and a distinction is made between service dogs and household pets. This distinction has implications at legislative and personal levels.

The second field of interest implied when investigating guide dog ownership is research on persons with disabilities. Here, not only an academic interest in the different kinds of disabilities is needed, but also sensitivity towards the language associated with persons with disabilities. There are no *disabled people*, but rather *persons with disabilities*. A person with a disability is first and foremost a person, unique and full of possibility, and should not be defined in terms of their physical challenge. As researchers, it is important to use culturally sensitive language and educate the broader society on avoiding insensitive and incorrect assumptions. It is also, however, important to understand that a person with a disability faces challenges above and beyond the disability itself. The literature review will look in detail at the lives of persons with disabilities and identify areas where physical and social environments have a disabling effect on them.

The third phenomenon that will be investigated is psychological well-being. Again, it is the task of the researcher to define what a topic means and what it does not mean. Layman's terms such as *happiness* and *well-being* need to be investigated and scientifically defined in order to provide clear and unambiguous constructs. It is

also important to distinguish between psychological well-being and subjective well-being, as the subsequent literature study will show. Furthermore, the topic of well-being cannot be considered outside the broader field of psychofortology, and this aspect too will come under close scrutiny.

Because psychological well-being has been researched and standardised testing developed for it, quantitative methodology was deemed appropriate to explore the psychological well-being of persons with blindness. The quantitative design was employed to investigate whether guide dogs are associated with their owners' well-being.

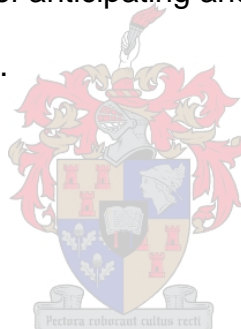
Practically, a perfect empirical study would have involved experimenting with a group of people who receive a guide dog (experimental intervention) and comparing their scores on the dependent variable (well-being) before and after the intervention. In order to undertake an experiment of this nature, a large amount of participants are needed to ensure a normal distribution of scores. It was, however, impossible to obtain a large number of participants due to practical limitations on time and space. Only very limited numbers of people from the Western Cape (the accessible population) receive guide dogs every year. An alternative design was thus called for and a differential design was chosen.

The use of quantitative research cannot, however, provide a complete picture of the dynamics involved in owning a guide dog. In order to explore the way in which guide dogs actually influence the lives of their owners, an additional qualitative design would also prove valuable. As McGrath and Johnson (2003) pointed out, qualitative

and quantitative research need not be approached as opposing perspectives, but rather as complementary. They may explore different aspects of a phenomenon, but as McGrath and Johnson (2003, p.32) so aptly put it, “methodologically, we [as researchers] need all the help we can get”. With explorative research such as this, particularly when participants are limited, a qualitative design can yield invaluable information.

Guide dog ownership and its psychological consequences to the human partner have hardly been investigated and no standardised assessment has been developed to explore the dynamics involved in guide dog ownership. In order to reach a rich understanding of the experience of anticipating and owning a guide dog, a qualitative research design was also chosen.

## 1.2 Purpose of the research



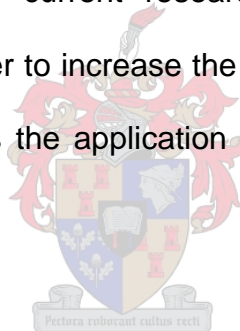
The research questions for the current study are formulated as follows:

1. Do differences exist in the psychological well-being of blind persons with guide dogs (group A) and blind persons without guide dogs (group B)?
2. If differences in psychological well-being exist between the two groups, can the differences be attributed to guide dog ownership?
3. What is the lived experience of anticipating and adjusting to life with a guide dog in South Africa?

After the specific research questions have been formulated, certain objectives were set to guide the study. The objectives of this study are:

1. To determine empirically whether differences exist in the psychological well-being of blind persons with guide dogs and blind persons without guide dogs.
2. If any differences are found to exist between the groups, to determine statistically whether the differences can be attributed to guide dog ownership.
3. To determine in a qualitative way the lived experience of anticipating and owning a guide dog


Based on the reasons for the current research, this project will purposefully investigate several topics, in order to increase the database of scientific literature on guide dog ownership, as well as the application of this knowledge to the uniquely South African context.



The current project will also generate new knowledge based on the results obtained on guide dog ownership and well-being, as well as the actual experience of anticipating and owning a guide dog.

Valuable insight can also be gained through the use of the “fortigenic” orientation in the study of people with disabilities. Limited empirical and psychological data exist in South Africa on people with disabilities, and even less on people with visual impairment. Therefore, this study should also contribute to the databank of knowledge on this subject.

This study will combine both fortigenic and empowerment literature, to ultimately provide suggestions to SA Guide Dogs on empowering service provision through guide dogs. A secondary aim is to educate policy makers and government on the possible positive and empowering effects that guide dogs can have for the person with a disability. The findings can possibly provide one option through which South African organisations can indeed support and create opportunities for people with disabilities. In addition, the cause of SA Guide Dogs can also be supported through scientific research, which may help their drive for guide dog distribution and acceptance in all South African communities and public access areas. Research findings may also help SA Guide Dogs to convince prospective sponsors of the value of guide dogs in society.



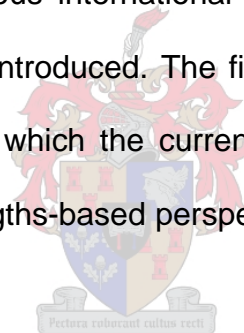
It is also hoped that the current research will provide evidence of the potential of combining both qualitative and quantitative research designs. A symbiotic use of two, often opposing, research enquiries can provide future researchers with an alternative viewpoint and a wider scope of research possibilities.

Ultimately, however, the current research will be conducted in order to investigate ways in which to enhance the lives and well-being of persons with disabilities in South Africa. This will be approached through integrating theory, the subsequent results and personal accounts of persons living with blindness.

### 1.3 Structure of thesis

This thesis is structured into five chapters. The first chapter provides the research questions and rationale for the research topic. A short review of the process involved in choosing the research topic is also given.

The second chapter provides a literature review of three distinct topics related to the research questions. Disability as a phenomenon is discussed from an international and local perspective, and blindness in particular is considered. The second section of chapter two reviews the research related to and the development of the field of human-animal interaction. Previous international research on service animals and guide dogs in particular is also introduced. The final topic discussed in the second chapter is the perspective from which the current research is conducted. Positive psychology is defined as a strengths-based perspective with unique constructs, such as well-being.



The third chapter highlights the methodology by which the research questions were answered. This chapter provides an unique distinction between the research questions. Research questions one and two are investigated in a quantitative fashion by employing Ryff's Scales of Psychological Well-being (Ryff, 1989) on the sample population. Research question three is explored in a qualitative fashion by means of in-depth interviews of six participants, in order to gain a rich understanding of the lived experience of anticipating and owning a guide dog.

The fourth chapter presents the results of the two distinct research methodologies and discusses these results within the framework of appropriate literature. The results of both methodologies are discussed critically and are carefully interpreted in order to provide the basis for answering the three research questions.

The final chapter concludes the study by summarising the findings and implications of these regarding guide dogs ownership. A critical analysis of the limitations of the current findings is also presented. Finally, recommendations regarding directions for future research within the South African context are made.





## CHAPTER 2

# BLINDNESS, HUMAN-ANIMAL INTERACTION AND PSYCHOFORTOLOGY

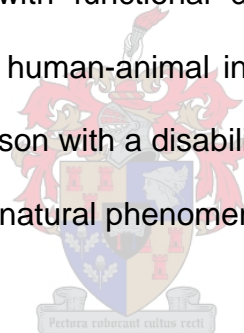
### 2.1 Introduction

At the beginning of any research project it must be established exactly what it means to do scientific research. According to Graziano and Raulin (2000, p.1), “science is a process of inquiry – a particular way of thinking”. They also explain that science is concerned with asking specific questions in order to find answers to further our understanding of nature. Research, in turn, describes a systematic search for information (Graziano & Raulin, 2000). Finally, scientific research is defined as research that is both empirical and rational in nature. Thus, scientific research requires the researcher to investigate a natural phenomenon in a systemic manner (i.e. pose a question, develop procedures for answering a question) and make rational interpretations from empirical data.

In the current project, the first natural phenomenon that informed the research question was interspecies contact. Humans and animals co-habituate on this planet and interact. The interaction may be purely coincidental, such as spotting and being spotted by a wild animal, or it may be quite deliberate, such as the domestication of several animal species. It has also been observed that close bonds form between humans and animals, in particular between humans and their pets. From a scientific point of view, one can then ask what effect, if any, this human-animal interaction has

on one or both of the parties involved. In psychological research, people's actions and reactions (behaviour) are also studied, in an effort to understand the underlying processes involved in motivating certain behaviours. The human-animal interaction provides a natural phenomenon through which we can learn what underlying processes influence people's actions and reactions towards animals, as well as their reactions towards other people.

The second natural phenomenon of interest to the current study was the employment of the human-animal interactions to the human partner's advantage in particular. This is found in environments such as farming, security work (such as police dogs) and with people with functional disabilities. Before the underlying processes involved in a specific human-animal interaction may be investigated, as for example found between a person with a disability and their service dog, there has to be an understanding of a third natural phenomenon, namely physical disability.

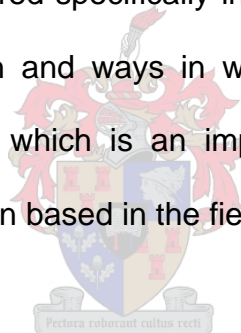


Most modern societies now recognise physical disability as a social phenomenon, and one that is very often neglected (Davies, 1991). Historical perspectives on disability may shed some light on the way persons with disabilities are viewed in modern life. According to Davies (1991), many Western societies held the belief that disability resulted from evil influence or was self-inflicted by the person. On the other hand, some tribal societies viewed disability as something to be revered, and saw it as manifestations of power from the gods. One study in Sub-Saharan Africa focused on African proverbs on disability (Devlieger, 1999), and the author stresses that cultural knowledge is necessary when structuring educational and rehabilitation

programmes for persons with disabilities. Superstitions about persons with disabilities may have resulted in animosity towards them (Davies, 1991).

The First World War first stimulated interest in the psychological effects of physical disability (Davies, 1991). Due to an unprecedented number of disabilities resulting from the war, psychologists developed an interest in the treatment of these casualties. The Second World War resulted in even more disabilities than the first, and psychologists began emphasising the need for psychological adjustment to take place in the individual who was being rehabilitated.

Finally, a natural phenomenon of concern to the field of psychology is mental well-being. Mental well-being is explored specifically in the realm of Positive Psychology and focuses on human strength and ways in which to enhance this (Strümpfer, 1995). Empowerment literature, which is an important concept when discussing disability service provision, is often based in the field of Positive Psychology.



In order to integrate the different natural phenomena into a coherent research question, which is both empirically testable and of scientific value, one has to refer to previous literature on the diverse subjects and employ what Graziano and Raulin (2000, p.37) call “systematic inductive-deductive logic”. By using empirical observations and inferring constructs from that, one is engaged in inductive reasoning. Deductive reasoning involves using existing constructs as a basis for making predictions.

Empirical observations have confirmed that the human-animal interaction can have psychological consequences for the human partner (refer to section 2.3). When

investigating mental well-being, researchers have found that, for example, close relations with others (Ryff, 1989) positively influence well-being. In combining the two, one can deduct that a close relationship between a human and animal may positively influence well-being.

This chapter will review the relevant literature that informed the research questions. Three main, distinct topics will be related in detail, namely blindness, the human-animal interaction and Psychofortology.

When a specific phenomenon is investigated, a broader understanding of that phenomenon in general is needed. For each of the three topics, the following review of literature will start with a broad focus and will end with a narrow, specific focus on the most pertinent literature for the current study.

This chapter will also conclude with an integration of the three topics into a theoretical framework, considering the possible ways in which persons with disabilities can achieve well-being. Pet and service dog ownership is proposed as a possible means of enhancing the well-being of persons with disabilities. The current research itself was undertaken to either confirm or reject this notion.

## 2.2 Disability as a phenomenon

Disability as a phenomenon will be discussed below with reference to its definition (2.2.1), its causes (2.2.3) and the different types of disabilities (2.2.4). Blindness as a specific example of a disability will also be explored (2.2.5).

### 2.2.1 Defining and describing disability

It is estimated that about 5 to 12 percent of the South African population has some or other disability, according to the Integrated National Disability Strategy (1996). Disability is defined as “a lasting physical or mental impairment which significantly interferes with functioning in major areas of life, such as self-care, ambulation, communication, social intercourse, sexual expression, or ability to work inside the home or to engage in substantial gainful activity outside” (Corsini, 2002, p. 282). Disability, thus, refers to any condition that markedly affects important functions and activities (Bowe, 2000). The United Nations (Integrated National Disability Strategy, 1996) recommended a definition of disability where a person with a disability is described as having “functional limitations” (p.16).


A distinction is made between *handicap* and *disability*. A handicap is found in the environment, for barriers in the environment may handicap a person's performance. A person is not handicapped, but rather the environment may handicap a person with a disability, or any other person for that matter (Bowe, 2000). To extend on the distinction between disability and handicap, Hamilton (in Wright, 1960) defined disability as an impairment, physical or mental (medically defined), and a handicap as the result of a cumulative effect of multiple obstacles facing a person (more psycho-socially defined).

### 2.2.2 Disability and legislation

The United Nations adopted a World Programme of Action Concerning Disabled Persons during the UN Decade of Disabled persons (1983-1992), to promote, amongst other things, equal rights and opportunities for persons with disabilities (Integrated National Disability Strategy, 1996). In 1986, South Africa declared a National year for the Disabled and established an Interdepartmental Coordinating Committee for the Care of the Disabled (Integrated National Disability Strategy, 1996), which disbanded in 1991 after failure to implement proposed programmes for the disabled.

In 1993 the National Coordinating Committee on Disability (NCCD) was established, represented by non-governmental organisations (NGOs) and government. Since democracy in 1994, the South African national policies regarding persons with disabilities have been reformed and updated. Strategies regarding children with disabilities have in particular been revised, moving away from separate education to a more integrative approach (Philpott, 2004). Numerous NGOs have lobbied for the equal rights of persons with disabilities, specifically as a reaction to the previous government's failure to acknowledge and support disability service provision (Philpott, 2004). The first step towards liberation for persons with disabilities was the new South African Constitution and Bill of Rights, accepted in 1996 (Philpott, 2004). The Constitution guarantees fundamental rights to all, and specifically mentions equality and rights to persons with disabilities (McClain, 2002; Philpott, 2004).

The Integrated National Disability Strategy (INDS) is a South African governmental White Paper on disability services and orientation of the government to persons with disabilities (McClain, 2002; Philpott, 2004). This strategy, accepted in 1997, places emphasis on integration and inclusion of persons with disabilities in decision making, specifically on political and policy level. The INDS emphasises the capabilities of persons with disabilities (McClain, 2002), highlighting a shift in government from a deficits-based approach to a strengths and cooperational orientation. The INDS also recognises that disability is not necessarily *per se* responsible for the difficulties facing persons with disabilities, but that there are rather additional barriers that exclude them from society. The objectives of the INDS is mentioned in Philpott (2004):

- 
- disability issues should be integrated into government developmental strategies and policies;
  - there should be an integrated management system for disability service provision in all spheres of government;
  - capacity-building strategies must be developed to ensure proper implementation of the recommendations contained in the INDS;
  - public education should aim at reducing prejudices towards specific groups, for example persons with disabilities.

The Office on the Status of Disabled Persons (OSDP) was established to implement the strategies of the INDS. The OSDP should also work in conjunction with other NGOs and state departments to enhance the quality of life of persons with disabilities, through creating an environment that is disability-friendly.

It would seem that great progress, at least on policy level, has been made to integrate persons with disabilities into South African society. Philpott (2004), however, is careful to point out that disability may be a priority theoretically, but not yet in practice. Some of the reasons for a lack of practical interventions are:

- competition for limited resources by different care-giving organisations in South Africa;
- limited capacity of under-staffed welfare providers;
- low status of disability within different state departments;
- lack of coordination between state and other role players (NGOs etc.);
- lack of guidelines for implementation of policy;
- lack of information, both about the prevalence of disability and the needs of the disabled.



Thus, although it is a theoretical priority, much still remains to be done in order to truly influence the lives of persons with disabilities in a positive way.

Before one can elaborate on the lives of persons with disabilities, a clearer picture of the diverse causes of disability is necessary.

### 2.2.3 Causes of disabilities

Disabilities can be either acquired or congenital (Bowe, 2000). The following two sections (2.2.3.1 and 2.2.3.2) will distinguish between the two causes of disability.



Section 2.2.3 will only present the general causes of any disability, whereas section 2.2.5 will discuss the causes of blindness in particular.

### 2.2.3.1 Congenital disability

Congenital disabilities are present from birth, but may be genetic or acquired:

- Prenatally (before birth)
- Peri-natally (during birth)
- Post-natally (immediately after birth)

Mental impairments provide a useful framework from which to illustrate when congenital disabilities occur. Hodapp (1998) described genetic defects (such as found in Down syndrome), thalidomide exposure, rubella and accidents in the uterus as prenatal causes of mental impairment. Peri-natal causes of mental impairment include prematurity and anoxia at birth. Head trauma and meningitis are post-natal causes of mental impairment. Thus, a congenital disability is one that occurs at and around birth, irrespective of its cause.

### 2.2.3.2 Acquired disability

Acquired disabilities have many causes, and describe any disability acquired at any time after birth, be it in childhood, adolescence, adulthood or old age.

The INDS listed some of the causes of acquired disability (Integrated National Disability Strategy, 1996). This list will be somewhat expanded by the current author:

- War
- Violence and trauma
- Poverty and inadequate nutrition
- Epidemics and illness
- Absence of accurate knowledge about disability (cause, treatment and prevention)
- Inadequate channelling of resources
- Weaknesses and ignorance in service provision
- Imprudent use of medication and faulty treatment at times of disaster
- Any other indirect or direct factors associated with health risks

An important factor involved in acquired disabilities is age at onset. The age of the person when he/she acquired the disability has relevance to many service providers, for it can affect a person's education, employment and lifestyle (Bowe, 2000). A simple example given by Bowe (2000) of the importance of age at the onset of disability, is the language capabilities of persons with deafness. Congenital deafness has a serious effect on language acquisition, but deafness later in life has little effect on language development.

## 2.2.4 Types of disabilities

The different types of disabilities may be divided into two general categories. The first category involves persons with mental impairments (the term *mental retardation* is no longer used to describe this phenomenon, because of its derogative use). The second category involves persons with physical disabilities, as well as persons with either hearing or vision loss. These categories will be discussed in 2.2.4.1 and 2.2.4.2 respectively.

### 2.2.4.1 Mental Impairment

Hodapp (1998) discussed the two-group approach to mental impairment:

1. The first type of mental impairment has an organic cause, and occurs prenatally (e.g. genetically), peri-natally (e.g. premature birth) and post-natally (e.g. meningitis).
2. The second type of mental impairment has no obvious organic cause, with individuals having normal health, appearance and development, but lower levels of intelligence. The individuals usually come from lower socio-economic backgrounds and have a familial history of low intelligence. Both environmental and genetic factors seem to contribute to this type of mental impairment.

This short discussion of mental impairments is sufficient for the purposes of the current study. A more in-depth discussion of the second category of disabilities, namely physical disabilities, will be presented below.

#### 2.2.4.2 Physical disabilities

According to Bowe (2000), physical disabilities are either neurological or musculoskeletal in nature. A neurological disability involves the central nervous system, and there is generally an interference with the transmission of nerve impulses. Examples of neurological conditions are:

- **Multiple sclerosis (MS):** the condition where the body's immune system regards the myelin sheathing surrounding the nerve cell fibres in the brain, spinal cord and optic nerve as foreign (Bowe, 2000). The immune system thus attacks the sheathing, and nerve signals are interrupted or blocked. Bowe (2000) describes MS as the most unpredictable of all the neurological disabilities. Some of the symptoms are blurred vision, fatigue, pins-and-needles sensations and spasticity.
- **Cerebral Palsy:** a disease that is caused due to a lesion of the central nervous system. The lesion is incurred early in life, be it pre-, peri- or post-natally. This condition causes motor dysfunction, and frequently also sensory, cognitive and emotional disturbances (Lindemann, 1981). Cerebral palsy always results in motor difficulties involving the legs, arms, or one side of the body (Hodapp, 1998).
- **Spinal cord injury:** a rather self-explanatory condition, whereby the spinal cord sustains an injury resulting in permanent paraplegia (involving the legs), quadriplegia (motor impairment in all four limbs) (Hodapp, 1998; Lindemann, 1981) or diplegia (paralysis of any body part on both sides of the body, or like parts on opposite sides of the body) (Mosby's Medical, Nursing & Allied Health

Dictionary, 2002). Spinal cord injury usually has a traumatic cause (Lindemann, 1981).

- **Spina Bifida:** a condition where the spinal column does not completely close during fetal development, and hereditary in nature (Hodapp, 1998). Lindemann and Boyd (1981) describe the condition as a congenital birth defect, where there is a non-fusion of the dorsal arches of the spine. Muscle weakness/absence of the trunk and lower limbs, hip dislocation, clubfoot and curvature of the spine are all resultant complications due to this condition (Hodapp, 1998). **Hydrocephalus** and **myelomeningocele** are conditions often associated with spina bifida, according to Hodapp (1998). Hydrocephalus describes a build-up of fluid surrounding the brain, and thus increased pressure on the brain. When the spinal cord protrudes in its membrane sac from a new-born's back, myelomeningocele is diagnosed (Hodapp, 1998).
- **Epilepsy:** The word means "seizure" in Greek, and when the source of the seizure is within the brain itself, the condition is classified as epilepsy (Terdal, 1981). A variety of stimuli can cause abnormal cortical discharge, resulting in a seizure. The seizure is characterised by abrupt altered motor and sensory control or interrupted autonomic functions of the body (Terdal, 1981).

A musculoskeletal impairment specifically involves the muscles or skeleton, and renders the affected parts ineffective. Examples of musculo-skeletal impairments are (Bowe, 2000):

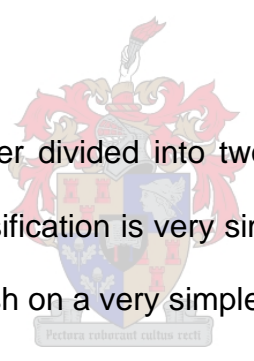
- **Muscular dystrophy:** a group of about 40 congenital disabilities, characterised by progressive muscle weakness and degeneration of muscle tissue.

- **Dwarfism:** the condition where an adult (male or female) only reaches the height of 1.45 meters (approximately 4 feet, 10 inches). Dwarfism mostly has a genetic cause. Persons with dwarfism usually have normal intelligence, but may have more prevalent health problems, such as ear infections and a curved spine.
- **Arthritis:** an encompassing term that describes a variety of conditions caused by the immune system attacking internal body sites and processes. The condition is painful and affects joints, cartilage and bones. *Arthritis* literally means “inflammation of the joint”.
- **Amputations:** the surgical removal of all or part of a limb. The procedure is carried out either because of disease or an accident, which could have life-threatening consequences if the limb is not removed.

Bowe (2000) classified vision and hearing loss as secondary conditions that often accompany physical disabilities. They can, nevertheless, occur as the primary physical disability. Various degrees of impairment is found in hearing and vision loss (Lindemann, 1981). Minor visual anomalies can be corrected by wearing corrective lenses or contact lenses, and have very little impact on a person’s functioning. Complete blindness, however, will have a significant impact on functioning. The same reasoning goes for hearing loss, with various degrees of loss having various influences on quality of life and functioning. In the following sections, hearing loss (section 2.2.4.3) and visual impairment (section 2.2.4.4) will be discussed under separate headings.

### 2.2.4.3 Hearing loss

When a person is unable to hear speech, or have a hearing loss of 70 decibels, they are said to have a hearing impairment (Hodapp, 1998). Hearing impairment results from either faulty conduction in mostly the middle ear, or through nerve damage, referred to as a sensori-neural cause (Bowe, 2000). Persons with hearing impairments are classified into two categories: hard of hearing and deaf (Lindemann, 1981). Persons who still have some functional hearing (with or without a hearing aid), even though defective, are hard of hearing. Persons with deafness have no functional hearing, and cannot use their sense of sound for any ordinary purposes in life.

A faint watermark of a university crest is centered in the background of the text. The crest features a shield with various symbols, topped with a crown and a figure holding a staff. Below the shield is a banner with the Latin motto "Pectora roburant ciliis cecis".

Persons with deafness are further divided into two groups, namely pre- and post-lingually deaf. Although this classification is very simplistic, Lindemann (1981) points out that it does serve to distinguish on a very simple level between the different times of onset of deafness. It should, however, be noted that persons with hearing impairments are not a homogeneous group (Lindemann, 1981), and various social, physical and demographic factors should be considered when investigating hearing impairment and its impact on individuals.

### 2.2.4.4 Visual impairment

Vision loss also presents differing degrees of impairment to individuals. Vision is measured on the distance that a person can correctly identify symbols/letters on a chart (Bowe, 2000). In the United States, persons who have 20/20 vision, or normal

vision, can correctly identify the symbols/letters on a Snellen chart when standing 20 feet away from the chart. If a person with normal vision can correctly identify the symbols on a chart from 70 feet away, a person with low vision can only correctly identify the symbols on a chart standing 20 feet away, referred to a 20/70 vision. Blindness is only classified when a person has 20/200 vision or worse (Bowe, 2000).

Webster and Roe (1998) describe vision in terms of vision acuity, or the ability to observe and distinguish detail. They also refer to the use of the Snellen chart to measure visual acuity in the United Kingdom, which uses a different scale to describe differences in vision. Normal vision, according to this scale, is 6/6 vision. Visual acuity is tested separately for each eye. Kluever (personal communication, April 29, 2005) from the South African National Council for the Blind provided the South African definition for visual impairment and blindness. This definition was adopted from the World Health Organisation and classifies vision into four categories (guide dog owners usually represent category three and four):

1. "Normal": 6/6 to 6/18 on the Snellen Chart with available correction in the better eye.
2. "Visual impairment": less than 6/18 to 6/60 with available correction in the better eye.
3. "Severe visual impairment": less than 6/60 to 3/60 with available correction in the better eye.
4. "Blind": less than 3/60 vision on the Snellen Chart or a visual field constricted to less than 10 degrees around the central fixation in the better eye.



For the purposes of this discussion, however, the implications of blindness on everyday functioning and the degree of impairment it may cause are more important than the actual physiological definition of vision loss.

### 2.2.5 Blindness as a disability

The causes of blindness, as well as developmental and social implications of vision loss will be discussed in the following sections.

#### 2.2.5.1 Causes of blindness

Sorsby (in Lindemann, 1981) classified the causes of blindness into four categories:

1. congenital and prenatal influences, either through genetic consequence or maternal infection;
2. systemic diseases, including vascular disease, tumours and diabetes;
3. optic atrophy;
4. glaucoma and cataracts.

Sorsby's (in Lindemann, 1981) first category of congenital and prenatal causes of blindness includes the following:

- **Retinopathy of pre-maturity (ROP):** ROP is associated with excessive oxygen intake in pre-mature babies placed in an incubator after birth (Bowe, 2000; Webster & Roe, 1998). ROP is the most common known cause of blindness in

infants, although many of the causes of vision loss in children are unknown (Bowe, 2000).

- **Hypoxia** is another common peri-natal cause of congenital blindness (Webster & Roe, 1998) and describes below-normal levels of oxygen in arterial blood or tissue (Hensyl, 1990).
- **Albinism** is hereditary in nature (Webster & Roe, 1998). Albinism is a condition where there is an absence of an enzyme called tyrosine, which helps produce melanin (important for pigment formation). This condition results in incomplete development of the macula, which in turn negatively affects visual acuity.
- The causes of disorders of the iris are generally congenital or prenatal, according to Webster and Roe (1998). **Aniridia** (total absence of the lens) and **Coloboma** (absence of a section of the iris) are examples of disorders of the iris.

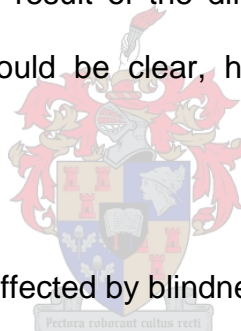
Systemic diseases can also cause blindness, and represents Sorsby's (in Lindemann, 1981) second category. **Vascular disease, tumours** and **diabetes** (a condition referred to as diabetic retinopathy) can result in blindness. Accidents can also contribute to or cause vision loss. Blurring of vision usually occurs when there is **scarring on the cornea**, as might happen in an accident.

Sorsby's (in Lindemann, 1981) third category of causes of blindness is **Optic atrophy**. A variety of disorders, and frequently tumours in the visual pathways, cause optic atrophy. This is a condition that affects the nerve fibres. These nerve fibres are responsible for transmitting information from the eye to the brain (Webster & Roe, 1998).

The fourth category includes cataracts and glaucoma. **Cataracts** refer to the condition where the lens of the eye becomes opaque, and thus prevents light from passing through to the retina. When damage to the eye structures occur due to an increased pressure in the eye, the condition is known as **glaucoma**.

Disorders of the retina, such as **retinal detachment** and **macular degeneration**, have various causes ranging from genetics to age degeneration and cannot be clearly placed within Sorsby's (in Lindemann, 1981) specific categories.

There are still a myriad of other eye conditions and varied causes of vision loss. Blindness is not always the end result of the different eye disorders, and varying degrees of severity exist. It should be clear, however, that blindness has both genetic and acquired causes.



#### 2.2.5.2 Developmental aspects affected by blindness

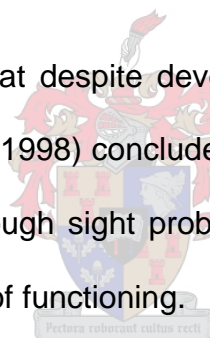
The psychological development of a child born with blindness is “fraught with special danger” (Rusalem, 1972, p.58). The dangers cited by Rusalem (1972) include negative parental attitudes toward blindness, limited learning opportunities, lack of stimulation and being treated differently from able-bodied peers. Although Rusalem (1972) may have painted a rather grim picture, there seems to be consensus that congenital blindness likely causes significant developmental delays (Bowe, 2000).

A blind child's early development and learning can be hampered in several ways:

- The development of **autonomy** may be negatively affected by blindness. The development of autonomy occurs in early childhood and is dependent on what Als, Tromich and Brazelton (1980) call affective reciprocity between the child and caring parent. This is a labour intensive process for the parent, for the parent should teach the blind child to go to the environment, rather than passively waiting for the environment to stimulate him/her. If the parent is too scared to allow the child to explore his environment due to possible dangers, "experiential deprivation" (Bowe, 2000, p.257) occurs, which hampers development.
- **Muscular development** may also be delayed, for the blind child is avoiding possible unseen dangers (Burlingham, 1979). Burlingham (1979) also noted that blind children have much **difficulty in gauging space and distance**.
- Blind children have delays in **motor skill development**. They exhibit more passivity, more touching and fewer back-and-forth vocalisations with adults in comparison to seeing children (Hodapp, 1998).
- Bigelow (1987) found that blind children's **first words differ** from seeing children's. Blind children's first words tend to describe their actions, such as "up", whereas seeing children tend to first say personal-social words, such as "no" and "thank you". Reynell (in Lindemann, 1981), however, found that blind children experience only limited delays in language acquisition. Hodapp (1998) also concluded that blind children often have different meanings for vision words, use more formulaic speech and that their first words and grammar may possibly be affected.

- Blind children are forced to **acquire substitute versions of mental images**, for they are unable to form mental images firsthand (Bowe, 2000). Hodapp (1998) also mentioned that **object permanence** and **spatial abilities** might be negatively affected by blindness. **Concepts of concrete objects** took almost a year longer to develop in blind children, according to Reynell (1978).
- **Social development** occurs throughout the life span, and visual impairment has certain consequences on social interaction. Babies and persons with visual impairments may appear unresponsive in social interactions, due to a lack of eye contact (Preisler, in Webster & Roe, 1998). This may inhibit able-bodied persons to interact with blind children, and thus the child's social development is hampered.

It should, however, be noted, that despite developmental challenges presented to children with blindness, Hodapp (1998) concluded that sight does not appear to be a necessity for development. Although sight problems may delay development, blind persons will develop in all areas of functioning.



Several studies on young people with a disability/blindness investigated **self-concept development**. Wright (1960) explained that self-concept is influenced by self-evaluation of one's:

- notion of one's body (both its strengths and limits);
- interests and abilities;
- likes and dislikes;
- characteristics that define the self (such as irritable or easy-going);
- effect on other people (such as likeable or strange).

Studies on the development of self-concept in children with visual impairment yielded the following:

- Adolescents with visual impairment have a lower self-concept in comparison with their sighted peers. Beaty (1991) found significant differences in self-concept between sighted and blind adolescents, using the Tennessee Self Concept Scale. The global scores of the visually impaired children were lower than the control group of seeing children, perhaps indicating a negative effect between blindness and self-concept.
- Students with disabilities in integrated schools (the inclusion in regular mainstream schools) do not differ significantly from their able-bodied peers. Students with disabilities in special schools had lower self-concept scores than students from integrated schools. This conclusion was based on the findings of Mrug and Wallander (2002) from a sample of Czech and American students. The Personality Assessment Questionnaire was the main measurement tool, which consists of seven scales. Significant between-group differences between the integration- and separate-schooling students, for both countries, were found on three of the scales: Aggression/Instability, Negative self-perceptions and Negative worldview. The integrated students reported more positive attitudes than special schooled students did and the integrated students did not differ in terms of self-concept when compared to able-bodied peers. The authors concluded that their findings supported integrated schooling, in other words, students with disabilities should be included in mainstream schooling with able-bodied students. The most positive self-concept scores were obtained for students living with their families and attending integrated schools.

In the following section, several aspects central to the lives of persons with disabilities, specifically persons with visual impairment, will be discussed. These may shed light on why some of the above-mentioned literature found that the disabled individual has a more negative self-concept than his/her able-bodied peers.

### 2.2.5.3 The experience of living with blindness

The experience of living with blindness will be discussed within the following broad themes: physical experiences; experience of being different; need for social interaction and social stigma; independence versus dependence; family life and problems in the work setting.

#### 2.2.5.3.1 Physical experiences



Imrie (1996) reports on a survey held in 1991 in the USA, which identified the “top ten areas of difficulty” confronting persons with disability: mobility, public transportation, bathrooms, steps/street curbs, funding/finance, getting up from sitting position, fatigue, frustration/feeling overwhelmed, travelling and having to depend on others. By far the majority of difficulties in the above list (mobility, transport, travelling, streets and so forth) have to do with physical and environmental difficulties that persons with disabilities have to face in everyday life. Fatigue (number 7 on the list) can also be a consequence of environmental strain which is put on the person. Rusalem (1972) remarks how constant attention to non-visual stimuli could be exhaustive.

Environmental barriers prevent persons with disabilities from freedom of movement and access to information, according to the Integrated National Disability Strategy (1996). According to the Integrated National Disability Strategy (1996), the barriers in the social environment that specifically influence persons with blindness in South Africa are the following:

- There is a lack of accessible and safe public transport.
- Public services are inaccessible to particularly the visually impaired and persons who are deaf. Places such as museums, libraries, clinics and media post particular barriers.
- Buildings, nature trails, urban and rural infrastructures were not designed to support persons with disabilities and planning professionals do not incorporate accessible environment planning in their designs.
- Supportive technology, such as Braille and specific computer programmes, is expensive or limited to computer/Braille literate consumers only and thus inaccessible to most.

There are still serious adjustments needed, on national and municipal level, to ensure an accessible environment for persons with disabilities.

#### 2.2.5.3.2 Experience of being different

Wright (1960) emphasised certain events in everyday relationships that may aggrieve or gratify a person with a disability, such as curiosity about the disability, staring, offers of help, sympathy, devaluing pity, being treated differently, social



inclusion/exclusion and being taunted. These everyday experiences could compound the unwanted feeling of being different.

Wright (1960) went on to say that a person's self-regard, the situational context and the wish to be/appear well-adjusted all converge to form the reaction of a person with a disability. It is impossible to predict any one person's reaction, and care should be taken not to view persons with a disability as a homogeneous group. However, what is central in Wright's discussion, is that the wish of many persons with disabilities is to appear well-adjusted.

The experience of being physically different also has implications for body image and self-evaluation. King, Schultz, Steel and Gilpin (1993) conducted a study on general physical disability and its influence on self-concept and self-evaluation. Females with physical disabilities had lower perceived social acceptance, athletic competence and romantic appeal compared to able-bodied peers. Males with physical disabilities had lower perceived scholastic competence, athletic competence and romantic appeal. The adolescents with disabilities, both male and female, were significantly less independent and less persistent than their able-bodied peers. Davies (1991) also emphasised that residential, segregated care of the disabled compounded their psychological problems of being "different".

#### 2.2.5.3.3 Independence versus dependence

Lindemann (1981) identified another conflict created by blindness, namely the desire for independence together with a realistic need for assistance/dependence in certain

situations. A qualitative study by Steffens and Bergler (1998) also revealed that dependence on others, nervous strain, social problems and communication difficulties are the primary stress factors of persons with visual impairment. It is clear that persons with visual impairments face a myriad of challenges in able-bodied orientated environments. A later section will discuss enabling and resilience factors in persons with blindness, and ways in which some overcome, and sometimes even thrive, despite the challenges of living with a disability.

#### 2.2.5.3.4 Social interactions and stigma

Vision contributes to the spontaneity, ease and frequency of social communication (Webster & Roe, 1998), and may disadvantage the blind individual in social settings. Social integration is also hampered by “mannerisms”, which refers to odd behaviours that interfere with the blind person’s social interactions and attention. Examples of “mannerisms” that persons with blindness use are rocking, eye-poking, head shaking, bouncing, clapping or handshaking (Webster & Roe, 1998).

Persons with blindness are also subject to social stigma and discrimination. The Integrated National Disability Strategy (1996) stated that all persons with disabilities face discrimination. Davies (1991), in a South African sample, found that persons with disabilities experienced more anxiety and was more socially withdrawn/isolated than their able-bodied controls. The speculation was also that the negative social consequences of disablement places strain on the person’s adjustment to disability. French (in Davies, 1991) investigated the ways in which assumptions about the disabled have influenced the reactions of the able-bodied society towards persons

with disability. The four assumptions about the care of the disabled are, according to French (in Davies, 1991):

- that any physical disability requires major psychological adjustments and treatment;
- that persons with physical disability strive for normality or able-bodiedness;
- that the individual with a physical disability must accept the role of being disabled, and must subsequently be willing to accept their minority status;
- that all operational decisions concerning the disabled should be taken by professional caregivers and accepted by the person with a disability.

French (in Davies, 1991) concluded by emphasising the disabling effect of the above assumptions, and that it places persons with disabilities within a minority group with very little involvement or control over their lives. Wright (1960) also supports the notion that the disabled find themselves in a minority, inferior status position in society. This disempowerment may cause considerable distress in the individual. There is a definite need amongst persons with blindness for social integration.

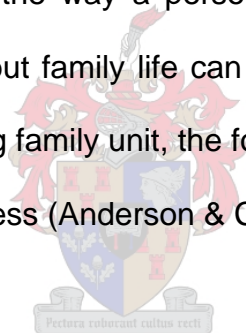
#### 2.2.5.3.5 Family life

Family life of the person with visual impairment is often put under great strain. Rusalem (1972, p.48) describes the family unit as a “delicate balance of interpersonal relationships”, and cites family insecurity as a possible consequence of blindness. Feelings of insecurity and tension between the members of the family

may result in the self-blame amongst the members, especially the blind person. This may negatively affect healthy social development and support within the family unit.

Other findings also support the notion that the blindness of a member can adversely affect family life. Beaty (1991) found that children with blindness have more interpersonal problems with family members than able-bodied peers. The presence of a disability can also lead to an abnormal family environment (Carver & Rodda, 1978). Carver and Rodda (1978) cited that denial of disability, over-protection, guilt and rejection of the disabled child are characteristic parental responses to disability.

Much research has focused on the way a person with a disability can negatively influence aspects of family life, but family life can also provide great support to the individual. In a healthy functioning family unit, the following resources are available in support of the person with blindness (Anderson & Clarke, 1982):

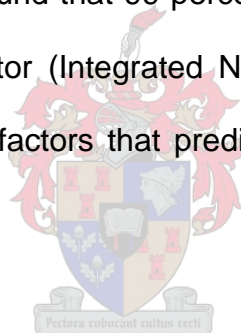


1. Siblings can provide support and the person with a disability can confide in them.
2. Parents can provide emotional and financial support.

As with any child, a strong family unit can provide a springboard for healthy social development and provide emotional encouragement. The family unit has enormous potential to positively influence the person with blindness.

### 2.2.5.3.6 Problems in the work settings

This discussion on the life of a person with blindness will be concluded with a short description of their experiences in the work setting. Persons with vision impairment and people who are able-bodied view work as equally important, according to findings by Gillies, Knight and Baglioni (1998). Persons with blindness were, however, less satisfied with their career development opportunities and the training they received, compared to their non-disabled peers. Gillies et al. (1998) also emphasise the high rates of unemployment of persons with disabilities, a view supported by South African research in 1990 (Integrated National Disability Strategy, 1996). South African research found that 99 percent of people with disabilities were not employed in the formal sector (Integrated National Disability Strategy, 1996). Gillies et al. (1998) identify two factors that predispose persons with disabilities to employment disadvantage:



1. attitude toward people with disabilities
2. characteristics of the disability itself.

Gillies et al. (1998) conclude that inadequate career development and limited training opportunities seem to limit persons with disabilities, and that service provision improvements are needed to establish positive change of attitude towards persons with disabilities in the work place. A study by Wolffe, Roessler and Schriener (1992) also confirm that persons with blindness are concerned with inadequate job search strategies, have limited information on career opportunities and have little assistance in financing. It should, however, be noted that Wolffe et al. (1992) did use

convenience sampling, which threatens the validity of their findings. It would seem that persons with blindness once again face contextual barriers beyond their physical disability alone, also in the workplace.

Although this section has focused mostly on the challenges and negative aspects of life of persons with disabilities, there are also positive growth aspects which may be considered. Section 2.5 specifically addresses psychological well-being and the empowerment of persons with disabilities. This follows after an in-depth discussion of literature on psychological well-being within the area of positive psychology.

## 2.3 Human-animal interaction

The interaction between humans and animals will be discussed below with reference to the definition and description of this interaction (2.3.1), the development of the science of human-animal interaction (2.3.2), the different types of interactions (2.3.3), the theoretical basis for this interaction (2.3.4), the advantages of the interaction (2.3.5), the risks associated with the interaction (2.3.6) and ethical considerations (2.3.7).

### 2.3.1 Definition and description

The field of human-animal interaction incorporates a broad spectrum of disciplines, and includes all interactions between humans and animals (Odendaal, n.d.). The interactions between human and animal fall on a continuum from no interaction, negative interaction to positive interaction (Odendaal, n.d.).

Van Heerden (2001) defines human-animal interaction as a dynamic process, where there is reciprocal involvement that results in need fulfilment in both human and animal. She describes the scientific field of human-animal interaction as multi-disciplinary, investigating dynamic interactions between humans and pets within a specific system and with a specific goal in mind. What is added in Van Heerden's definition of this field, is the specific focus on human-*pet* interactions, due to the strong bond often found between humans and their pets. Baenninger (1995) defines a pet or domestic animal as an animal whose breeding, rearing and care are mainly controlled by humans. The term *companion animal* are also used to emphasise the social and emotional benefits found in the human-pet relationship, according to Serpell and Paul (in Van Heerden, 2001). The current study will also focus on the relationship between humans and pet/companion animals, but will refer to examples other than pets as well.



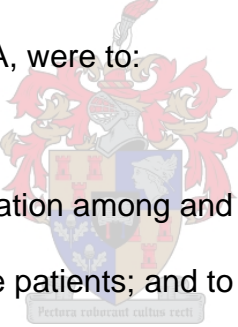
For the purposes of this study, the human-animal interaction will be defined as any reciprocal relationship found between humans and animals. A relationship can be described as a mutual connection that exists between two parties (Collins English Dictionary, 2003).

### 2.3.2 Development of the science of human-animal interaction

Odendaal (n.d.) describes Konrad Lorenz as the father of the field of human-animal interaction. Lorenz was honoured with the Nobel Prize for his two books on the subject, namely *King Solomon's Ring: a New Light on Animal Ways* and *Man Meets Dog*, written in the 1950s (Encyclopaedia Britannica, 1997).

Levinson, a psychiatrist based in New York, pioneered the use of animals in therapeutic settings (Odendaal, n.d., 2002; Serpell, 1996). Levinson published numerous scientific articles in the 1960s, specifically on his work with children with communication problems, and the therapeutic value that his dog had on them. His first book, *The dog as co-therapist*, was published in 1962. Subsequent books also expanded on pet-facilitated therapy, especially in treating children with a variety of behavioural disorders. Levinson used the animal, in this case his own dog, to put the child at ease and to break down psychological barriers during therapy.

The seventies also saw the coining of the term *pet-facilitated psychotherapy*, by Samuel and Elizabeth Corson (in Odendaal, 2002). The aims of their therapy, set in a psychiatric hospital in Ohio, USA, were to:

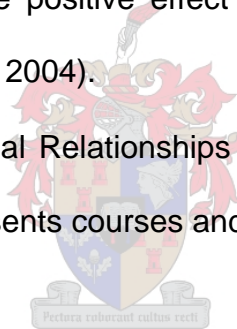
- 
- improve non-verbal communication among and with patients;
  - stimulate self-confidence in the patients; and to
  - use the animals to improve reality orientation.

From the seventies onwards, the field of human-animal interaction drew ever more attention, as will become clear in the following discussions of research on the effects of animals on humans, and even some research on the effect of human-animal interaction on the animal (Odendaal, 2004).

Several international organisations have been established concerning the topic of human-animal interaction. The following are some organisations which are readily accessible on the internet and which focus on the field of human-animal interaction:



- International Society for Anthrozoology (ISAZ), established in 1991 – focusing on international research corroboration
- Human-animal interaction group (HAIG), a South African organisation established in 1984 – contact group for researchers and practitioners in the field and organises seminars
- Delta Society, established in 1981 in the USA – primary aim of enhancing quality of life through contact with companion animals
- Centre for Animals in Society, School of Veterinary Medicine, University of Pennsylvania – focusing on the development of courses in the field
- People, Animals, Nature, Inc. (PAN) based in Princeton, USA – aiming to distribute and educate on the positive effect of animals and nature on health (People, Animals, Nature, Inc, 2004).
- Center to Study Human-Animal Relationships and Environments (CENSHARE), University of Minnesota – presents courses and supports research on the human-animal interaction
- Tufts University, Center for Animals and Public Policy – academic institute for study on the topic of animals in society
- The Center for Human-Animal Interaction, Virginia Commonwealth University – promoting interdisciplinary, inter-institutional research, clinical practice and educational activities.



The lists of organisations are vast. Numerous organisations for human-animal interaction research, applications, education and corroboration exist world-wide. There are also several journals on the subject, such as *Anthrozoos*, *Journal of Applied Animal Welfare Science*, *Society & Animals* and *Applied Animal Behaviour*

*Science*. Several useful and informative books have also been written on the subject, one of which was edited by Fine (2000), namely the *Handbook on Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice*.

Odendaal and Van Heerden have greatly contributed to the development of the field of human-animal interaction in South Africa. Odendaal have focused on the therapeutic value of animals and their use in animal-assisted therapy (Odendaal, n.d., 2002, 2004). He also delved into personality theories in an attempt to explain the human-animal interaction (Odendaal, n.d; 2002). A brief summary of Odendaal's explanation of the human-animal bond within the different personality theories will be related in section 2.3.4.2.

Van Heerden focused on defining and developing the field of human-animal interaction, and strove to establish it as an independent field in South Africa. Van Heerden (2001) described the field of human-animal interaction as multidisciplinary, and identified 23 disciplines, including psychology, that are involved. The disciplines that are involved in the field of human-animal interaction fall into four categories (Van Heerden, 2001):

- disciplines involved in the fundamental principles of the human-animal bond, such as Philosophy, Anthropology and Sociology;
- disciplines directly involved in the implementation of human-animal interaction programmes (executive role), such as Social work, Psychology, Physiotherapy and Occupational therapy;

- disciplines indirectly involved in the implementation of programmes, on a consultative basis (advisory role), such as Districts-planning, Architecture and Public Health;
- disciplines involved in the enhancement of a positive orientation towards the human-animal bond (supporting role), such as Journalism and formal education.

In order for an independent field of human-animal interaction to emerge in South Africa, a multidisciplinary, systems approach must be adopted (Van Heerden, 2001). The types of interactions between humans and animals will also emphasise the multidisciplinary nature of this field. The next section will relate the different types of interactions found between animals and humans.

### 2.3.3 Types of interactions



The following section will discuss contact, ownership, animal-assisted therapy and service animals as different types of human-animal interactions.

#### 2.3.3.1 Contact

Hunting and gathering was the only means of obtaining food and raw materials for human consumption until around 12000 years ago (Serpell, 1996). At the end of the Ice Age, a new social order began to emerge, and domestication of plants and animals began. According to Serpell (1996), the first wild animal that made the transition to domestication was the wolf, the ancestor of the dog, although Odendaal (2003) speculates that it is possible that the dog developed separately from the other

Canis species (such as the wolf). Davies and Valla (in Odendaal, 2003) found that the domestication of dogs happened about 12000 years ago. Odendaal (2003) summarised the development of the domesticated dog (*Canis familiaris*) into four proposed stages:

- dogs scavenged for food around human settlements;
- humans became tolerant of dogs, due to their indirect advantages, such as barking at threats;
- ownership of dogs, including care and acceptance as companions, by humans;
- selective breeding.

It would seem that dogs almost domesticated themselves, and were subsequently tolerated by humans for the advantages they brought, according to Odendaal (2003).

Dogs are of course not the only animals that were domesticated through constant contact. Goats, sheep, cattle, pigs, ducks, horses and cats were also domesticated, but this only began about a 1000 years after the dog (Odendaal, 2003).

There are also still wild animals in the world. Due to the very limited interaction between humans and those wild animals, except for wildlife management purposes and some tamed wild/zoo animals, they have limited reciprocity with humans. A discussion of the influence of wild animals on humans, although of ecological value, is of little importance for the current study. The rest of the discussion of human-animal interaction will focus only on domesticated animals.

### 2.3.3.2 Ownership

Odendaal (2003) stresses that ownership was the third stage of domestication.

Responsible companion animal ownership entails the following (Odendaal, 2003):

- Proper selection of the right animal for their future environment.
- Socialisation with people, other animals and diverse environment, especially when an animal is still young.
- Training, specifically in the case of dogs, is important for establishing routines and hierarchy.
- Care of the animal entails basic care, such as proper nutrition, housing and so forth, as well as special care, such as veterinary prevention of parasites and the treatment of illness.
- Good neighbourliness, within municipal regulations, is essential.



The above ownership guidelines represent the ideal. Unfortunately, good ownership is not always the reality. Animal abuse, neglect (both physically and emotionally), indifference to municipal regulations, poor training and improper selection are still widespread, as is evident in the vast amounts of animals in animal shelters and the need for organisations such as the Society for the Prevention of Cruelty to Animals (SPCA).

Pet ownership, even in its ideal form, is criticised by some as being a substitute for human-human interactions, as explained by Serpell (1996). He relates numerous theories of pet ownership, some of which include views that pets are merely

substitutes for “normal” human relationships. The relationship between owner and pet has also been described as one of playful domination, and as being sexual in nature (in its most extreme form resulting in bestiality), according to Serpell (1996).

Despite all the different theories damning pet ownership, Serpell (1996) concludes that the majority of pet owners do not differ substantially from non-owners, nor do they, generally, have less companionship with other humans. He admits that there is a certain amount of sentimentality involved in pet-keeping, but rejects the notion that this should be any reason to ridicule pet ownership.

### 2.3.3.3 Planned interventions

A human-animal programme refers to any activity where the human-pet interaction is the main focus and by means of which a specific goal is defined for the interaction (Van Heerden, 2001). Disciplines that use animals for psychological support are (Odendaal, 2002):

- Paramedical disciplines, such as physiotherapists and occupational therapists;
- Social work, specifically for social support in a variety of settings, as well as guide dogs for the blind and service dogs for persons with physical disabilities;
- Education, where animals are used to enhance learning (where animals are used as models of responsibility, loyalty etc.);
- Psychotherapy uses animals in a goal-directed manner, focusing on specific psychological or social outcomes, according to Brickel (1986). Brickel (1986)

emphasises the ability of animals to elicit a response from a person, which could be capitalised upon by the therapist.

The planned interventions are based on the notion that the human-animal interaction has beneficiary consequences. The following sections will pay more attention to animal-assisted therapy and service animals.

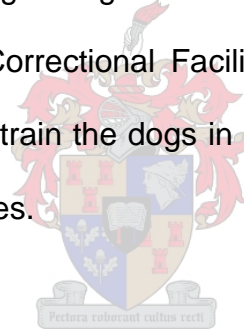
#### 2.3.3.3.1 Animal assisted therapy (AAV vs AAT)

Animal/Pet-Assisted Therapy (AAT/PAT) or Animal-Assisted Visitation (AAV) has gained widespread support over the years as a means of facilitating therapy in human environments (Connor, 2001). AAT uses specifically trained therapy animals for “long-term goals related to the patient’s physical or cognitive functioning” (Miller & Connor, 2000, p. 65). Connor (2001, p.20) describes AAT as a “scheduled intervention” carried out by a skilled practitioner, usually on a one-to-one basis with a patient. AAV is a short-term approach (applied individually or in a group setting), and is designed to improve the participant’s “well-being and reduce loneliness” (Connor, 2001, p. 21; Miller & Connor, 2000).

Four main programme areas have developed in AAT (Beck, 2000):

1. **Institutional programmes** are found in a wide range of settings, from hospital settings for medically ill adults, to educational environments for younger people. Older individuals in nursing homes have also gained from institutional programmes, as have persons in correctional facilities. Correctional facilities have

had rehabilitative success with inmates that provide care for animals. The animals used in prisons are varied and include mice, guinea pigs, birds, fish, horses, cats, dogs and farm animals (Lai, 1998). Some of the countries that employ prison pet programmes are Canada, USA, England, Scotland, Australia and South Africa (Lai, 1998). According to Lai (1998), the prison pet programmes improved inmate behaviour, self-esteem, discipline, cooperation and respect amongst participants. Several examples of prison pet programmes exist (Dog-play, n.d.). The Prison Pet Partnership Program in Washington State Correctional Center for women, is a programme where dogs are trained to assist persons with disabilities. The Puppies Behind Bars programme in New York State's Bedford Hills Correctional Facility assigns dogs to inmates for guide dog training. Project Pooch at MacLaren Youth Correctional Facility in Oregon receives dogs from animal shelters, and inmates train the dogs in basic obedience in preparation for placement in permanent homes.



Companion Animal programmes have also been established in the South African Correctional Services (Lai, 1998). *Animals For Fun!* (K. Kilfoil-Gray, personal communication, February 16, 2004) is an example of a canine programme at Pollsmoor prison in Cape Town. Selected female inmates are taught the basics of dog training, both to provide social/emotional stimulation and future career possibilities.

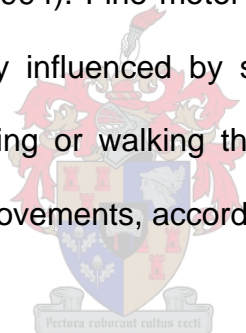
2. **Non-institutional programme for the elderly:** for older persons living outside an institutional setting, animals have also been employed to offer companionship and to be a catalyst for socialisation with family and friends.



3. **Service animals** are employed to help persons with disabilities. Dogs are mostly used as service animals, for they are very trainable and social. There are different types of service animals, such as guide dogs for the blind, hearing aid dogs for persons with hearing impairment, wheelchair-assistant dogs for persons with physical disabilities confined to a wheelchair and seizure-alert dogs.
  
4. **Equestrian programmes:** therapeutic horse-riding activities, such as vaulting and riding, assist with psychotherapeutic treatment of persons with physical disabilities, including cerebral palsied children. Therapeutic riding has been shown to improve self-confidence and quality of life, as well as motor functioning. Riding therapy, in which disabled children participate in horse riding activities, is a form of physical therapy, but with possible psychosocial advantages. Stuart (1999) investigated the effects of riding therapy on several cerebral palsied children in South Africa. Although her quantitative data did not support the hypothesis that riding therapy would improve self-concept and facilitate a shift to internal locus of control, her qualitative data did yield some promising findings. Parents and the riding professionals observed positive changes in the children, who appeared more self-assured and confident. They also observed that the children enjoyed the riding. Stuart (1999) does, however, readily admit the need for further studies to prove the validity of riding therapy as a therapeutic intervention in South Africa. International findings have supported riding therapy as a means of improving social functioning and motor development (studies reported in Van Heerden, 2001).

The Delta Society (n.d.) summarised their goals for the AAT programme into four main categories. The first category focuses on goals of physical improvement and treatment that could be attained through a structured AAT programme. The second category focuses on mental health benefits that could be derived from AAT. Thirdly, educational goals can be met through AAT. Lastly, animal contact can serve as a motivating factor for achieving primary goals in AAT.

Animals are used both as a means of improving physically, such as through riding therapy, or as a motivator to complete physical tasks in, for example, occupational therapy. Even dolphins have been used to facilitate therapy (in Allen, n.d.) as well as wild and farm animals (Mallon, 1994). Fine motor skills, wheelchair skills and static balance have all been positively influenced by specific AAT interventions. Care-giving activities, such as grooming or walking the animal, are often employed to improve gross and fine muscle movements, according to Brickel (1986).



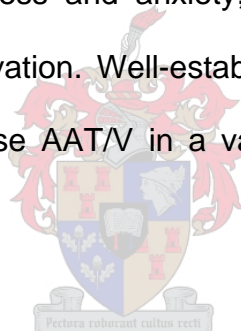
Mental health improvement may be the main aim of an AAT programme, or may be a secondary result of another animal intervention aimed at improving, for example, physical skills. The following have resulted from AAT programmes employed by the Delta Society: increased verbal interaction within a group, increased attention to tasks, development of recreational skills, increases in self-esteem, reduction of anxiety and reduction of loneliness.

Educational AAT programmes employ animals for educational purposes to teach different concepts and to motivate certain learning behaviours. Increased vocabulary

and improvements in knowledge of concepts (such as size, colour and so forth) have been achieved through animal facilitation.

Motivational goals of AAT have already been mentioned in the other main goals. AAT is employed as a means of primary improvements of movement, learning and health, but can also motivate and increase a person's willingness to participate in group activities. Social interactions with others/staff in different institutions can be enhanced through AAT and better exercise adherence may be achieved as well.

Other literature (Connor, 2001; Miller & Connor, 2000) also described the different goals that can be achieved through AAT/V. Amongst these are reductions in loneliness, medication need, stress and anxiety, and improvements in cognition, quality of life, mobility and motivation. Well-established programmes in the United States and all over the world use AAT/V in a variety of environments for a wide range of conditions.



AAT is already employed at acute care units, with chronically-ill patients with Acquired Immune Deficiency Syndrome (AIDS), with patients with Alzheimer's Disease/Dementia, with children and adolescents, in correctional facilities, at hospices, in nursing home facilities, in psychiatric facilities, in speech therapy and in spinal cord and rehabilitation units (Delta Society, n.d.).

The following section will elaborate on service dogs, one area of AAT which is of specific importance to the current study.

### 2.3.3.3.2 Service animals

Service dogs are defined in the Americans with Disability Act of 1990 as “any animal individually trained to do work or perform tasks for the benefit of a person with a disability” (in Duncan & Allen, 2000, p. 304). Service animals (mostly dogs are used) are employed in assisting (HAIG, n.d.):

- persons in wheelchairs, who can be helped by dogs and monkeys who perform an array of chores, such as fetching items, picking up objects, opening doors and so forth;
- epilepsy sufferers, who can be alerted to a pending seizure by a dog;
- the medical profession, where medical detection dogs have been known to indicate a diabetic alert and cancer sniffer dogs can detect certain malignant cells;
- persons with hearing disabilities, who can employ a dog that warns about noises, such as a doorbell or a fire alarm;
- persons with blindness by being a visual guide.

An elaboration on service dogs for the blind in particular, referred to as *guide dogs*, is important for the current study. There are four main mobility methods employed by the visually impaired. They can use a long white cane, a guide dog, they can walk alongside a wall and navigate indoors, or have a sighted guide (Guide dogs for the blind, 1999). Guide dogs for the blind, specifically, are trained to lead a person from one place to another in a straight line, to stop at all changes in elevation and to lead the person around obstacles (Guide dogs for the blind, 1999).

It is clear that animals can be used in a variety of settings, performing an array of tasks. The following section will explain, theoretically, why humans and animals interact in the first place.

#### 2.3.4 Theoretical basis for the human-animal interaction

Odendaal (n.d., 2002) explains the human-animal bond by means of Personology. The bond is explained by the role that animals play in the development of a person's personality. The broad theoretical basis for his discussion have already been related, and a few examples will be given to explain pet ownership:

- Adler claims that behaviour is determined by setting objectives for the self, in order to achieve superiority, perfection and totality. He also stresses that the relative status of individuals in a family unit is an important part of a child's development. Within this framework, pets may form part of the family unit, and present the child with feelings of ownership and superiority.
- Allport describes a human as an open system, under constant environmental influences. A mature person should be able to self-extend. Pets can help a person become involved in matters outside the self, such as having hobbies and warm relationships with others. In both examples pets may contribute to the person's development.
- Erikson emphasises ego strengths and the ability of individuals to cope with diverse crisis situations. Optimal development is dependent on unity between the individual and society. Rituals and play strengthen societal reciprocity, and animals can moderate both.

- Bandura developed the social learning theory, which postulates that behaviour is learned from the environment. Observational learning is central to this theory, and modelling is used in psychotherapy to improve self-efficacy. Animals may be used as models.
- Maslow emphasises the fulfilment of individual potential, through the achievement of hierarchical needs. The needs for safety, love, recognition and so forth can all be met by companion animals.

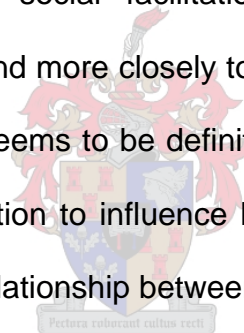
It may thus be argued that:

- Humans strive for superiority, and owning a pet could promote feelings of superiority.
- Self-extension is possible by interaction with the environment, including pets.
- Basic needs of love and security may be satisfied by pet ownership.
- Unconditional acceptance by the pet may contribute to healthy development.
- Pets may alleviate loneliness.
- Humans have a need for interaction with other humans. Pets can either be a substitute for the interactional need, or a catalyst for human-human contact (as will be evident when discussing the advantages of human-animal interaction).

This short extract from a very comprehensive discussion by Odendaal (n.d., 2002) of 20 theorists, illustrates that it is viable to explain the human-animal bond, at least partly, from the premise of the personology.

According to Van Heerden (2001), persons with disabilities strive for acceptance and respect, physical and emotional interaction, support, communication and socialisation. Dogs are non-judgmental, loving and affectionate, and could provide some of the above needs, according to Guest and also Woods (in Van Heerden, 2001). Van Heerden also refers to the positive effect of the fact that there is no judgement of the person by the dog, a quality rarely found among humans. The fact that service dogs provide assistance in normal, everyday functioning will also help the individual perform on a more optimal level.

There are many theoretical conceptualisations of the human-animal bond. Whether through personality influences, social facilitation or ecological consciousness, humans seem drawn to nature and more closely to animals and their pets. Whatever the reason for this bond, there seems to be definite advantages associated with pet contact and ownership. Intervention to influence health and behaviour is based on the assumption of this positive relationship between humans and animals.

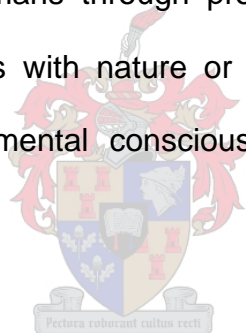


### 2.3.5 Advantages of human-animal interactions

Several health and psychological advantages found in the human-animal interaction may explain why 44% of South Africans (Odendaal, 2003) have companion animals. McNicholas, Collis, Morley and Lane (in Lane, McNicholas & Collis, 1998) compiled three classes of explanation which underlie the association between pet ownership and health:

1. There may be no causal relationship between health and pet ownership, and some other factor may contribute to both health and the inclination for pet ownership, such as a personality type.
2. There could be an indirect link between ownership and health: pets may act as facilitators for social contact, and indirectly influence social integration and well-being.
3. Pet ownership directly enhances health, for the pet has a significant relationship with the owner and alleviates loneliness, for example.

Classes 2 and 3 in particular have been investigated. Serpell (2000) also proposed that pet ownership benefits humans through providing social mediation between humans, morally linking humans with nature or through linking humans with the animal within, a sort of fundamental conscious realisation of our fundamental instincts.



The human-animal interaction has been shown to present several advantages to humans. This will account for the widespread use of animals in numerous settings. The following section will examine the advantages of the human-animal interaction, specifically related to health, both physically and mentally.

#### 2.3.5.1 Physiological effects

Animal interaction/pet ownership can bring about **improvements in blood pressure** (Fine, 2000). Positive human-dog interactions can reduce blood pressure in both the person and the dog, according to a study by Odendaal (2002). Odendaal found that



positive interaction of between five and twenty-four minutes can reduce blood pressure and influence other physiological processes, such as increasing dopamine and oxytocin levels and decreasing levels of cortisol. Cortisol decreases are associated with lowering of stress levels. These results support the notion that dog ownership has health benefits, especially as a stress reliever. The results also present an interesting finding, namely that dog ownership benefits the dog physiologically as well, and not just the human.

Friedmann, Katcher, Lynch and Thomas (1980) report that pet ownership facilitated **better survival and recovery** after hospitalised coronary care and minimised the risk of cardio-vascular disease.

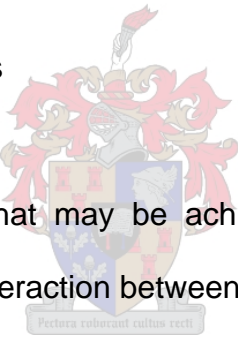
A study by Siegel (1993) found that elderly pet owners, especially dog owners, were **less distressed and required fewer visits** to their doctors than non-owners. In a study of pet ownership and health in older adults (ages 60-64), contradictory findings were reported with regard to the above positive health effects (Parslow, Jorm, Christensen, Rodgers & Jacomb, 2005). Pet ownership was associated with **poorer physical and mental health**, as well as increased taking of relief medication, compared to non-ownership. Pet owners also exhibited higher levels of psychosis. It would seem that for this age group sample, pet ownership is not necessarily beneficial.

Animals can have a **short-term positive effect** on the health of people, according to several studies reported in Friedmann (2000). Animals can, by means of directing attention or facilitating social interaction (reported in Friedmann, 2000) aid relaxation,

lower stress levels, reduce anxiety in a high-stress environment and reduce transient depression.

The health benefits of owning a service dog have been investigated on only a limited scale. Lane, McNicholas and Collis (1998) found that service dogs **improved self-perceived health** in the majority of their sample. Participants reported feeling more relaxed and less worried about their health since acquiring their service dogs. Presumably the same benefits of pet ownership will also apply to service dog ownership. The next section will examine possible psychological advantages of the human-animal interaction.

#### 2.3.5.2 Psychological advantages

The image is a watermark of a university crest, likely from the University of Stirling, featuring a shield with various symbols, a crown on top, and a banner at the bottom with the Latin motto "Pectora roburant ciliis recti".

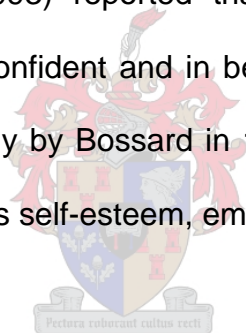
The psychological advantages that may be achieved through the human-animal interaction, and specifically the interaction between humans and service dogs, will be thematically discussed with reference to self-esteem (2.3.5.2.1), experiences of companionship (2.3.5.2.2), reduced depression and loneliness (2.3.5.2.3), socialising and integration into the community (2.3.5.2.4) and reduced behavioural problems (2.3.5.2.5).

##### 2.3.5.2.1 Improved self-esteem

Service dogs have been associated with improved self-esteem in their owners. Duncan and Allen (2000) found that service dog owners differ significantly from non-owners (who are also disabled), and that the service dog owners have better self-

esteem. The study was performed on people with severe physical disability, confined to wheelchairs. Valentine, Kiddoo and LaFleur (1993) found that persons reported higher self-esteem, trust, tolerance and independence after service dog acquisition. Allen and Blascovich (1996) reported the same positive results of increased self-esteem within six months after receiving a service dog.

There is evidence that service dogs facilitate a shift to internal locus of control in persons with disabilities. Owners of service dogs differ from non-owners in that they have a more internal locus of control (Duncan & Allen, 2000). Allen and Blascovich (1996) found significant increases in internal locus of control after service dog acquisition. Valentine et al. (1993) reported that their sample of persons with disabilities felt more assertive, confident and in better control of anxiety when they had a service dog. An early study by Bossard in 1944 (in Serpell, 1996), proposed that pets could enhance children's self-esteem, empathy and communication skills.



Camp (n.d.) identified personal skill development as one result of service dog ownership. Mastery over commands to service dog and incorporating praise into routine spilled over into human social relationships and improved self-concept.

The Guide Dog Foundation for the Blind, Inc. (based in New York, USA) conducted a market research study in 2002 on guide dog usage (Guide Dog Foundation for the Blind, Inc., 2002). Their findings included support for the positive effect of guide dogs on an individual's mobility, as well as perceived companionship and increases in confidence, supported by guide dog users and the perceptions of non-users.

Woods (in Van Heerden, 2001) also argued that the relationship between a guide dog and its owner has the potential to increase confidence, pride and ameliorate stigma. Service dogs can thus be an aid to enhance the self-esteem of persons with disabilities.

#### 2.3.5.2.2 Experience of companionship

Serpell (1996) reports a study as early as 1903 by Bucke, in which he analysed 1200 children's essays about their pet dogs. He observed that children especially valued the affection that dogs give to them, especially when they were feeling lonely or ill.

Service dogs provide companionship that is "closer than family", according to a qualitative study by Camp (n.d.). She found that there is a very strong emotional bond between owner and dog. Service dogs also provide emotional support to their owners. Emotional importance was defined by Valentine et al. (1993, p.120) as "the ability of the dog to provide companionship and comfort to the owner". Persons with mobility impairments rated the emotional aspects of service dog ownership as very important, which means that they felt the ability of their dogs to give them companionship and comfort was significantly important in their lives. They also experienced dog ownership as very satisfying.

Lane et al. (1998) surveyed 57 recipients of service dogs, and found that they described their relationship with the dogs as affectionate and supportive. This satisfaction with the dog and the quality of their relationship with it was mediated by the initial motivation for acquiring the dog. Persons who chose a service dog out of a

personal need had a higher quality relationship with their dogs. Persons who were under social pressure to obtain a dog reported less quality in their relationship with it.

A study by Steffens and Bergler (1998) also confirms that the support provided by service dogs, in this case guide dogs, even surpasses the initial high hopes by their owners. Both blind owners and non-owners indicated that guide dogs have provided many benefits, especially independence (Steffens & Bergler, 1998).

#### 2.3.5.2.3 Reduced depression and loneliness

Wiggett (2003), in an unpublished study, also found qualitative data to support the use of AAV in nursing homes, as well as significant decreases in depression amongst participants. The study may be criticised for poor external validity, because of its small sample size, and also the increased risk of Type II error due to non-parametric statistical analyses. It was, however, useful as a pilot study of AAV influences in nursing homes, and yielded promising qualitative data. Subjective feelings of well-being were reported by most residents participating in the study.

Numerous studies in nursing home settings have confirmed the possible positive influences of AAT. Banks and Banks (2002) found that AAT in a long-term care facility for the elderly reduced loneliness. Individual visits by a therapy animal once a week for a period of ten weeks yielded positive feedback from the participants in a study performed by Panzer and Sheridan (2000). The participants (35 volunteers in a nursing home) reported feelings of tactile comfort, elevation of mood and positive environmental stimuli (diversion from normal routines), even though there were non-

significant improvements on the quantitative measures of depression and morale. Service dogs have also been associated with reduced depression and irritability, especially for persons with mobility impairments (Valentine et al., 1993).

#### 2.3.5.2.4 Socialising effects and community integration

Pets provide a “social lubricant” (Fine, 2000, p.181), encouraging people to interact. Animals also help people to find their connection with nature and to become aware of their inner qualities and roles (Serpell, 2000). Hart (2000, p. 91) also remarks on the socialising effect of dogs, being “social magnets” and encouraging interaction and conversation between people.

Pets have the potential to mediate aspects of a person’s social capital as well, according to a study by Wood, Giles-Corti and Bulsara (2005). Social capital is defined as any civic engagement in local community networks that generates increased levels of trust and reciprocity between community members and communal support between members, and which fosters positive local identities (Campbell, 2000). Pet ownership was found to be positively associated with certain forms of social contact (Wood, Giles-Corti & Bulsara, 2005). In a sample of 339 adults in Australia, pet owners exhibited higher scores on social capital than their non-owner controls. It appears that the presence of a pet provides potential opportunities for friendly interactions between neighbours, which can positively influence individual health and that of the community.

A South African study on the human-animal interaction by De Jager (1988) focused on the effects of AAT in an institution for persons with mental impairment. This study

discussed the possible positive effects that animals have on their human companions. De Jager (1988) identifies these positive effects as love and affection, security and protection, self-concept, reality orientation, stress and anxiety, morale, relaxation and distraction. De Jager found that the use of animals in an institutionalised setting for persons with mental disabilities improved the participants' social interaction and language abilities. Further results showed increased initiative, and decreases in aggressive and withdrawing behaviour. De Jager thus found substantial evidence to support the usefulness of the animal-human bond in therapy and group processes.

Service dogs act as social facilitators. Therapy animals facilitated social behaviour in nursing homes, through the enhancement of touch and subsequent social engagement (Bernstein, Friedmann & Malaspina, 2000). Baum and McCabe (2000) remark that even the mere presence of an animal could be beneficial, for it provides an alternative for and distraction from the normal routines in nursing homes.

Zee (in Valentine, Kiddoo & LaFleur, 1993) identifies guide dogs as catalysts for communication, by establishing human contact. Valentine et al. (1993) found that ninety nine percent of the respondents in their study (24 participants) reported that they were less lonely after acquiring their service dog. Most also experienced more friendliness from strangers. Mader, Hart and Bergen (1989) found that the presence of service dogs helps social facilitation for people with disabilities. They studied children with disabilities, and found that the presence of a service dog increases social acknowledgements (for example friendly glances, smiles and conversations) of passers-by in both shopping malls and on school playgrounds. In a similar, earlier

study by Eddy, Hart and Boltz (1988), it was also found that people smiled more often at persons in wheelchairs with a dog present, and conversed with them more often than with persons without a dog. Lane, McNicholas and Collis (1998) also found that service dogs increased their owner's sense of social integration. Camp (n.d.) found that service dog owners in the USA reported increased community participation, social contact and independence after acquiring the dog.

Allen and Blascovich (1996) conducted one of only a few randomised, controlled clinical trials on the effects of service dogs. They found that all participants (all with severe ambulatory disabilities) showed significant increases in community integration after service dog acquisition, in comparison to no-dog controls. They employed the Community Integration Questionnaire, which measures social interaction, employment and use of public transport.

#### 2.3.5.2.5 Reduced behavioural problems

Soutar-Freeman (2003) developed an AAT programme for children with behavioural problems. They proposed that children would learn kindness, caring and nurturance through caring for an animal. Their programme goals are based on the assumption that AAT has positive behavioural consequences, as was found in numerous studies, such as the one by Katcher (in Golin & Walsh, 1994). Katcher found that exposure to animals decreased symptoms of hyperactivity and increased children's learning capabilities. The study was conducted in the USA, on 50 boys who had consistent school failures, behavioural problems or psychiatric conditions. The experimental group were exposed to a variety of small zoo animals, and their behaviour improved



significantly more than the children who engaged in sport activities (control group). Heimlich (2001) also found positive changes in her sample of severely disabled children after an AAT intervention. Three independent observers rated the children's improvements on attention span, physical movement, communication and compliance. The validity of the findings is, however, questionable. Several confounding variables, such as poor inter-rater reliability, sampling irregularities and the use of a test with no proven validity plagued the study.

Several studies reported and confirmed the possible psychological advantages to the human partner in the human-animal interaction.

#### 2.3.5.3 Other advantages of the human-animal interaction

In addition to the above advantages, the following other advantages may also be mentioned.



- **Financial benefits:** Duncan and Allen (2000) found that service dogs have positive financial implications, in terms of reducing the number of paid/unpaid assistance hours from other persons. However, Valentine et al. (1993) found that the financial costs of owning a service dog is seen by the owners as a disadvantage to ownership. It seems that paid assistance decreases with service dog ownership, but maintenance costs of the dog again increases expenditure. Since Allen and Blascovich (1996) also reported substantial economic benefit through reduction of paid assistance hours with the acquisition of a service dog, however, the economic benefit appears to outweigh the costs.

- **Education/employment enhancement:** Service dogs influence aspects of education and employment. Allen and Blascovich (1996) found that new service dog owners reported increases in school attendance and/or part-time employment after receiving their service dogs. Duncan and Allen (2000) also reported that school attendance and part-time employment increased in their sample within six months after service dog acquisition.

### 2.3.6 Risk factors of human-animal interaction

As with all proposed interventions and situations, there are negative aspects regarding pet ownership, specifically service dog ownership, to be considered.

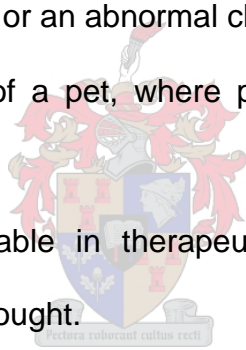
There are **health risks** involved when humans and animals co-habitate in society. One of the main health concerns about animals in the community seems to be allergies. According to Duncan and Allen (2000), allergies are the most frequently mentioned concern of co-workers of the person with a service dog. De Jager (1988) also identified the following potential problems with animals in the physical environment:

- contagious disease;
- injuries caused by the animal, such as dog bites;
- poor sanitation, such as hair and bad odours;
- noise, such as a dog barking;
- physical injuries due to inappropriate selection and faulty handling;
- unwanted breeding;

- animal abuse;
- financial burden of keeping a pet;
- staff unhappiness in instances where live-in animal companions must be considered;
- legal complications, especially following an injury caused by an animal.

**Psychological problems** also arise when people become over-attached to their pets and when pets die. De Jager (1988) referred to the following three phenomena to explain instances where pets cause psychological problems to their owners:

- pathological over-attachment, or an abnormal closeness to the pet;
- bereavement after the loss of a pet, where persons go through a process of mourning;
- rejection by the pet, applicable in therapeutic intervention where the pet's unconditional acceptance is sought.



Other **practical concerns** about the widespread use of service dogs as a viable option to promote independence for persons with disabilities include the fact that animals, especially dogs, may be feared by others and that some cultures may reject dogs in the public domain.

Duncan and Allen (2000) identified cultural trends and factors that affect peoples' choices to obtain a service animal:

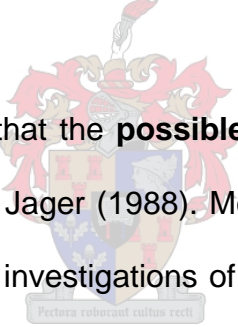
- awareness about the roles of service dogs;

- knowledge about the legal rights of the individual with a disability;
- community acceptance of service animals;
- lifestyle, religious and cultural beliefs pertaining animals;
- availability of service animal;
- ability to afford and maintain a service animal;
- matching up the needs of the individual and realistic expectations about the dog;
- availability of alternative coping mechanisms and modalities;
- orientation of family and significant others towards service animals.

**Societal influences** can also account for pet ownership practices, such as the variability between nations concerning sacred animals. In India, cows are sacred, and will remain untouched, whereas in the USA, cows are seen mostly as “hamburgers on legs” (Serpell, 1996, p. xiii). The same dichotomy applies to dogs. In most of the Western world, dogs are cherished as companions and “man’s best friend”, whereas the Chinese, Koreans and Philippines savour dogs as food (Serpell, 1996). Societal influences may put both the animal and the owner at risk of ridicule and physical danger.

To highlight the influences of culture on the decision to obtain and in particular on the experience of owning a service dog, a study by Deshen and Deshen (1989) will be discussed. Their study of social aspects of the use of guide dogs in Israel highlighted the conflict of traditional Middle Eastern attitudes towards dogs and the use of dogs as public mobility aids. Dogs are usually seen as unclean beasts in Middle Eastern culture, and there is a negative attitude towards dogs, which transcends largely to guide dogs as well. This negative attitude towards dogs puts the owner of a guide

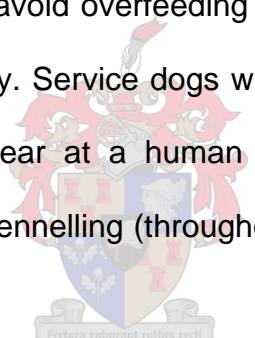
dog in uncomfortable situations, such as when visiting family who would not allow a dog inside. The authors concluded that this may be one reason why relatively few persons in Israel employ guide dogs as mobility aids. It can also be speculated that there is less emotional bonding with the guide dog, and subsequently also less potential for positive psychological experiences between the dog, the owner and the general public in societies where persons hold a negative view of dogs. In a South African context, it is necessary to understand that not all cultures will necessarily accept and benefit equally from guide dogs as mobility aids. As demonstrated by the Israeli example, culture mediates social processes and influences one's perceptions on any number of things. The use of dogs as service animals, and their potential for positive influence will also be mediated by culture.



In conclusion, it is also possible that the **possible negative aspects of AAT** have been minimised, according to De Jager (1988). McCulloch (in De Jager, 1988) also mentioned the lack of systematic investigations of the failures of AAT, and Beck (in De Jager, 1988) warns that pet-assisted therapy may cause people to avoid other, more proven therapeutic modalities. For this reason, the current author concludes that AAT may be successfully employed as a complementary intervention, used in conjunction with more proven therapies in instances where behavioural problems are present. AAT seems most promising with persons who are animal lovers and in situations where there is a need for social facilitation and positive support.

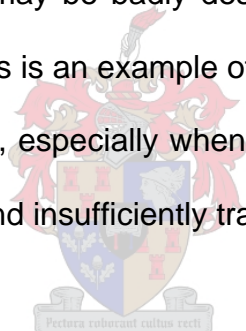
### 2.3.7 Ethical considerations in human-animal interaction

There are several ethical considerations, especially concerning the animal's welfare, when discussing human-animal interaction. This applies specifically to the use of service dogs and other animals involved in AAT. Serpell, Coppinger and Fine (2000) identify possible sources of animal welfare problems:

1. There may be a failure to provide for the animal's behavioural and social needs. Animals need to be safe from abuse, and must have a place of shelter. Animals have physical requirements (such as adequate rest and food) and their health needs must be monitored to avoid overfeeding and other health problems. They also require some consistency. Service dogs who are brought for formal training after they spent their first year at a human foster home may especially be stressed by the subsequent kennelling (throughout initial training) and re-housing to the permanent owner.The image is a faint watermark of a university crest, likely from the University of Cambridge, featuring a shield with various symbols, a crown on top, and a motto scroll at the bottom. The motto scroll contains the Latin text 'Pectora roburant cultus recti'. The watermark is centered behind the text of the first list item.
2. Selection or breeding of the animals may disadvantage the animal in several ways. Animals are trained certain non-natural skills, such as opening doors, which may confuse the animal. Furthermore, certain animal types and individual temperament also influence the ability of the animal to perform in a human environment. In-breeding and subsequent genetic faults may also occur when breeding from a small selection pool.
3. There may be failure to take into account developmental events and processes. Both genetics and environment shape behaviour, referred to by Serpell et al. (2000) as the developmental effect. Agencies and programmes responsible for

service dog rearing should ensure that the animals are properly prepared for their adult life, including proper socialisation and feeding while still developing.

4. Inappropriate or inhumane training methods may be employed. Aversive training is often employed to teach the animal, and this may cause injury or aggression. The animal may also stop performing its appointed tasks when the aversion is lessened after placement in the permanent home. This could harm the owner.
5. Unrealistic expectations may arise. The animal may not have the intrinsic motivation to perform the task, because it is unnatural to him, and may then perform unsuccessfully. The animal may also injure itself in performing unrealistically complicated tasks.
6. The equipment that is used may be badly designed and injure the animal. The harnesses used for guide dogs is an example of equipment.
7. End-user problems may arise, especially when the appointed owner/caregiver of the animal is inexperienced and insufficiently trained to handle the animal.



Beck (2000) also discusses the ethics of employing service animals. He identifies three situations that cast doubt over the ethics of keeping and training service animals. Firstly, dogs that were bred for the purpose of serving a person with a disability, but which prove unusable, are left homeless in many cases. Secondly, the working service dog may experience excessive work stress, which is detrimental to its health. And lastly, the animals' well-being may be neglected after he retires from service.

There are, however, ways to ensure the ethical treatment of service animals. Serpell et al. (2000) propose the following recommendations to ensure the welfare of therapy and service dogs:

1. Animal trainers and persons responsible for preparing the animals for their appointed roles need to educate themselves on the social and physical needs of the animal.
2. Periods of transition of the animal from one institution or handler to the next need to be handled carefully in order to minimise distress caused by routine changes and severed social bonds.
3. Non-domesticated animals should not be used for AAT or to help persons with disabilities, except in exceptional circumstances where proper controls are in place.
4. Appropriate behavioural screening should be developed to accurately identify suitable assistance animals from animals that are relinquished to animal shelters.
5. The “failure” level of assistance dogs in training should be reduced, either by limiting the potential genetic problems due to in-breeding or strengthening the infectious disease resistance through cross-breeding.
6. Alternatives to aversive training should be sought, and tasks that cannot be taught to the animal through positive reinforcement should be scrutinised and perhaps discontinued.
7. Animal-friendly equipment and facilities must be developed.
8. Continuing education must be made available to end-users, to ensure proper handling and care of the animal.



As with most interventions and especially in instances where some of the parties involved are unable to dictate the interaction, there are ethical concerns of misuse. In the human-animal interaction, where the human is in the more powerful position, there are always welfare risks involved for the animal. Care should be taken to ensure that the application of the human-animal interaction for therapeutic and practical purposes is not harmful to either the human or the animal.

## 2.4 The role of positive psychology

The following discussion will define positive psychology, its components and also the factors that influence well-being. The section will conclude with a discussion of the position of human-animal interaction within the realm of positive psychology.

### 2.4.1 Defining positive psychology



Positive psychology is a paradigm focused on human psychological strength and health, rather than human suffering and pathology. Positive psychology is defined on three levels: subjective level, individual level and group level (Seligman, 2002; Seligman & Csikszentmihalyi, 2000). The **subjective level** deals with subjective experiences of well-being and life satisfaction, and topics such as happiness, joy, hope, sensual pleasure and flow. On the **individual level**, positive psychology is about positive traits, including love, forgiveness, talent, wisdom and courage. Finally, on a **group level**, good “citizenship” (Seligman, 2002, p. 3) is investigated, focusing on altruism, tolerance and work ethic.

The following sections will discuss closely related concepts in positive psychology literature, namely salutogenesis, fortigenesis and psychofortology. This will be followed by an in-depth discussion of positive psychology as a paradigm.

#### 2.4.1.1 Salutogenesis

Salutogenesis is a concept coined by Antonovsky in 1979, and refers to the origins of health (Strümpfer, 1995). Antonovsky based his early research on female concentration camp survivors and collected data on their health and well-being. In this research he became intrigued by the question of how some of the survivors had managed to stay so well-adapted. In order to answer this, Antonovsky developed several constructs which he believed would influence health and well-being. The most enduring of these is “sense of coherence” (SOC), which indicates a person’s way of experiencing the world and his/her life in it. SOC involves concepts such as comprehensibility, manageability and meaningfulness within each person’s context and life orientation, and how these relate to healthy survival and being well-adapted.

#### 2.4.1.2 Fortigenesis


Strümpfer (1995) argues that Antonovsky’s concept of salutogenesis actually extends beyond just health, but also includes the study of strength. *Fortigenesis* was suggested as a more encompassing term. Fortigenesis is concerned with the origins of strengths, recognising the development of human potential beyond simply being healthy (Strümpfer, 1995). Strümpfer highlights the importance of the study of

strengths, also as a preventative measure, by identifying which persons can withstand life's pressures and achieve well-being, and why they are able to.

#### 2.4.1.3 Psychofortology

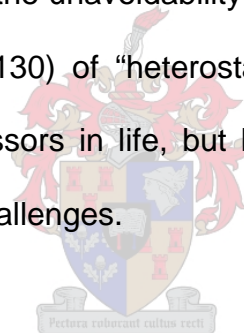
Wissing and van Eeden (1997) extended the psychology of strengths even further by coining the term *psychofortology*, as a direct alternative to psychopathology. Psychofortology is the study of psychological well-being, from origin to enhancement, including its nature and manifestations. The current study will be conducted from this perspective and will investigate guide dog ownership as a means of enhancing psychological well-being.

#### 2.4.2 Positive psychology as paradigm

The image is a faint watermark of a university crest, likely from the University of Pretoria, featuring a shield with various symbols and a motto scroll at the bottom. The crest is centered on the page, overlapping the text of the 2.4.2 section.

The psychopathological perspective to psychology is still dominant today (Seligman, 2002; Strümpfer, 1990; Wissing & Van Eeden, 2002). Pathology is concerned with disease and healing, and neglects positive aspects of human functioning. Positive psychology proposes a different focus, for as Seligman (1998) explains, “psychology is not just the study of weakness and damage, it is also the study of strength and virtue” (p.1). Positive psychology is simply another way to broaden our knowledge of the human condition. One cannot consider pathology and the absence thereof as the only definitions for human health. The World Health Organization (1999) states that health is not merely the absence of disease, but also a positive state of well-being (mentally, physically and socially).

Historically, personality theories provided an early basis for the development of a more holistic perspective of human functioning. Maslow's hierarchy of needs and ultimate self-actualisation (Maslow, 1954), Roger's fully functioning person, emphasising freedom, empathy and creativity, and Bandura's perceived self-efficacy all provide examples of positive human development (in Hergenhahn & Olson, 1999). Victor Frankl (1959), in his poignant account of life in a death camp during the Holocaust, also laid some foundations for a psychology beyond human suffering. Frankl spoke of man's search for meaning, and mentioned several coping mechanisms for survival in adverse conditions, such as a sense of humour and religious faith. Another of Frankl's convictions is echoed in today's positive psychology. What Frankl called "the unavoidability of suffering" (p.116) can be linked to Antonovsky's view (1987, p.130) of "heterostatic disequilibrium": both theories describe the inevitability of stressors in life, but both highlight strength building to overcome these never-ending challenges.

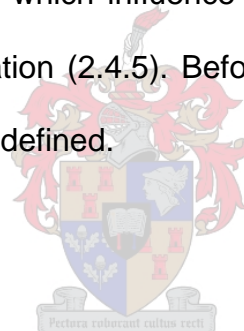


A groundbreaking event for positive psychology took place in January 2000, with the *American Psychologist* journal dedicating an entire issue to positive psychology. In this issue, the editors, Seligman and Csikzentmihalyi (2000), stressed that positive psychology has three core orientations: it investigates positive experiences, it assumes human freedom and the ability to direct and organise one's own life, and it places experiences within a given social context. By placing the individual within a social context, this paradigm also combines perfectly with community psychology and prevention literature. In a recent book on community psychology in South Africa, Pretorius-Heuchert and Ahmed (2001) points out that community psychology aims to improve human lives and enhance psychological well-being, always keeping social

context in mind. In concluding their introduction to positive psychology, Seligman and Csikzentmihalyi (2000) make this link even clearer. They express the hope that psychologists, through focusing on positive qualities, would help individuals and the bigger community not only to survive, but also to thrive. The following section will investigate ways in which psychological well-being and thriving can be achieved and explained.

### 2.4.3 Psychological well-being

In the following sections psychological well-being will be discussed with reference to its components (2.4.3.2), factors which influence it (2.4.3.3), the way in which it is measured (2.4.4) and its application (2.4.5). Before addressing these components, however, the concept will first be defined.



#### 2.4.3.1 Defining well-being

Literature on well-being usually falls into one of two categories. The first category deals specifically with *subjective well-being*, more commonly referred to as *happiness*. The second category has a more philosophical and theoretical basis, and is called *psychological well-being*.

**Subjective well-being (SWB)** is defined in terms of affect and cognitive evaluations of life satisfaction (Diener, 2000). There are different components of SWB (Diener, 2000; Diener, Suh, Lucas & Smith, 1999), namely life satisfaction, satisfaction with important domains and affect (positive and negative). Thus, a person will have SWB

if he/she experiences overall feelings of life satisfaction, satisfaction with other relevant domains, such as at work and more positive emotions and moods than negative ones in the course of daily living. SWB focuses on self-evaluation, and not some external statistics or correlates, but rather the thoughts and feelings of the individual (Diener & Lucas, 2000). Other definitions of SWB highlight the attainment of pleasure and the avoidance of pain (Ryan & Deci, 2001) as central to well-being.

Before distinguishing between SWB and psychological well-being, two parallel concepts of wellness will be discussed. As far back as the fourth century B.C., a Greek philosopher called Aristippus proposed that the attainment of pleasure is the main goal in life (in Ryan & Deci, 2001). The equating of well-being with happiness is what is called the hedonic view of well-being (Ryan & Deci, 2001). A different historical view of well-being is the eudaimonic perspective (Ryan & Deci, 2001). The eudaimonic view holds that well-being is more than just subjective happiness, but is also concerned with self-actualisation, values (Waterman, 1993) and self-realisation. Following an eudaimonic approach, Ryan and Deci (2000) identified competence, autonomy and relatedness as innate psychological needs which result in self-motivation and mental health. The hedonic view of well-being is closely related to SWB literature, whereas psychological well-being theorists work closer to an eudaimonic perspective.

**Psychological well-being (PWB)** is the second category under which well-being is discussed. One of the most comprehensive models of PWB was presented by Ryff (1989), in which she identified six key dimensions of well-being. Her theoretical model was born out of a need for an integrated theory of well-being. Ryff criticised

previous perspectives on PWB (for example Erikson's psychosocial stage model, Buhler's basic life tendencies and Johada's positive criteria for mental health) for not offering a complete model of well-being, focusing only on certain elements and ignoring others. She also concluded that each had little empirical value. Previous models had, according to Ryff, neglected to develop valid measures for their constructs, and their well-being constructs were very diverse (offering no integrated theory) and too value-laden. Ryff (1989) concluded that through integrating theories on mental health and lifespan development, a new, distinct theory on psychological well-being emerged.

Ryff operationalised her theory by constructing the Scales of Psychological Well-being, consisting of six scales (one on each of the above-mentioned dimensions) with self-report items answered on a 6-point Likert scale. Her description of the good and healthy life will also translate into the following definition of PWB: PWB "involves processes of setting and pursuing goals, attempting to realise one's potential, experiencing deep connection to others, managing surrounding demands and opportunities, exercising self-direction, and possessing positive self-regard" (Ryff & Singer, 1996, p.16).

Ryff's model, although very comprehensive and methodical, have been criticised by Diener, Sapyta and Suh (1998) for lacking measures on subjective well-being. According to Diener et al. (1998), subjective well-being is a necessary component for achieving well-being. They readily admit that SWB is not the only requirement for positive mental health, but it is, as they call it, "indispensable" (p. 33). Diener et al. (1998) also comment that Ryff's PWB may lack universal application by presenting

more Western standards and values. This is in direct contrast with Ryff and Singer's (1996) insistence that their constructs of well-being is not "culture-bound" (p.16). The conclusion by Diener et al. (1998) is thus that Ryff's model is potentially falsifiable. The current author accepts this critique, but maintains that Ryff's model of PWB is a sound, albeit not perfect, conceptualisation of well-being, and certainly one of the most comprehensive models of PWB to date. The quantitative part of the current research will, therefore, be conducted with Ryff's Scales of Psychological Well-being, and a full account of the construction of the questionnaire, as well as its psychometric properties, will be given in the section on *Methodology*.

Wissing and Van Eeden (2002) confirm that a "relatively strong, multi-dimensional, general psychological well-being factor" (p.41) does exist, which is consistent with Ryff's (1989) argument for her multi-dimensional conceptualisation of PWB. Wissing and Van Eeden, though, go on to say that the different perspectives on PWB (whether from a hedonic or eudaimonic viewpoint) actually overlap empirically, and conclude that psychological well-being may exist in different patterns, with regard to amount and specific strengths. What this means is that people not only differ in the degree of well-being that they experience, but also in the structuring of their strengths and manifestations of their wellness.

Although care was taken to distinguish between the two different views of well-being (subjective well-being and psychological well-being), this does not imply that the two are not, at least partially, reconcilable. There were moderate to strong correlations between two of Ryff's Scales of Psychological well-being, self-acceptance and environmental mastery, and scales of happiness, life satisfaction and, conversely,



depression (Ryff & Keyes, 1995). Keyes, Shmotkin and Ryff (2002) hypothesise that certain socio-demographic and personality variables cause an overlap of the two concepts. Firstly, they have found that SWB had small correlations with age and education, whereas PWB had a small correlation with education, but not with age. When they cross-classified SWB and PWB with age and education (compared to the control group of low SWB and low PWB), they found that the odds of having high SWB and high PWB increased with age and education level, whereas the odds of having low SWB and high PWB increased with educational level, but not with age. Furthermore, the odds of having high SWB and low PWB increased with age. This is indicative of a complex interplay between SWB and PWB.

These findings support the hypotheses by Keyes et al. (2002) that high SWB and high PWB will be found in adults with higher education and who are middle-aged. What the authors call “challenged thriving” (p.1009) can explain why persons with a higher educational level have higher PWB, but are not necessarily content with their current state of affairs (accounting for the low SWB). They also report a study by Riley, Kahn and Foner that found that opportunities for meaningful activity have not proportionally increased with higher life expectancy in modern life. This may account for persons having high SWB, but low PWB with an increase in age. Keyes et al. (2002) also found that high SWB and high PWB strongly correlate with low neuroticism, and also with high extraversion and high conscientiousness. These findings are consistent with the findings in Diener et al. (1999) and the literature review by Continuing Psychology Education (2004). In conclusion, Keyes et al. (2002) confirm that SWB and PWB represent related but distinct components of well-being.

### 2.4.3.2 Components of well-being

For researchers, practitioners and the public alike, the important question is what influences SWB. The February 2005 issue of *Time* magazine focused on the science of happiness (Wallis, 2005). They present a review of happiness literature, quoting, among others, studies by Seligman, Diener, Kahneman and Csikzentmihalyi. It would seem that positive psychology has found its way into popular culture, and that more and more emphasis is being placed on what makes people healthy and happy.

Diener et al. (1999) discuss the different components of SWB as follows:

1. **Pleasant affect or good mood** includes feelings of joy, elation, contentment, pride, affection, happiness and ecstasy.
2. **Unpleasant affect or bad mood** includes guilt and shame, sadness, anxiety and worry, anger, stress, depression and envy.
3. **Life satisfaction** includes the desire to change life, satisfaction with current, past and future life and the view of significant others of one's life.
4. **Domain satisfaction** includes experiences at work, as well as satisfaction with family life, leisure, health, finances, self and one's group.

Wissing and Van Eeden (2002) report that several "micro-level constructs" (p.32) conceptualise psychological well-being. Some of the examples they provide will be individually defined:

- **Sense of coherence (SOC)** – when a person has a strong SOC, he/she will see a task as challenging, and look for adequate resources to perform the task successfully, and have confidence in a reasonable outcome (Antonovsky, 1987).
- **Self-efficacy** – a person’s belief that desired effects can be attained through their own capabilities and actions (Bandura, 1997), or the as Maddux (2002) puts it, “the power of believing you can” (p.277).
- **Optimism** – described by Tiger (in Peterson, 2000) as a positive attitude towards the future. This attitude is born out of the expectation that future experiences will be advantageous, pleasurable or desirable for the individual.
- **Learned resourcefulness** – this refers to a learned “repertoire of behaviours and skills by which a person self-regulates internal events (such as emotions, pain and cognitions) that interfere with the smooth execution of target behaviour” (Rosenbaum & Jaffe, 1983, p. 215).
- **Resilience** – Barnard (1994) is a leading researcher on resilience, and is concerned with the resources by which people “make it in spite of difficult circumstances” (p.136) and how they adapt to stressors.
- **Hope** – defined by Snyder et al. (1991) in two cognitive components. Firstly a person has to be determined to be successful (successful determination), and do deliberate planning to meet their goals, in order for genuine hope to occur. Determination and goal-setting work together and create true hope of accomplishment.

Ryff (1989) grouped the components of psychological well-being into six categories:

1. **Self-acceptance** is central to literature on mental health and includes constructs such as self-actualisation, optimal functioning and maturity.
2. **Positive relations with others**, with the emphasis on warm, interpersonal relationships, love, empathy, affection and intimacy, is necessary for well-being.
3. **Autonomy** emphasises the importance of qualities such as self-determination, independence and internal locus of control for positive functioning.
4. **Environmental mastery** is found when an individual is able to shape and adapt their environments in order for them to function optimally.
5. **Purpose in life** gives one a sense of control, in order to direct one's activities and intentions, and helps set goals for oneself.
6. **Personal growth** will result from developing one's potential and enhances one's emotional growth (by being open to experiences).

It is clear that the theoretical framework from which one defines well-being, i.e. SWB or PWB, governs the components that will be investigated. However, in spite of the distinct theories on well-being, most of the components found in SWB and PWB actually overlap. It is exactly for this reason that Ryff (1989) proposes an integrated theory on well-being. The following section will investigate the factors that influence well-being.

#### 2.4.3.3 Factors that influence well-being

Several factors have been shown to influence well-being. The factors that have been comprehensively investigated will be related in this section.

#### 2.4.3.3.1 Bottom-up versus top-down theories

There are several theories on happiness. Two theories, discussed by Diener (1984) and known as *bottom-up* and *top-down* theories, have also been presented to explain happiness. The bottom-up theory suggests that happiness occurs when many pleasant moments dominate and surpasses negative experiences. The top-down theory, on the other hand, insists that happiness is almost like a trait, a part of one's personality, that a predisposition to happiness makes people happy, independent of objective experiences of happiness. Rather than being opposing theories, Brief, Butcher, George and Link (1993) suggest an integrative view. They found that SWB is influenced by both objective experiences of happiness (consistent with the bottom-up theory) and personality dimensions (consistent with the top-down theory).



#### 2.4.3.3.2 Intrinsic values and goals

Sagiv, Roccas and Hazan (2004) found that intrinsic goals are correlated with positive well-being. This conclusion is likened to Ryan and Deci's (2000) self-determination theory, through which they highlight the importance of intrinsic motivation for positive development and well-being. This also links with Ryff's (1989) Autonomy Scale, which emphasises internal locus of control and self-determination emphasised.

Diener (1984) and Sagiv et al. (2004) also summarised additional perspectives on well-being, which will be presented briefly. Well-being is enhanced through having

intrinsic values and goals, for these promote self-actualisation, according to the healthy values perspective. Fulfilling one's values and attaining important goals enhance well-being, according to the goal-attainment perspective. According to the person-environment congruency perspective, if a person's goals and values fit in with his/her environment, they will experience greater well-being. The telic or endpoint theories state that happiness results from goal attainment or need satisfaction. Activity theorists, however, argue that happiness is simply a "by-product" of various human activities (p.564). Aristotle, one of the earliest activity theorists, believe that happiness results from well-performed tasks. Csikszentmihalyi's concept of flow, which deems that pleasurable activities result from appropriate challenges based on one's skill level, is also included under activity theories. Another perspective can be found in an associationistic theories framework, which postulates that happiness results from a predisposition in one's temperament. These theorists investigate cognitive functioning to explain happiness. Lastly, judgement theories explain that happiness is found when current conditions exceed the expected norm.

Diener (1984) remark that more work is needed to refine theories on happiness. In order to formulate more sophisticated models, constructs should be scrutinised, carefully defined and empirically tested.

#### 2.4.3.3.3 Age

PWB is influenced by age, according to Ryff and Keyes (1995): purpose in life and personal growth decline with age, but environmental mastery and autonomy increase

with age (Ryff & Singer, 1996). Ryff and Singer (1996) conclude that more longitudinal studies are needed to clarify this seemingly complex interplay between age and PWB.

SWB's relation with age also yielded inconsistent findings. Wilson (1967) remarks that youth consistently predicts SWB. Diener et al. (1999), however, report several studies that contradict Wilson's conclusion, especially with regard to life satisfaction. Diener et al. (1999, p.291) indicate that there is a lack of significant decreases in life satisfaction across the lifespan, which probably suggests that people have "an impressive ability" to adapt. It would also seem that expectations, rather than age, mediate SWB (Continuing Psychology Education, 2004).

#### 2.4.3.3.4 Gender

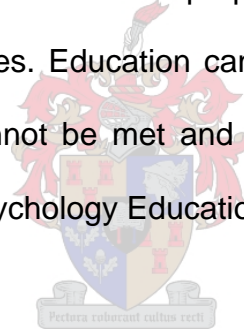
PWB may be influenced by gender. Women of all ages rate higher than men on positive relations with others and tend to score higher on personal growth (Ryff & Keyes, 1995). There were, however, no significant gender differences in self-acceptance, autonomy, environmental mastery and purpose in life.

Gender has been found to be an inconsistent predictor of SWB. Diener et al. (1999) report mostly insignificant correlations between gender and SWB. However, they speculate that women experience emotions more strongly and frequently than men. The higher prevalence of depression in women (Eaton & Kessler, in Diener et al., 1999) could be balanced by stronger positive emotions experienced by women and account for the seemingly equal SWB between men and women, according to Fujita,

Diener and Sandvik (1991). Other researchers also agree that gender differences are mostly insignificant predictors of SWB (Continuing Psychology Education, 2004).

#### 2.4.3.3.5 Education, employment and income

Education does not appear to have an exclusive influence on SWB, and many studies reported by Diener (1984) found no significant effects between education and SWB, especially when controlling for other variables such as income. Ryff and Singer (1996), however, found that educational level could influence well-being, even after controlling for income. They found better well-being for those with a higher education, especially on the dimensions of purpose in life and personal growth. These results apply to both sexes. Education can also interfere with SWB when it leads to expectations which cannot be met and subsequently increases the goal-achievement gap (Continuing Psychology Education, 2004).



Unemployment consistently predicts poor SWB (Diener, 1984; Pavot & Diener, 2004). Diener (1984, p.555) even concludes that unemployment has a “devastating impact” on a person’s SWB. Strümpfer emphasises that work experience over a relatively long period of time is conducive to fortigenesis. Thus, employment has a strength-building capacity, whereas unemployment is potentially harmful to well-being.

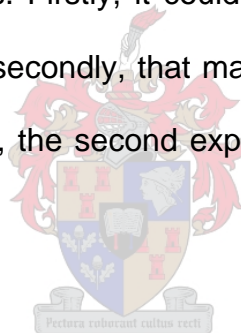
Ryan and Deci (2001), though, conclude that monetary success is not a predictor of happiness or well-being. Diener et al. (1999) disagree and reported that wealthier people are happier than poorer people, but that the effects are rather small. It would



seem that income does play a role in individual happiness, but perhaps not as significant as popular culture would have one believe.

#### 2.4.3.3.6 Marriage

Social relations and marriage consistently predict better SWB (Continuing Psychology Education, 2004; Diener, 1984; Pavot & Diener, 2004). Myers (2000) concludes, from literature, that married people reported being happier and more satisfied with life, especially compared to separated and divorced persons. He explains that the seemingly strong correlation between happiness and marriage can be explained in one of two ways. Firstly, it could be that happier people are more appealing marriage partners, or secondly, that marriage itself has beneficial effects. According to Mastekaasa (1995), the second explanation is most prevailing among researchers.



#### 2.4.3.3.7 Religion

Myers (2000) reports several studies that found correlations between religion and happiness. Inglehart (in Myers, 2000) found that persons who actively participate in religion are somewhat happier than those who do not participate in religion. There are also evidence that suggest that the effect of religion on SWB is not inevitably positive (Continuing Psychology Education, 2004). More research is needed to establish to what extent and how religion influences well-being.

#### 2.4.3.3.8 Health

It seems that the person's perception of health, rather than an objective assessment of health status, influences well-being. Okun, Stock, Hating and Witter (in Ryan & Deci, 2001) conclude that it is the meaning-attribution to health states that influences SWB, rather than objective ratings by others, such as doctors. Perceptions of health seem to be more important than objective health in predicting SWB (Continuing Psychological Education, 2004). A related concept to health is leisure activities, including exercise. Diener (1984) concludes that certain types of activities should enhance SWB, but that the parameters of the relationship between activity and SWB are unclear.

Positive relations with others, according to Ryff and Singer (2000), can promote health. They conclude that persistently loving and intimate relationships might actually have a protective function for health.



#### 2.4.3.3.9 Life events

Suh, Diener and Fujita (1996) found that only recent events (during the previous three months) influence SWB, with no correlation between distal life events and SWB. SWB are influenced by external changes and life events, but tends to quickly return to a stable baseline. This baseline seems to be a function of personality, and is consistent with Headey and Wearing's (1989) equilibrium model of SWB. The dynamic equilibrium model proposes that personality predisposes a person's set

level of positive and negative affect. Life events may temporarily move people away from their baselines, but they eventually always return to it.

#### 2.4.3.3.10 Temperament and personality characteristics

Temperament and traits/certain personality characteristics consistently predict SWB (Diener, 1984; Pavot & Diener, 2004).

Two of the personality dimensions strongly associated with SWB is extroversion, specifically sociability (Diener, 1984), and neuroticism (negative correlation), according to several studies in Diener et al. (1999). Other personality aspects such as conscientiousness/agreeableness, self-efficacy (mostly in Western societies), optimism and positive illusions (which includes unrealistically positive self-perceptions and an overly optimistic view regarding the future) have also been strongly associated with SWB (Continuing Psychology Education, 2004).

#### 2.4.3.3.11 Cultural factors

Several cultural factors have an influence on well-being, and this should be acknowledged when applying positive psychology in multi-cultural settings. Cultural context strongly influences definitions of identity, goal setting and happiness (Lopez et al., 2002). Lopez et al. (2002) point out the following:

- Cognitive constructs, such as hope and optimism, have not been sufficiently investigated to know if they represent the same characteristics across cultures.

- The positive psychology constructs that have been investigated focus on predominantly white samples, and their validity cross-culturally has to be questioned.
- Negative generalisations about certain groups may result from these invalid multi-cultural comparisons.

Research on happiness and SWB often compare levels of each variable across cultures and nations. Diener (2000) concludes that cultural and societal factors influence SWB in three ways. Firstly, cultures whose basic needs for food, shelter and water are met, show greater SWB. Secondly, culture affects people's goals and values, and these differences alter the correlates of SWB. Finally, variations in optimism and positivity, social support, coping patterns and degree of regulation of individual desires seem to account for variations in SWB across nations.

SWB is higher in the wealthier nations, according to Diener and Suh (in Diener, 2000), likely because they are more equipped to fulfil basic human needs. Life satisfaction has different correlates across cultures, according to Diener (2000). Individualistic cultures, for example the United States of America and Western Europe, place emphasis on the individual's choices, thoughts and feelings. Persons in collectivist cultures, in contrast, operate for the betterment of the group, and not the individual. As such, Diener and Diener (1995) reported that self-esteem correlates strongly with life satisfaction in individualistic cultures, but that the correlation is much less in collectivist culture, although it is still significant. Their findings are based on a sample of 31 countries worldwide (including South Africa). They have subsequently also found that satisfaction with friends co-varied more with

satisfaction with life in individualist cultures, and, against expectation, satisfaction with family did not relate more strongly with life satisfaction in collectivist cultures. Their findings also support previous literature which found a stronger covariance of financial satisfaction with life satisfaction in the poorer nations, possibly indicating that finances become less important once basic needs have been met. Clearly, then, culture has a definite influence of the constructs of well-being.

Findings by Suh, Diener, Oishi and Triandis (1998) also support the notion of cultural differences in SWB correlates. They found that emotions, but not norms, relate strongly with life satisfaction in individualistic nations. In contrast, in collectivist cultures, norms and emotions are equally strong predictors of life satisfaction. They conclude that internal congruence (or the absence of internal conflict) may not sufficiently translate to global well-being in collectivist cultures. There is also a warning that each culture/nation should not, *per se*, be viewed as homogeneous, for intra-nation differences also exist. South Africa can clearly serve as an example of a heterogeneous nation. Researchers should therefore take note of the multi-cultural influences in this nation, and be aware of its implication for well-being research.

To conclude this discussion of culture and well-being, the guidelines given by Lopez et al. (2002) for placing positive psychology in a multi-cultural context will be presented. Lopez et al. (2002) insist that the magnitude and equivalence of the constructs of positive psychology should be examined across nations and that there has to be recognition of the influence and value of religious and spiritual beliefs on meaning in life. Cultural experiences should also be examined to discover the clues they give to better understand the good life. Examples of exceptional functioning

(exemplars) should be studied from a positive psychology framework to increase our understanding of what makes people function well despite diverse challenges. Finally, they emphasise that investigators should identify and examine what works for people in their lives.

It should be clear that a multitude of variables could influence well-being. Therefore, researchers need to incorporate controls for these variables in their designs when measuring well-being. The following section will look more closely at measurements of well-being.

#### 2.4.3.4 Measuring psychological well-being

Measurement will be influenced by the researcher's theoretical orientation to well-being. As already discussed, different aspects of well-being will require different measures. Most researchers agree, however, that well-being is a multi-variable construct (for example Pavot & Diener, 2003, 2004; Ryff, 1989). Measurement issues and instruments will be discussed under 3 headings: happiness and life satisfaction (SWB); constructs associated with well-being (such as locus of control and self-esteem) and finally, integrated approaches to well-being (specifically PWB measures).

**SWB is measured by self-reports**, covering both cognitive and affective evaluations of well-being (Diener, 1984). There are single-item and multi-item measures. Single-item measures have been criticised for having low reliability over time (in Diener, 1984), and examples are Cantril's Self-anchoring Ladder, Gurin's

Scale and the Delighted-terrible Scale, developed by Andrews and Withey. Diener (1984) alludes to the shortcomings of single-item measures: they tend to be skewed towards happiness and they are unable to cover all aspects of SWB, presenting a very narrow view of SWB. They are, however, handy as quick, global SWB measures.

Due to the multi-dimensional nature of SWB (Pavot & Diener, 2003, 2004), logic dictates that multi-item measures would be preferred to measure it. Well-known and widely used multi-item measures are:

- Bradburn's *Affect Balance Scale* (in Diener, 1984), which measures both positive and negative affect.
- Kamman and Flett's *Affectometer 2* (1983), which measures happiness and sense of well-being, and specifically the frequency of positive and negative affect.
- Diener, Emmons, Larsen and Griffin's *Satisfaction with Life Scale* (1985) is a cognitive measure of a person's assessment of his/her quality of life.
- *Oxford happiness questionnaire* by Hills and Argyle (2002) is a 29-item scale measuring SWB.

Most measures of SWB correlate moderately with each other, and have temporal reliability and internal consistency (Diener, 1984). In South Africa, the Affectometer 2 and Satisfaction with Life Scale were validated for use in the multi-cultural South African context (Wissing and Van Eeden, 2002). Further empirical studies are needed to validate the other measures of SWB in the South African context.

Examples of **measures for the different components of well-being** include:

- Antonovsky's Sense of Coherence Scale (1987) is a 29-item scale and measures the way an individual experiences the world and his/her life in it. Components of this scale are comprehensibility, manageability and meaningfulness. Wissing and Van Eeden (2002) confirm the scale's applicability in a South African context.
- The Generalised Self-efficacy Scale by Tipton and Worthington (1984) measures the degree of generalised self-efficacy beliefs of an individual. It is assumed that there is a relatively enduring set of beliefs about one's ability to cope effectively in a wide range of situations. This measurement tool has acceptable construct validity, according to its authors.
- Rosenbaum's Self-control Schedule (SCS) (Rosenbaum & Jaffe, 1983) assesses a person's learned resourcefulness. The content areas covered by the SCS are the use of cognitions to cope with emotional/physiological responses; the application of problem-solving strategies; the ability to delay immediate gratification; and a general belief in self-regulation of internal events.
- The Hope Scale (Snyder et al., 1991) is based on the assumption that hope is consistent across situations and time. The Hope Scale has eight hope items and four fillers, and answers fall on a 4-point scale. The scale measures determination of goal-attainment and cognitive appraisal of surmounting goal-related obstacles.

Wissing and Van Eeden (2002) conclude that it is empirically unclear whether the individual components refer to the same or different aspects of well-being. Their



results indicate that a combination of constructs yield a better relation to well-being than any individual construct, again confirming the multi-dimensionality of well-being.

**The measurement of PWB**, as an integrated approach to well-being, will now be discussed. Two holistic measures of psychological well-being are Ryff's Scales of Psychological Well-being (1989) and the Mental, Physical, and Spiritual Well-being Scale (Vella-Brodrick & Allen, 1995). The Scales of Psychological Well-being (Ryff, 1989) were operationalised into six dimensions of well-being: self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth. Each of these dimensions could yield both high and low scores. The psychometric aspects of the questionnaire will be discussed in the section on *Methodology*, but it is important to mention here that the sub-scales correlate "modestly and positively" with other measures of positive functioning, and negatively with measures of negative functioning (Ryff & Singer, 1996). This once again confirms the relatedness of most measures of well-being, whether working from an SWB or PWB perspective.

The Mental, Physical and Spiritual Well-being Scale (Vella-Brodrick & Allen, 1995) was developed as a multi-dimensional measurement of well-being, or a more holistic measure of health. It has 30 items and incorporates three scales on mental, physical and spiritual well-being. Test-retest reliability and internal consistency were satisfactory in the initial student and worker samples. The scale was also validated against other measures of health and spiritual well-being, in the form of the General Health Questionnaire and the Spiritual Well-being Scale. The authors do, however,

admit that more psychometric work is needed on the questionnaire, but that initial results are promising.

It is a daunting task to select an appropriate questionnaire for a particular study from the magnitude of measures on SWB, PWB and all the different components of well-being. It is important to choose a measure that is informed by a clear research question and that is applicable to the population being tested.

The following section is a general discussion of applied positive psychology, in order to provide a complete picture of the realm and possibilities of positive psychology as a paradigm.

#### 2.4.4 Applied positive psychology



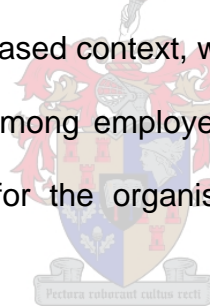
The final area of discussion on well-being will reflect the diverse settings and disciplines where well-being literature is applied. Linley and Joseph (2004) define applied positive psychology as the “application of positive psychology research to the facilitation of optimal functioning” (p.4).

**Well-being and work** have been extensively investigated. Unfortunately, here also, negative aspects of work have dominated research, as pointed out by Turner, Barling and Zacharatos (2002). There are, however, studies emerging on job-related well-being, especially from the field of industrial/organisational psychology. Warr (in Turner et al., 2002) highlights job satisfaction, job involvement and organisational

commitment as influencing factors for job-related well-being. Turner et al. (2002) suggests the following for improving the work experience of the individual:

- Workers should be encouraged to actively engage with their tasks and working environment.
- Autonomy in performing jobs is important for job-related well-being.
- The work should be challenging.
- There should be sufficient opportunity for social interaction at work.
- Workers should be able to exert choice and thus build competency.

Turner et al. (2002) suggest that high-quality work, coupled with transformational leadership operating from team-based context, will lead to greater trust, commitment, perceived fairness and control among employees and management, which in turn will lead to healthy outcomes for the organisation and better well-being for its workers.



**Physical activity and sport** are another area that influence well-being. Fox, Bouthcher, Faulkner and Biddle (in Mutrie & Faulkner, 2004) identified four main functions where physical activity influences well-being: (1) physical activities prevents mental health problems; (2) it has been used as a treatment/therapy for mental illness; (3) persons with mental health problems can improve their quality of life through exercise; and (4) physical activities can promote psychological well-being in the general public.

Potgieter (1997) also mentions that physical activity enhances well-being by increasing quality of life, enhancing mood, reducing stress and depression and strengthening self-concept and self-efficacy.

**The discipline of sport psychology** also applies the principles of positive psychology. Its definition focuses on achieving optimal athletic performance, but also human enrichment (Cox, 1998). Potgieter (1997) discusses motivational strategies, goal setting, optimal arousal and concentration as facets of performance, and thereby highlights the application of positive psychology concepts to sport.

The field of **human-animal interaction** is another example of a discipline where the principles of positive psychology may be applied. The following section will discuss this relationship in greater detail.



#### 2.4.5 The role of the human-animal interaction in well-being

An investigation into the human-animal interaction as a means of enhancing well-being should probe the following aspects of the human-animal interaction, among others:

- Does it improve SWB?
- Does it improve health?
- Does it improve any other variable associated with well-being?

In his introduction to his book on pets and mental health, Odendaal (2002) explains that it was the observed emotional and positive aspects found in studies on pet ownership that alerted both researchers and the public alike to the possible advantages of the human-animal interaction. Research on the human-animal interaction has consistently shown positive emotional, physical and psychological improvements due to various forms of animal contact (see section 2.3.5).

These positive findings on human-animal interaction can be conceptually explained by theories on well-being, such as the one presented by Ryff (1989):

- Self-acceptance can be enhanced by the unconditional acceptance by a pet.
- Positive relations with others can also include relationships with pets.
- Environmental mastery can increase with the use of a service dog.
- Personal growth can be enhanced when animals facilitate therapy and help the person to open up to new experiences.
- Animals can give a lonely person a purpose in life through having to care for another living creature.
- Autonomy can be enhanced through a shift to internal locus of control. Service dogs have been associated with this shift in persons with disabilities.

Literature on well-being is precisely concerned with identifying the variables involved in making people function optimally. It would seem that the human-animal interaction generally makes people happy and positively influences people's lives. When investigating interventions for the enhancement of well-being, one may well consider

the use of animals as facilitators for emotional support and social interactions, especially if the persons involved already foster an affinity towards animals.

The field of human-animal interaction and intervention can also learn from the principles of positive psychology. AAT practitioners may use literature on well-being to find out what will work and how to apply it when designing an intervention and programme evaluation. Theorists can also better explain the positive/negative effects of human-animal interventions through consulting well-being literature.

The field of positive psychology can gain further insights into human well-being through paying attention to the mechanisms involved in positive human-animal interaction, such as the link between positive interactions and health. Researchers can also investigate practical applications and evaluations of positive relations with others, even animals, and study the personality characteristics of the type of person that benefits psychologically from animals. The specific well-being constructs that are influenced by animals, such as self-esteem, can also be the focus of researchers.

The application of the findings from the field of human-animal interaction lends support to the notion that well-being is enhanced by different means and settings, highlighting the multi-dimensionality of well-being and the inter-disciplinary application of human-animal interaction studies.

## 2.5 Psychological well-being of persons with blindness and the role of guide dogs

Literature on the well-being of persons with disabilities is very limited. One theoretical study that investigates well-being, focuses on the potential for positive growth following acquired physical disability (Elliot, Kurylo & Rivera, 2002). The authors argue that several life domains influence adjustments to disability. The primary domains involved in adjustment are individual characteristics and the immediate social and interpersonal environment.

Elliot et al. (2002) conclude from literature that demographic factors account for a very small portion of variance in adjustment. They also found that aspects of the physical disability do not predict adjustment, but that there may be group differences between different types of disabilities. Health-compromising behaviours prior to disability (such as alcohol abuse) complicates acceptance of a disability and several personality factors mediate adjustment to disability; internal locus of control, effective social-problem-solving skills, hope, lower neuroticism and higher agreeableness have for example all been associated with better adjustment, according to Elliot et al. (2002). Elliot et al. (2002) found that social support is associated with well-being after acquiring a disability, whereas environmental barriers inhibit positive growth. Finally, internalisation of social stigma and stereotyping compounds problems of adjustment to disability.

The following model was presented by Elliot et al. (2002, p.690) to explain positive growth following disability.

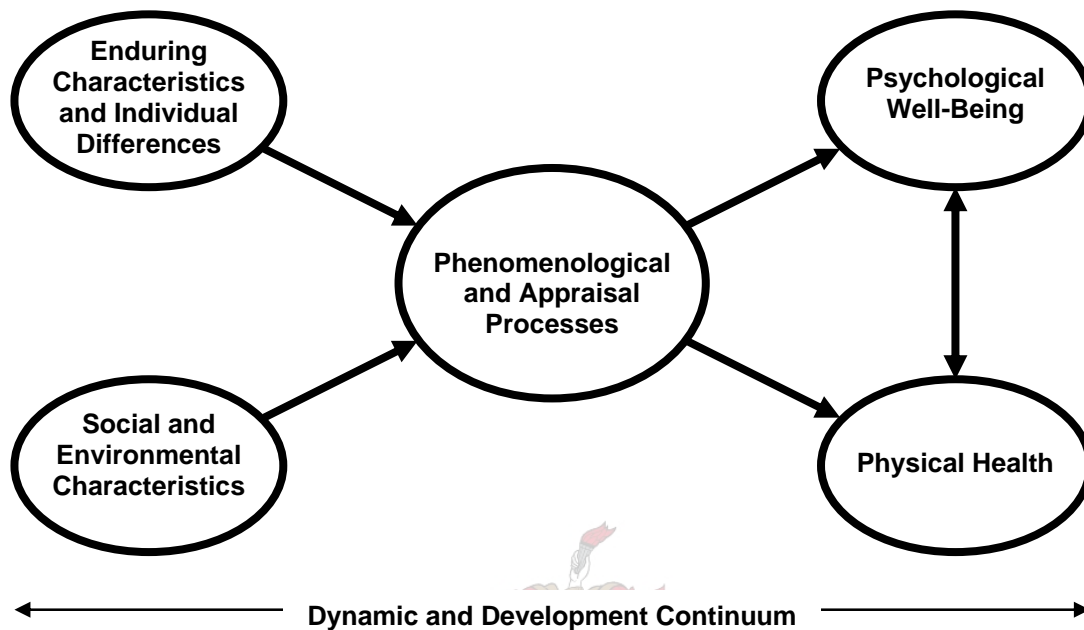


Figure 1 Model for understanding positive growth following disability

In this model, individual characteristics and environmental factors influence the phenomenological and appraisal processes of the person with an acquired physical disability. These appraisals, in turn, have a considerable influence on subsequent adjustments to the disability. Elliot et al. (2002) conclude that adaptive people exhibit:

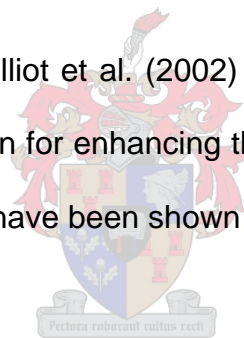
1. an internal locus of control, by means of which they exercise control over their internal states rather than to attempt to change or control external events
2. active meaning finding processes and re-interpretation in order to seek personal growth and positive meanings in each situation



3. limited ruminations about their perceived discrimination; they do not dwell on perceived victimisation but consciously focus on re-adjustment
4. adaptive personality and interpersonal characteristics, such as agreeableness and marital satisfaction, contribute to positive growth after acquired physical disability.

Elliot et al. (2002) finally conclude that optimal adjustment for persons with acquired physical disability are measured in their physical and psychological health, and that interventions should focus both on strengthening individual characteristics and minimising societal barriers that inhibit health.

Drawing on the conclusions of Elliot et al. (2002) for interventions, guide dogs may prove a viable form of intervention for enhancing the health of persons with acquired visual impairment. Service dogs have been shown to:



- strengthen individual characteristics, such as enhancing internal locus of control (Allen & Blascovich, 1996; Duncan & Allen, 2000) and increasing self-esteem (Allen & Blascovich, 1996; Duncan & Allen, 2000; Valentine, Kiddoo & LaFleur, 1993).
- minimise environmental barriers, such as providing social facilitation (Eddy, Hart & Boltz, 1988; Mader, Hart & Bergen, 1989), giving emotional support (Lane et al., 1998; Steffens & Bergler, 1998) and promoting mobility (Guide Dog Foundation for the Blind, Inc., 2002).

Although the model by Elliot et al. (2002) focuses on acquired physical disability, it may be assumed that persons with congenital blindness face the same type of environmental barriers. Conclusions and interventions based on environmental adjustments and societal support can thus also be applied to persons with congenital disabilities. Psychological well-being can be enhanced in those with congenital and those with acquired disabilities through providing an enabling environment. Guide dogs can assist in making the environment more accessible and predictable.

As far as the differences between persons with congenital versus acquired physical disability are concerned, very limited research focuses on comparing individual characteristics and their implications for well-being. The bulk of literature (for example Beaty, 1991; Mrug & Wallander, 2002) compares self-concept scores between sighted children and congenitally blind children, but not between the congenitally blind person and the person with acquired blindness. However, if one assumes that the congenitally blind person's development differed from the person who acquired blindness only later in life, as was proposed in an earlier section (see section 2.2.3.2), then it is possible that individual characteristics between these groupings are substantially different. What this means for the application of the model of Elliot et al. (2002), is that although environmental barriers are the same for both groupings, group differences could exist above and beyond individual differences.

It can also be assumed that a well-adapted, psychologically healthy, congenitally blind person would have individual characteristics similar to a well-adapted person with acquired physical disability. They may simply have had different processes of

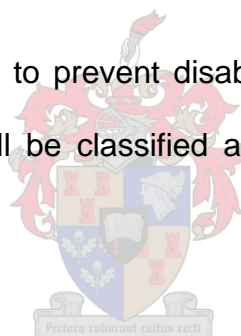
acquiring positive phenomenological appraisals. Although the literature search was confined to well-being for persons with disabilities, there is no reason to believe that a person with a disability would perceive psychological health differently than an able-bodied person does. A person who experiences psychological well-being will experience it despite life's stresses, although some stresses have a more severe impact on an individual and pose more of a challenge to healthy adjustment, as is the case with a physical disability.

Lindemann (1981) also indicates that persons who acquired blindness during adulthood seem to retain a better physical appearance, spatial orientation and interpersonal relations in comparison with congenitally blind persons. Ash, Keegan and Greenough (in Lindemann, 1981) stressed that acceptance of limitations is an important predictor of adjustment to disability.

One area often identified as important to well-being, and also highlighted in previous sections, is employment. Joffe and Bast (in Lindemann, 1981) found that employed and mobile individuals with visual impairment have distinct personality profiles. They have a better ability to cope and less dependence on defence mechanisms than other visually impaired individuals with a history of unemployment. Specifically, individuals with better employment records demonstrate a better ability to integrate material, better articulation, less distractibility, more capacity for objectivity and less need for pathological defence mechanisms (such as doubt, projection, regression and rationalisation).

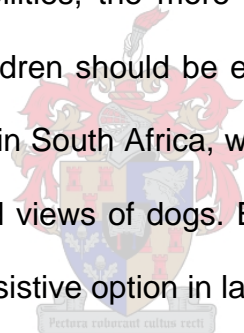
Literature seems to be in agreement that environmental factors are an important influence on the healthy functioning of persons with a disability. This was re-affirmed in the Integrated National Disability Strategy (1996), where environmental accessibility, education and training, employment, housing and social security were identified as target areas for equal participation of persons with disabilities. The following encompassing services have also been identified to promote the healthy functioning of children with disabilities (in Philpott, 2004):

1. rehabilitation, through which people with disabilities are enabled to function as independently as possible
2. disability awareness raising
3. provision of assistive devices to prevent disability, to rehabilitate or to equalise opportunities. Guide dogs will be classified as an assistive device to equalise opportunities.



Once it is assumed that guide dogs, as an assistive device, may contribute to the person's well-being, as was confirmed by Duncan and Allen (2000), it is important to maximise this intervention possibility, by ensuring that guide dogs are a viable option for persons with visual impairment. This could be achieved through the integration of positive experiences with dogs in the school curriculum of children with blindness, positive role models and financial support. Young (1997) discusses the importance of childhood exposure to guide dogs for educational purposes. She provides an example, based in Delaware, USA, where visually impaired children were exposed to guide dogs as part of the school curriculum. The children were exposed to trained therapy dogs in group settings, such as on weekend programmes, where they were

allowed to interact with the dogs. They were also introduced to an educational video on guide dogs. Individual attention was given to children with a fear for the dog, and systematic exposure proved a valuable therapy. Young (1997) ascribes the success of the exposure programme to the fact that the children remained in control and comfortable in their approaches to the dog, while the dog remained calm and quiet. After several sessions, the children showed great curiosity about guide dogs, and asked questions about owning a guide dog. Subsequent sessions also exposed the children to walking with a harnessed dog. Proposed future sessions on dog maintenance were also reported. Young (1997) concluded her discussion by stressing the importance of freedom of choice, and that the more choices that are presented to children with disabilities, the more independent they can become. It seems like a valid point that children should be exposed to the assistive device as well. This is also very applicable in South Africa, where there are many children from different cultures that hold varied views of dogs. Exposure to dogs is necessary for children to consider it a viable assistive option in later years.



*Empowerment* is a term often mentioned with reference to persons with disabilities, or any other minority/previously oppressed group of individuals. Rappaport (in Dempsey & Foreman, 1997) describes empowerment as a process by means of which persons gain more control over their lives. Dempsey and Foreman (1997) see empowerment as “both a process and a state; as occurring at the individual, group and community level; as characterised by attitudes, behaviour, knowledge, and skill; and as a phenomenon that will manifest itself in different forms in different settings” (p.288). Although the above certainly describes empowerment, it does not define it.

Based on an extensive literature review, Dempsey and Foreman (1997) identify the key components that define empowerment:

1. self-efficacy, which is the ability to produce the results that were intended;
2. settings that provide ample opportunities for participation and collaboration have been identified as empowering settings, with mutual respect being fostered among individuals in the group;
3. sense of control, by means of which attitude and behavioural changes are seen as possibilities to exercise control over one's life;
4. meeting personal needs through addressing the individual's aspirations makes individuals more capable and competent, and family life plays a central role in fulfilling personal needs;
5. understanding the environment involves knowledge about critical services, structures and resources that are available to the person in his/her environment;
6. personal action is seen more as a potential outcome of empowerment rather than an essential component for empowerment, by means of which a person takes personal action to address a need;
7. access to resources, such as social support, community groups and government assistance, helps empowerment by providing relevant resources, information and skills to the individual.

It is quite an easy step to place empowerment within the positive psychology paradigm. Cowen (1991) explains that empowerment can be seen as a key link in the pursuit of wellness, or simply that the presence of both wellness and empowerment can provide people with a sense of control of their futures. Wissing

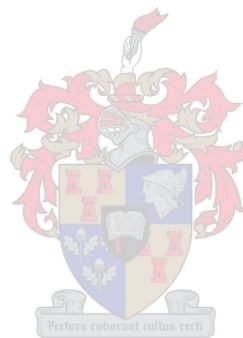
and Van Eeden (2002) identifies constructs such as self-efficacy and sense of coherence, and Ryff (1989) mentions self-acceptance, autonomy, environmental mastery, purpose in life, personal growth and positive relations with others as central concepts to well-being. Autonomy, self-efficacy and environmental mastery are echoed in Francescato's (2003) definition of individual empowerment, where he stresses self-acceptance, self-confidence and the ability to control and participate in one's community. Clearly empowerment and well-being are related concepts, and both can be an outcome and a process. Guide dogs can thus also be an empowering "tool", for they may expose a person with blindness to the resources they he/she utilise to fulfil his/her own needs, as well as to enhance self-efficacy and sense of control.

## 2.6 Summary



The introduction to this dissertation defined scientific research and identified the natural phenomena that inspired the current research. Chapter 2 forms the basis for this study, by providing a clear overview of the most pertinent literature, so as to formulate a clear research question. It became clear from the literature, that the occurrence of disability is widespread in South Africa. There are some policies in place to address the social issues facing persons with disabilities, but much more is needed to provide an enduring enhancement of the lives of the persons living with disabilities. The literature review introduced the field of positive psychology as a framework for studying and enhancing the lives of persons with disabilities. The human-animal interaction was also investigated as a possible means of enhancing the well-being of people, with a specific focus on service animals and their potential

for positive influence on their human owners. Finally, guide dogs were presented as a possible tool for positive growth, as well as a means of empowering persons with disabilities.





## CHAPTER 3

# METHODOLOGY

### 3.1 Design and sampling technique

The designs and sampling techniques that were employed for the quantitative and qualitative designs will be discussed under separate headings.

#### 3.1.1 Quantitative design

The design was necessitated due to the limited number of prospective guide dog owners that receive dogs every year (on average only about eight persons from the Western Cape, which represented the most accessible population to the researcher, receive a new guide dog in a year). As the study was conducted in one year, the researcher could not perform an experiment (with pre- and post-testing of the dependent variable) on such a limited sample size. A small sample size cannot yield normally distributed data, which greatly limits statistical analysis on possible within-group differences. With such a small sample size, generalisation of the findings to the population as a whole is also adversely affected (due to non-random assignment of participants and limited representation of the population in the study). Rather than employing a within-subject design on limited numbers, it was decided to rather increase the sample size by choosing a naturally occurring group of guide dog owners, which may yield normally distributed data and facilitate statistical analysis (by employing a parametric measure, which is more powerful in detecting group differences).

Choosing only one group, namely guide dog owners, would have greatly limited any interpretations of the findings, for there would have been numerous uncontrolled and confounding variables that were not considered. Instead, a control group was chosen in order to reduce and control for the effects of potential confounding variables (Graziano & Raulin, 2000). Thus, a differential, naturally occurring, control group design was employed.


The independent variable, blindness, in the current study was investigated on two levels. The two levels represented the experimental group, which consisted of 29 persons who are blind *and* who are guide dog owners, while the control group consisted of 36 persons who are blind and who are *not* guide dog owners. Thus, the first objective of the study was to investigate whether differences exist between the experimental group and the control group on the dependent variable, PWB. This part of the study was differential in nature, with a post-test only, non-equivalent control group design. Although an experimental research design with randomised sampling, would have been preferred, practical limitation of time and space prohibited this. As such, a differential design limits the generalisation of the research and limited any interpretations of causality. The second objective of the study, namely whether the differences between groups can be attributed to guide dog ownership, was dependent on statistical analysis of the confounding variables that were identified from the literature on PWB, and thus formed part of a statistical extension of the differential design.

### 3.1.2 Qualitative design

A qualitative design governed the third objective of this study. To fully determine the lived experience of anticipating and owning a guide dog, as well as the possible influence of a guide dog on personal well-being, semi-structured interviewing was employed. Participants were interviewed before guide dog acquisition and also after they had received their guide dogs. At least three months were allowed as an adjustment period after guide dog acquisition before the second interview took place.

### 3.2 Participants and procedure

The sample for the quantitative part of the study had to meet the following requirements:

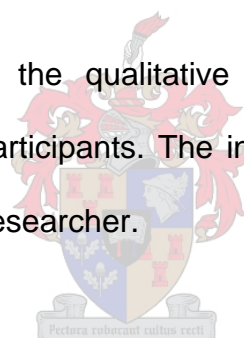
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- The image is a watermark of a university crest, likely from the University of the Western Cape, featuring a shield with various symbols, a crown on top, and a banner at the bottom with the motto "Pectora cubant cibus recti".
- All participants had to be legally blind.
  - All participants had to be older than 18 (as this is the minimum age at which a person can receive a guide dog).
  - Participants had to be living in South Africa.
  - Participants had to be able to complete the questionnaire electronically (with the assistance of a software programme which “reads” the questionnaire to the person).

Ad hoc and snowball sampling was used to identify the participants in the study. Two organisations, namely the Institute for the Blind in Worcester and SA Guide Dogs in Cape Town, were the main source of information for the contact details of persons in

the Western Cape who could be contacted for participation in the current study. Prospective participants were contacted electronically and then also requested to identify other prospective participants on their mailing lists.

The questionnaires were completed electronically by the participants, and thus the specific location of the research varied from participant to participant. The instructions in the questionnaire were, however, consistent and should control for the lack of a consistent testing environment. The validity of the assessment was enhanced through the use of a standardised measuring instrument, Ryff's Scales of Psychological Well-being (1989), which will be discussed in section 3.3.1.

Six participants participated in the qualitative part of the study. The current researcher interviewed all the participants. The interviews were recorded and then transcribed, also by the current researcher.



When the individuals and dates were announced for training and guide dog placement, SA Guide Dogs informed the current researcher of the prospective guide dog owners from the Western Cape. Training with a new guide dog takes place at the Gladys Evans Centre in Johannesburg. Before the prospective owners left for Johannesburg, the first interviews were conducted. The interviews took place across the Western Cape at the participants' residences.

All the individuals who would receive training in 2005 and about whom the researcher was informed, were contacted by the researcher and all agreed to the study. It has to be noted that very few persons are trained with guide dogs every

year. In 2004 only about 13 people from the Western Cape received new guide dogs. From the six participants who participated in the qualitative part of the study, four received their first guide dog and only two received their second guide dog.

The second set of interviews took place approximately (but not less than) three months after guide dog acquisition. The interviews were again conducted and transcribed by the current researcher at the residence of each participant.

### 3.3 Measuring instruments and interviews

In this section an explanation will be given of the quantitative and the qualitative design for this (sections 3.3.1 and 3.3.2 respectively).

#### 3.3.1 Quantitative design



##### 3.3.1.1 Development of the questionnaire

Ryff and Singer (1996) present a model of positive functioning, which they call Psychological Well-being (PWB). This model emerged from diverse theoretical domains from both psychology and philosophy. They integrated theories from Maslow, Rogers, Allport, Jung, Erikson, Buhler, Neugarten and Jahoda on the meaning of positive psychological functioning. These theories originated from mental health, clinical, and life-span development theoretical backgrounds. Ryff and Singer (1996) conclude that all the above theorists wrote about similar features of well-being, albeit from different theoretical backgrounds, and that they converge to

provide the basis for a model on well-being. This new model by Ryff and Singer (1996) consists of six dimensions: self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life and personal growth. As each of these dimensions has already been discussed, no further explanations will be given here. This model is distinct from existing theories on happiness and life satisfaction, which were criticised by Ryff and Singer (1996) as lacking theoretical soundness. Several philosophical frameworks were also highlighted and integrated into this new model of well-being, which Ryff and Singer (1996) do not regard as culture-bound (although culture will influence the relative importance of each component).

Ryff (1989) bases the operationalisation of this new model on Wiggins's construct-orientated approach to personality assessment. The empirical translation to a measurement was theory-guided, with specific constructs that point to different aspects of positive functioning. The scale construction began with writing definitions for the six-dimensions of well-being. The scale definitions incorporated both a high versus low score definition, which will be discussed in subsequent sections. Approximately 80 items were generated for each dimension, equally representing the two poles of the definition (half representing the negative pole and half the positive pole). Three item writers generated these items, which were specified to be self-descriptive in nature, able to fit the theoretical definitions and to be applicable to both sexes and adults of any age. Over half of the 80 items per scale were eliminated through preliminary evaluations, which identified ambiguous, poor fitting, poor distinction items and items with an inability to generate a variable response. The remaining 32 items per scale (16 negative and 16 positive items) were administered to a research sample consisting of 321 young, middle-aged, and older adults in the

USA, and responses were recorded on a six-point Likert scale (ranging from Strongly disagree to Strongly agree). All the items were then correlated with their specific scales (item-to-scale correlations) and all items that had low correlations with their scale, or were more correlated to a different scale than its own, were deleted. Each scale then consisted of 20 items (referred to as the parent scale) divided approximately equally between positive and negative items.

Different versions of the Scales of Psychological Well-being have subsequently been developed. Ryff and associates currently employ the 14-item scales in various studies (personal communication, August 30, 2004). In a longitudinal study in Wisconsin, USA, 9-item scales are used and various largescale international studies employ 3-item scales (personal communication, August 30, 2004). The 14-item scales are currently the preferred version, and will be employed in the current study.



### 3.3.1.2 Description

Due to the multidimensionality of psychological well-being (Pavot & Diener, 2003; Wissing & Van Eeden, 2002), several constructs will be examined in the sample. In choosing a measure for well-being, Pavot and Diener (2003) emphasise that several components contribute to well-being and that, although related, these components should be tested independently, as each component has unique characteristics. They also remark that multi-item formats are currently preferred when testing well-being. For this reason, a multi-item, multi-scale questionnaire was employed to measure several aspects of well-being. The Scales of Psychological Well-being by Ryff (supplied by and used with permission from the author, 2004) was used to

measure psychological well-being. The choice of this questionnaire was advised by Wissing (personal communication, August 25, 2004), who specifically emphasised the value of the Environmental Mastery Scale within the questionnaire as pertinent to persons with blindness.

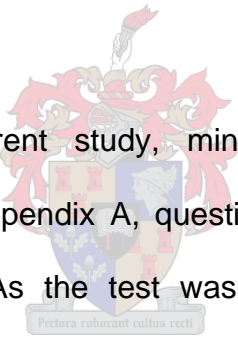
This measuring instrument consists of six 14-item scales (thus 84 questions in total), measuring the following constructs:

- Autonomy – describes a person who operates independently and with self-determination, resisting peer pressure and with a strong inner locus of control;
- Environmental mastery – describes a person who manages the environment successfully and creates opportunities within his/her environment;
- Personal growth – describes a person who experiences continued growth and self-development;
- Positive relations with others – refers to people whose relationships are meaningful and satisfying, and who exhibits strong empathy, intimacy and knowledge of mutual friendship;
- Purpose in life – describes a person with clear goals and meaningfulness in life, with purpose-driven objectives for life;
- Self-acceptance – describes a person with self-acceptance, who accepts the self with his/her good and bad qualities and who remains positive about the self and his/her past life.



### 3.3.1.3 Presentation format and scoring

The items of the six different scales are mixed. The questionnaire was constructed by taking one item from each scale successively into one continuous self-report instrument. The questionnaire contains 84 statements in English, which must be answered on a 6-point Likert scale (strongly disagree = 1, disagree somewhat = 2, disagree slightly = 3, agree slightly = 4, agree somewhat = 5, strongly agree = 6). There are negative (“sometimes I change the way I act or think to be more like those around me” – refer to question 2 in Appendix A) and positive (“most people see me as loving and affectionate” – refer to question 1 in Appendix A) statements in the questionnaire.

The image shows a faint watermark of a university crest in the center of the page. The crest features a shield with various symbols, topped with a crown and a banner. Below the shield is a motto scroll with the Latin text "Pectora roburant cultus recti".

For the purposes of the current study, minor adjustments of the original questionnaire format (refer to Appendix A, questionnaire included with permission from author) were necessary. As the test was originally developed for seeing persons, certain adjustments were needed in order for the participants to complete the questionnaires. Scarpati (2003) discussed test accommodations for persons with disabilities and said that changes in test administration need to be considered in order to accommodate the disability, without making the test invalid. He emphasised the importance of professional judgement in the use of accommodation in test administration; hence, the questionnaire was adapted in the current study. In order for the visually impaired to complete the questionnaire, minor changes were made to its format (refer to Appendix B). Firstly, because of the use of an impersonal medium such as electronic mail, a short description of the current researcher and research were inserted on page one of the questionnaire attachment. Demographic questions

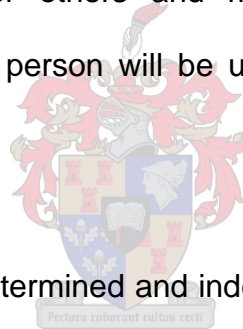
were also added to page one. Instructions for the questionnaire was given on page two. The first part of the instructions remained the same as the original, but the following was added: “Read through each sentence and then indicate the number option that you choose (1 to 6) after the full stop of each sentence. Choose the number option that best describes your present agreement or disagreement with each statement.” Then the Likert scale options were listed (1 to 6) one after another on separate lines. As the questions on the questionnaire was read to the participants by a software programme on their computer, the new formatting allowed for easier response on the computer. As none of the actual questions were changed, however, this accommodation should not have influenced test validity.

There is no aggregate score for the whole questionnaire. Scores are only aggregated for each separate scale (six scales in total). There are positively and negatively scored items. Responses to the negatively scored items are reversed in the final scoring, and high scores on each scale will indicate high self-ratings on the specific dimension assessed. The six scales are represented by the following questions in the questionnaire (the scores of the numbers in brackets are reversed in the final scoring procedure):

- Positive Relations with Others (PRO) – 1, [7], [13], 19, 25, [31], 37, [43], 49, [55], [61], 67, [73], 79.
- Autonomy (A) – [2], 8, 14, [20], 26, [32], 38, [44], 50, [56], [62], 68, [74], 80.
- Environmental Mastery (EM) – 3, [9], [15], 21, [27], 33, 39, [45], 51, 57, [63], 69, [75], 81.
- Personal Growth (PG) – [4], 10, 16, [22], 28, [34], 40, 46, 52, [58], 64, 70, [76], [82].

- Purpose in Life (PL) – 5, [11], [17], 23, [29], [35], [41], 47, 53, 59, [65], 71, 77, [83].
- Self-acceptance (SA) – 6, 12, [18], [24], 30, 36, [42], 48, [54], [60], [66], 72, 78, [84].

A high scorer on PRO scale will have warm, satisfying and trusting relationships with others. This person will be concerned about the welfare of others and will have a strong capacity for empathy, affection and intimacy. Such a person will understand the give-and-take reciprocity in relationships. A low scorer will have few close, trusting relationship and will have difficulty forming warm and open relationships. There will be less concern for others and more isolation and frustration in interpersonal relationships. This person will be unwilling to make compromises to sustain an intimate relationship.



An autonomous person is self-determined and independent and will be able to resist social pressures. This person can regulate behaviour from within, and personal standards are used for self-evaluation. A low scorer will be concerned about the expectations and evaluations of others and will rely on the influence of others in making important decisions. This person usually conforms to social pressures, which directs his/her thinking and the way he/she acts.

Persons who achieve a high score on EM will have a sense of mastery and competence in managing the environment. They will be able to control a multitude of external activities, will effectively utilise their opportunities and choose or create contexts which suit their personal needs and values. Persons with low EM will have

difficulty managing everyday affairs, will feel powerless to change or improve their surrounding context and will be unaware of imminent opportunities. There is a lack of a sense of control over the external environment.

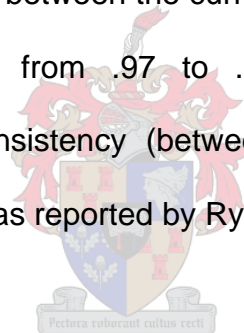
A high scorer on the PG scale will have a sense of sustained development. This person will see growth and expansion within him/herself and experience a sense of improvement over time. There is a feeling of realisation of individual potential, with a sense of more self-knowledge and effectiveness as time passes. When a person experiences a sense of personal stagnation, with seemingly little improvement over time, he/she should achieve a low score on PG. This person often feels bored and uninterested in life and unable to positively adjust attitudes and behaviour.

Purpose in Life is achieved through having goals and directedness, as well as a positive interpretation of present and past experiences. A person with high PL will have purpose-giving beliefs and clear objectives that make life meaningful. When there is a lack of sense of meaning in life, with little direction and purpose, a person should achieve a low score on PL. A person with low PL will thus find little purpose that gives life meaning.

Finally, a person with a high SA score will have a positive attitude towards him/herself and will acknowledge positive and negative qualities in the self. People with high SA feel good about their past. Low scorers will have a feeling of dissatisfaction with the self and will feel troubled by certain personal qualities. Such a person wishes to be different from what he/she is.

#### 3.3.1.4 Reliability

The questionnaire shows good reliability. The internal consistency (coefficient alpha) for each of the scales was as follows, according to Ryff's testing manual (personal communication, August 30, 2004): autonomy (.83), environmental mastery (.86), personal growth (.85), positive relations with others (.88), purpose in life (.88) and self-acceptance (.91). Each scale consists of 14 items, and was correlated with their original 20-item parent scales. The parent scales were developed from theoretical constructions of psychological well-being, and consisted of 6 different dimensions of well-being, operationalised in six different scales (same scales as above), consisting of 20 items each. The correlation between the current 14-item scales and the original 20-item parent scales ranged from .97 to .99. The original parent scales demonstrated good internal consistency (between .86 and .93), and test-retest reliability (between .81 and .88), as reported by Ryff and Singer (1996).



#### 3.3.1.5 Validity

The original 20-item parent Scales of Psychological Well-being correlated moderately and positively with other measures of positive psychology, such as life satisfaction (Life Satisfaction Index), self-esteem (Rosenberg's Self-esteem Scale), morale (Revised Philadelphia Geriatric Center Morale Scale), affect balance (Bradburn's Affect Balance Scale) and locus of control (Levenson's Three Locus of Control Sub-scales), giving some indication of convergent validity (Ryff, 1989; Ryff & Keyes, 1995). Environmental mastery and self-acceptance indicated moderate to strong associations with single- and multi-item scales of happiness and life

satisfaction. The other four scales showed mixed or weak relationships with prior measures in positive psychology (Ryff & Keyes, 1995). Ryff and Keyes (1995) did not view these weak correlations as a threat to validity of their questionnaire, but rather an indicator that previous measures neglected key aspects of positive functioning. There was also a negative correlation between depression measures and the Scales of Psychological Well-being (Ryff, 1989; Ryff & Keyes, 1995), demonstrating discriminant validity.

Intercorrelations among the different scales of the questionnaire itself was expected, and self-acceptance and environmental mastery (.76) and self-acceptance and purpose in life (.72) in particular showed very strong correlations (Ryff, 1989). Although expected, strong coefficients raise a potential problem. If the scales are too highly correlated, they may not be empirically distinct, and thus not represent separate constructs. Ryff (1989), however, still feels the use of the six scales is warranted, for other measures supported their independence from each other, such as strong item-scale correlations. In the scale construction, items on a scale must have correlated more strongly with its own scale than any of the others, and thus the item pools of the separate scales were empirically differentiated. Secondly, differential patterns emerged when the highly inter-correlated scales were correlated with other measures of positive functioning, such as life satisfaction. Finally, a multivariate analysis by Ryff (1989) found that the inter-correlated scales loaded on different, distinct factors of well-being, and differential age profiles also emerged between the different inter-correlated scales. Ryff (1989, p.1074) concludes that there "is evidence to support the view that they represent different facets of positive psychological functioning".

Ryff and Keyes (1995) also found moderate association between their PWB, as measured by the Scales of Psychological Well-being, and SWB. In particular, self-acceptance and environmental mastery had associations with happiness and life satisfaction measures, but the four remaining scales showed mixed or weak relationships with SWB measures. Keyes, Shmotkin and Ryff (2002) conclude that SWB and PWB represent related but distinct conceptions of well-being (refer to section 2.4.3 for a more in-depth discussion). It would seem that the Scales of Psychological Well-being both offer a unique, distinct measure of well-being, but also a valid measure with convergent validity.

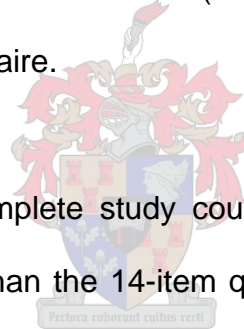
However, certain criticism has also been levied against the Scales of Psychological Well-being. Christopher (1999) criticised the cross-cultural validity of Ryff's measure. He describes the strength of Ryff's as also being its "Achilles' heel" (p.146), for although Ryff integrated personality theories to form her theoretically based model of PWB, the theorists are all from Western cultures, and their theories would inevitably include Western cultural values and assumptions. This Western orientation undermines Ryff's claim of the universality of her measuring of PWB. This is confirmed to some degree by Ryff (in Ryff & Keyes, 1995) in the Korean versus American samples and subsequent difference in their scores on the Scales of Psychological Well-being. Ryff and Singer (1996) indirectly address this critique through admitting that the relative emphasis given to the different component scales may differ across cultures. Some cross-cultural validation studies of the Scales of Psychological Well-being have been conducted. The questionnaire was translated into Italian and administered to 415 people in Italy (Ruini, Ottolini, Rafanelli, Ryff, Fava, 2003). The results confirmed age differences in the environmental mastery

and personal growth scales, as well as higher scores in purpose in life and personal growth for persons with higher socio-economic status. The conclusion of this study is that PWB has good psychometric properties and can be applied in the Italian context. A Japanese translation of Ryff's questionnaire was tested on 574 Japanese students, and a factor structure similar to the original American validation study emerged (Kishid et al., 2004). Some early life experiences, such as relationships with a romantic partner, were linked to greater autonomy and experiences that were deemed to enhance self-esteem were linked to greater personal growth. However, the authors of this Japanese study recommend further psychometric refinement of the Japanese version of Ryff's questionnaire.

Only the 3-item version of the Scales of Psychological Well-being had acceptable factorial validity, according to Van Dierendonck (2004). He found that the internal consistency of the 3-item version of the Scale was unacceptable. This finding lends support to Ryff's strong discouragement of the use of the 3-item version of the Scale, which she describes as having psychometric problems (personal communication, August 30, 2004). Van Dierendonck (2004), however, disagrees that the 14-item version of the Scale is optimal, but rather suggests reducing the questionnaire to about eight items, which will improve overall psychometric quality. This may well be the case, but Ryff (personal communication, August 30, 2004) recommends the standardised version (14-items) of the Scales of Psychological Well-being for use in the current study. As there are clear psychometric evaluations and validation studies available for evaluation of the 14-item version, the current author concurred with this suggestion.



Kafka and Kozma (2002) found no support for the six-factor structure of the Scales of Psychological Well-being (SPWB). They rather found that item loading clustered around three major factors, which could not be identified with the six scales by Ryff. The results were based on a principal-components analysis with varimax rotation. The authors thus concluded that the SPWB has questionable construct validity and that the structure of the questionnaire is limited to face validity. Kafka and Kozma (2002) also criticise previous findings by Ryff, who found a single, higher-order factor when the SPWB was compared to other measures of SWB. They suggest that the items which fail to load sufficiently on each sub-scale should be eliminated, which not only makes it a shorter measure, but also a more psychometrically sound one. This possibly supports Van Dierendonck's (2004) findings, who also suggest shortening the 14-item questionnaire.



Despite all the criticism, no complete study could be found on the psychometric properties of a shorter version than the 14-item questionnaire, except that a 9-item version is employed in the Wisconsin Longitudinal Study, and also the 3-item version, which has been criticised by the Ryff (personal communication, August 30, 2004). Unfortunately, no information could be obtained on the psychometric properties of the 9-item version of the SPWB. No known data was found on the validity of the SPWB in the South African context either, as far as the current research could ascertain. For the present, the 14-item version of the SPWB is the most internationally documented and researched version and, although not perfect, was deemed sufficient for the current study.

### 3.3.1.6 Demographic and multi-cultural variability

Profiles of positive functioning, as measured by the Scales of Psychological Well-being, may vary across the life course, the sexes, social economic status and across cultures, according to Ryff and Singer (1996). There are cross-sectional differences for young, middle-aged and older adults on the Scales of Psychological Well-being. Environmental mastery and autonomy showed incremental age patterns, while personal growth and purpose in life declined with age (Ryff & Keyes, 1995). Positive relations with others and self-acceptance did not differ for the different age groups (Ryff & Singer, 1996). Gender differences were evident only on the Positive Relations scale, with women scoring higher than men. Social economic status influences well-being, according to several studies which use the different forms of the Scales of Psychological Well-being (Ryff & Keyes, 1995). Lower socio-economic status increases the likelihood of negative health outcomes and decreases the likelihood of positive well-being (Ryff & Keyes, 1995).

Contrasts between individualist and collective cultures have also been investigated. In a study by Ryff (in Ryff & Keyes, 1995), Koreans (as an example of a collective culture) measured higher on positive relations with others, but lower on self-acceptance and personal growth than the Americans (as an example of individualist culture) in the sample. Americans were much more likely to see positive qualities in themselves, while the Koreans were group orientated. This cultural finding may be significant in the South African context, with diverse cultures, where individualist cultures and collective cultures co-habituate. The discussion on age, sex, socio-economic status and cultural differences need to be considered in the current study,

and demographic questions were formulated to investigate the sample characteristics.

### 3.3.2 Qualitative design

In the following sections the structure of both the pre-interview and post-interview will be discussed.

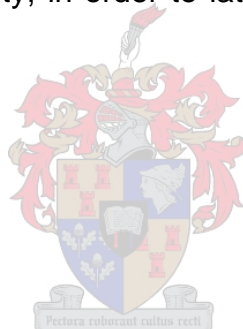
#### 3.3.2.1 Pre-interview

The specific questions that were addressed in the interviews with the individuals in the within-subject study design will be discussed below, coupled with a short explanation of the questions and their purpose.

Before the participants received their guide dogs, they were asked the following questions:

1. Describe a day in your life.
2. Why do you want a guide dog?
3. Please give a description of the cause and time of onset of your blindness, if you feel comfortable with answering this question.
4. Did you have companion dogs when growing up? If yes, describe that relationship.
5. As a person living with a disability, what are your main challenges?

The first question probed the experiences of the individual in terms of mobility, work and coping with disability without a dog. The second question investigated the person's expectations, view of guide dogs and their orientation towards guide dog ownership, giving a clearer indication of the possible future worth of the guide dog to the owner, and subsequently the impact of the dog on the owner's well-being and functioning. The third question established the cause and time of onset of blindness, which informed the researcher as to the characteristics of this particular qualitative sample. Question four investigated the person's background with dogs, which might predict expectations of dog ownership and misconceptions of the role of the guide dog. The final question was aimed at discovering the main problems experienced by the person due to his/her disability, in order to later establish if his/her future guide dog decreased these difficulties.



### 3.3.2.2 Post-interview

Three months after acquiring a guide dog, the following specific questions were put to the participants:

1. Tell me about owning a guide dog.
2. Is having a guide dog what you expected?
3. What, if any, influence does your guide dog have on your life, relationships with others, yourself and your environment?
4. Did your guide dog change you in any way?

The first question focused on lifestyle changes due to guide dog ownership, benefits, drawbacks and the relationship with the dog. This question is based on research by Camp (unknown date, p.4), who describes it as her “grand tour” question. Any changes in the individual may influence well-being. Question 2 investigates the expectations and whether guide dog ownership meets the person’s expectations, which may influence the effect of the dog on the individual. Question 3 specifically ties with the questionnaire on psychological well-being, and investigates environmental mastery, social relations and orientation to the self. Question 4 directly asks the respondent whether he/she had observed personal changes due to guide dog ownership, as the hypothesis might suggest.

The interviews were transcribed afterwards and appropriate analyses were carried out after completion of all the interviews.



### 3.4 Procedure

The procedure pertaining to the quantitative and the qualitative design of this research will be described below.

#### 3.4.1 Quantitative design

Data was collected for the between-group study in a quantitative way in the form of questionnaires. Participants with access to a computer completed the questionnaires electronically and were contacted via electronic mail. As the test was originally developed for seeing persons, certain adjustments were needed, as already

discussed in an earlier section (3.3.1.3). In order for persons with blindness to complete the questionnaire, the questions on the questionnaire were 'read' to them by a software programme on their computer and answers were recorded on a computer.

### 3.4.2 Qualitative design

The first interviews and questionnaires were conducted with the participants in the qualitative design (6 persons) before they received a guide dog for the first time, A second set of interviews and questionnaires were also conducted approximately (but no longer than) 3 months after they had taken ownership, to allow for the period of adjustment to the dog. The interviews were carried out by the current researcher, and were recorded on audio-tape. The interview before guide dog ownership was explorative of the participant's expectations and experienced world without a guide dog. The interviews after guide dog acquisition investigated the meaning of the relationship and life with a guide dog.

The questions were formulated from a phenomenological perspective (Creswell, 1998). This approach is strongly rooted in the philosophical perspectives of, amongst others, Husserl (1859-1938) (Creswell, 1998). Husserl wanted to restore the human psyche as a valuable and necessary component to scientific research (Combrinck, 2004). A central concept for Husserl is intentionality of consciousness (Cresswell, 1998), where consciousness is always directed toward an object and this intentionality gives meaning to a phenomenon. Husserl, thus, rejects the subject-object dichotomy (Cresswell, 1998), which states that a subject and object is

separate and unrelated. To Husserl, the reality of an object is only perceived within the context of the meaning that an individual attaches to any given experience. This is why, with the phenomenological approach, a researcher tries to understand a particular phenomenon or concept. This approach requires the researcher to enter the experienced world of the participants (the *lived experience*, as Creswell calls it), and discover the meaning of a phenomenon. The phenomenological approach was chosen in order to explore not only the phenomenon of guide dog ownership, but also as a means of exploring the essence of this and related phenomena, based on the qualitative interviews and rich descriptions by the six participants.

Giorgi and Giorgi (2003) described the process of phenomenological research as a search for the essence of a phenomenon, through the use of free imaginative variation. This results in a careful description of the essence of a given phenomenon. More specifically, the psychological approach to phenomenology focuses on individual experience, and assumes that there is an essential structure to the experience of guide dog ownership, and that a person has intentional behaviour and free will (Creswell, 1998). The psychological approach to phenomenology guided the current qualitative study.

Another prominent concept of the phenomenological perspective is achieving *Epoche* (Moustakas, 1994) and a 'bracketing' experience (Creswell, 1998). Moustakas (1994, p.85) describes the *Epoche* as 'a process of setting aside predilection, prejudices, predispositions, and allowing things, events, and people to enter anew into consciousness'. The challenge, according to Moustakas (1994), is to be transparent to oneself. The state of *Epoche* is aspired to by the process of

bracketing one's own preconceived ideas about the phenomenon in order to find the true meaning of the phenomenon through the eyes of the participants. Although the researcher became aware of, and bracketed her own experiences of the phenomenon as thoroughly as possible, it is, as Cresswell (1998) also points out, a difficult process. It is also a very comprehensive process, by means of which the researcher was required to explicitly bracket her own preconceptions. For a more parsimonious presentation, however, these bracketed experiences will not be included in this document.

Among the participants of the qualitative study, three of the four first-time guide dog owners were also evaluated on Ryff's SPWB before guide dog acquisition, and their scores were included in the group without guide dogs in the between-group design. The remaining first-time guide dog owner did not have the means to complete a questionnaire electronically.



One of the second-time owners still had a working guide dog, who was to be retired within the week the interview took place, and her questionnaire was included in the group of guide dog owners in the quantitative design. The other participant who was expecting his second dog did not have a guide dog when interviewed and had been without one for about two years prior to the interview. As this participant may have already experienced changes due his first guide dog, but did not own a dog at that stage, he did not qualify for the non-owner group (because he had a guide dog before), nor for the owner group (for he was interviewed initially before he acquired his second dog). This participant may have confounded the results if included in either of the two groups, and thus did not complete a questionnaire.



### 3.5 Ethical considerations

A description of the background of the current researcher, along with a short explanation of the study, was included at the beginning of the questionnaire (refer to Appendix A). Participants were also assured confidentiality and the current researcher's contact details were given with the assurance that she may be contacted with any questions or comments regarding the questionnaire or research. The electronic mail that was distributed with the questionnaire highlighted the voluntary nature of participation in this study, and was deemed sufficient to establish informed consent.

No specific experimental manipulation was applied to any of the groups and no participants were at risk of any negative effects of treatment. As a natural control group was employed, no intervention was denied to this group, and both groups were treated exactly the same. The only form of intervention, if it may be called that, was the completion of the questionnaire. As the participants completed the questionnaire in private and the researcher was unaware of their response, no response pressure was put on the participants.

Confidentiality was further assured by the anonymity of the questionnaires. In the qualitative study, the names of the participants were changed to fictional ones and any references to places and other identifying factors were carefully examined so as not to reveal the participant's identity.

Feedback on the study will be given to the role players involved. A few individuals requested specific feedback on their questionnaires, and that was provided as soon as the scores were computed. Broadly, feedback will be given to all organisations, such as SA Guide Dogs and the Cape Town Society for the Blind, who provided information and supported the research. This feedback will be in the form of an academic article, which will be prepared for publication after review of this thesis. A summary of the findings will also be presented to the National Research Foundation, as per bursary requirements.

### 3.6 Summary

This chapter dealt with the methodology that was used for the research. It focused on the design and sampling technique (section 3.1), the participants in the study (section 3.2), the measuring instruments (section 3.3) and procedure for the research (section 3.4), as well as certain ethical considerations (section 3.5). The results of the research, of which the methodology was explained in detail in this chapter, will be discussed in chapter 4.


## CHAPTER 4

# RESULTS AND DISCUSSION

### 4.1 Introduction

The following chapter will present the results of the quantitative study (section 4.2), as well as the two interviews from the qualitative study (section 4.4). The qualitative study will be discussed with reference to a description of the participants (section 4.4.1), followed by the results of the statistical analyses. The results of both the quantitative and qualitative designs will also be discussed.

### 4.2 Results of the quantitative research design



In order to test hypotheses one and two, quantitative data was collected with Ryff's SPWB questionnaire. The following section provides the statistical results of the quantitative data.

#### 4.2.1 Descriptive statistics

Sixty-five participants completed Ryff's SPWB questionnaire. All the participants were legally blind, South African citizens and older than 18 years of age. The participants were divided into two naturally occurring groups: guide dog owners (Group 1) and non-owners (Group 2). The most pertinent descriptive statistics for the two groups are shown in Table 1 (on the following page).

Table 1

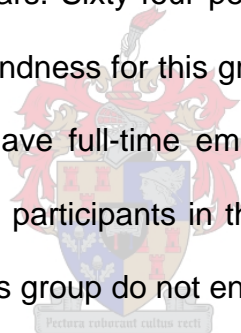
*Demographic Characteristics of Participants*

	N	f	%	M	SD	Range
<b>Group 1</b>						
South Africa	29		(100)			
Western Cape		25	(86.2)			
Rest of S.A.		4	(13.8)			
Age (years)	29		(100)	35.9	10.6	20 - 54
Sex	29		(100)			
Male		15	(51.7)			
Female		14	(48.3)			
Educational status	27		(93.1)			
Below Grade 10		1	(3.4)			
Grade 10		1	(3.4)			
Senior Certificate		5	(17.2)			
Tertiary/job-related		20	(69)			
Employment	28		(96.6)			
Unemployed		3	(10.3)			
Fulltime employed		22	(75.9)			
Student		3	(10.3)			
Retired		0	(0)			
Onset of blindness (years)	29		(100)	9.2	14.2	0 - 47
	N	f	%	M	SD	Range
<b>Group 2</b>						
Province	36		(100)			
Western Cape		31	(86.1)			
Rest of S.A.		5	(13.9)			
Age (years)	34		(94.4)	30.9	13.1	18 - 71
Sex	36	22	(100)			
Male		14	(61.1)			
Female			(38.9)			
Educational status	36		(100)			
Below Grade 10		0	(0)			
Grade 10		0	(0)			
Senior Certificate		13	(36.1)			
Tertiary/job-related		23	(63.9)			
Employment	36		(100)			
Unemployed		5	(13.9)			
Fulltime employed		18	(50)			
Student		12	(33.3)			
Retired		1	(2.8)			
Onset of blindness (years)	36		(100)	5	8.2	0 - 30

N = Number of participants  
f = frequency  
M = Mean  
SD = Standard Deviation

The group of guide dog owners (Group 1) consisted of 15 male and 14 female participants (29 participants in total). All but four participants reside in the Western Cape. The mean age of the participants in Group 1 is 36 years. Almost 60 percent of Group 1 have been blind since birth. Retinopathy of pre-maturity (refer to section 2.2.5.1 for a definition) and other retinal disorders are the main causes of blindness for this group. The majority of participants in Group 1 have fulltime employment and exercise regularly. Only five of the participants in this group do not exercise at all.

The group of non-owners (Group 2) consisted of 22 male and 14 female participants (36 participants in total). In Group 2, 31 participants reside in the Western Cape. The mean age of this group is 31 years. Sixty-four percent of Group 2 have been blind since birth. The main cause of blindness for this group is disorders of the retina. Half of the participants in Group 2 have full-time employment. A third of group B are fulltime students. Fifty percent of participants in this group exercise regularly, while thirty percent of participants in this group do not engage in any exercise.



Based on the descriptive statistics, several between-group differences emerged:

- Group 1 represents an older population (by five years) than Group 2;
- Group 1 is equally represented by males and females, while Group 2 is over-represented by males;
- Group 1 has a higher percentage of fulltime employees than Group 2, but a third of Group 2 are fulltime students;
- Group 1 has a low percentage of participants who do not exercise, whereas almost a third of the participants in Group 2 do no exercise.

The descriptive statistics also yielded the following between-group similarities:

- most of the participants in both groups reside in the Western Cape;
- the majority of participants in both groups are congenitally blind;
- a high percentage of participants in both groups have studied at a post-secondary level, either at a tertiary level or job-related training;
- almost half the participants in both groups exercise regularly (more than three times per week).

These group differences and similarities and their possible implications for the current study will be examined in section 4.3.

#### 4.2.2 Tests for Normality



The Kolmogorov-Smirnov statistic was calculated to test whether the distribution of scores for each sub-scale was normal (see Table 2). The Personal Growth and Self-acceptance sub-scales were both significantly different from normal ( $p < 0.05$ ). The Environmental Mastery sub-scale was just above the accepted level. The Purpose in Life Scale yielded insignificant results; but the Q-Q plot was cause for concern. Field (2000, p.48) described that a “normal Q-Q chart plots the values you would expect if the distribution is normal against the values actually seen in the data set”. If the actual data points of the observed data set fall exactly along the straight line that represents a normal distribution, the observed data is normal. Any deviation of the data points from the line represents a deviation from a normal distribution. This deviation from the line that represents a normal distribution was observed for all the

sub-scales, with the exception of the Positive Relations with Others and Autonomy sub-scales, which both showed normal distribution.

Table 2

*Normality Tests for Dependent Variables (Kolmogorov-Smirnov)*

Variable	Statistic	df	p
Positive Relations with Others	.084	65	.200
Autonomy	.076	65	.200
Environmental Mastery	.108	65	.057
Personal Growth	.133	65	.006*
Purpose in Life	.101	65	.094
Self-acceptance	.127	65	.011*

A further test for normality was performed. The Index of Skewness was calculated for all six sub-scales. Four of the six sub-scales (Environmental Mastery, Personal Growth, Self-acceptance and Purpose in Life) were negatively skewed, while only two (Positive Relations with others and Autonomy) were normally distributed.

When one combines all the above statistics on normality, a global picture on the data emerged. Due to the majority of sub-scales having a skewed, or not normal, distribution, it was decided to apply non-parametric tests to the data. Another reason why non-parametric tests were used is the high bivariate correlations between the sub-scales on the SPWB (see Table 3). This high multicollinearity between the scales also violates the assumptions of multivariate analysis and eliminated the option to use MANOVA.

Table 3

*Inter-Correlations between Sub-scales of the SPWB (Spearman's Rho)*

Sub-scale	1	2	3	4	5	6
Participants (n = 65)						
1. Positive Relations with Others	-	.342*	.477*	.466*	.433*	.554*
2. Autonomy		-	.463*	.390*	.368*	.463*
3. Environmental Mastery			-	.533*	.653*	.726*
4. Personal Growth				-	.708*	.597*
5. Purpose in Life					-	.711*
6. Self-acceptance						-

\* Correlation is significant at the 0.01 level (2-tailed).

Non-parametric tests are less powerful in detecting group differences and there is an increased risk of a Type II error. One cannot, however, avoid using this type of testing for that reason only and instead choose to violate the assumptions of parametric testing (the assumption that data is normally distributed). Performing the same non-parametric test with several dependent variables does, however, increase the risk of a Type I or family-wise error (for which a test such as MANOVA will automatically control). However, the increased risk of making a Type II error and the increased risk of making a Type I error effectively cancel each other out.



### 4.2.3 Differences between groups

Only one sub-scale, Personal Growth, yielded significant group differences ( $p < 0.05$ ) when the Mann-Whitney Non-parametric Test for Independent Groups was applied to the data (see Table 5). No other group differences were found. Surprisingly, the one significant finding was that the non-owner group scored better on Personal Growth than the owner group. Furthermore, the means of Group 2 was consistently higher, although not significantly so, than those of Group 1. The mean scores of the two groups on each sub-scale of the SPWB are shown in Table 4.

Table 4

*Descriptive Statistics for Scores on the SPWB*

Sub-scale	Mean	Std. Deviation
Group 1 (n = 29)		
Positive relations with others	66.28	10.91
Autonomy	62.76	11.39
Environmental Mastery	63.41	10.46
Personal Growth	70.10	9.15
Purpose in Life	67.48	10.56
Self-acceptance	62.17	14.44
Group 2 (n = 36)		
Positive relations with others	68.50	8.84
Autonomy	64.14	10.04
Environmental Mastery	66.81	12.31
Personal Growth	74.64	7.55
Purpose in Life	72.00	11.09
Self-acceptance	66.06	9.72

Table 5

*Results of the Mann-Whitney Test*

Variable	Group	n	Mean Rank	Sum of Ranks	Mann-Whitney U	z	p
POSITIVE RELATIONS WITH OTHERS	1	28	30.59	856.50			
	2	36	33.99	1223.50	450.500	-.725	.469
Autonomy	1	29	32.24	935.00			
	2	36	33.61	1210.00	500.000	-.291	.771
Environmental Mastery	1	29	29.47	854.50			
	2	35	35.01	1225.50	419.500	-1.188	.235
Personal Growth	1	29	27.59	800.00			
	2	36	37.36	1345.00	365.000	-2.075	.038*
Purpose in Life	1	28	27.55	771.50			
	2	36	36.35	1308.50	365.500	-1.877	.061
Self-acceptance	1	29	29.52	856.00			
	2	34	34.12	1160.00	421.000	-.994	.320

\*p&lt;0.05

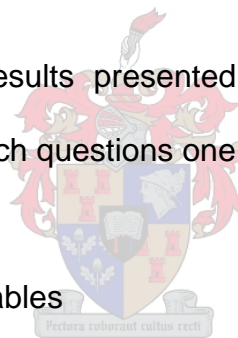
Other important statistics that are relevant to this section are the mean scores of each group on each separate scale of the SPWB. What is evident from the results on each sub-scale is that both groups achieved very high scores on all of the sub-scales. There is a ceiling-effect of scores, and there is a skewness in the scores towards the high end of each sub-scale. Given that the highest possible score on each sub-scale is 84 and the average score is 35, the achieved scores in this sample are all exceptionally high (see Table 4). This ceiling-effect has implications for data interpretation in several ways:

- If most of the scores are piled towards the high end of the scales, most of the participants, across both groups, exhibit very high well-being, according to the SPWB;

- group differences are less likely to emerge if most scores are piled together, unless quite powerful statistical analyses are employed to enhance the discriminatory power;
- any subsequent interpretations of the data should be done with caution, for even if group differences did emerge from the analysis, it cannot be concluded that any one of the two groups shows poor well-being;
- the questionnaire should be investigated for empirical inconsistencies (lack of validity and reliability) and possible lack of discriminatory power.

#### 4.3 Discussion of results of the quantitative research design

This section will discuss the results presented in the previous section and its implications for answering research questions one and two.



##### 4.3.1 Possible confounding variables

Only one significant group difference emerged on the sub-scales (on the Personal Growth sub-scale) of Ryff's SPWB. The *non-significant* results could be interpreted in several ways:

1. There are no real differences between the two groups on five out of six variables of Psychological well-being (as measured by the SPWB).
2. There are real differences between the two groups, but Type II errors occurred (the null hypothesis was accepted when, in fact, it is false).

3. The questionnaire is an unreliable measure of well-being for this population, with little discrimination between the participants.
4. Other confounding variables were responsible for the results.

The one *significant* result can be interpreted in several ways:

1. Group 2 showed more Personal Growth than Group 1.
2. There is no real difference between the two groups, but a Type I error occurred (the null hypothesis was rejected when, in fact, it is true).
3. Other confounding variables were responsible for this results.

In a differential, post-test only, non-equivalent control group design the biggest threat when finding significant group differences is that these differences can be due to other confounding variables and not due to the independent variable. The independent variable in the current design was mobility aid, and the two levels of the independent variable was represented by guide dog owners (Group 1) and non-owners/control group (Group 2). When one is unable to achieve, through practical limitations of time and access, an equivalent control group on every aspect that may influence a particular dependent variable (psychological well-being in this instance), then one must collect data on all these possible confounding aspects. This is done by identifying, through previous literature on the dependent variable, possible confounding variables and study their occurrence in this specific sample. When it is found that the groups differ on some of the possible confounding variables, the results must be scrutinised to see how much of an influence this unequal

representation of the possible confounding variable may have on the resultant group differences.

The focus is usually on finding group differences only when the eventual results yield significant between-group findings. It is, however, also possible that confounding variables can moderate possible significant differences in such a way that none seem present.

As an example, in the current analysis it was found that non-owners achieved a higher mean score than the guide dog owners on all the sub-scales, but that only the Personal Growth Sub-scale was significantly higher for the non-owner group. When ignoring the possible influence of confounding variables on this result, one can easily conclude that guide dog owners experience less Personal Growth than non-owners and that non-owners seem, generally (albeit not significantly), to have better well-being than guide dog owners. However, it would be irresponsible to look at the statistics in this fashion only, without investigating possible group differences apart from the independent variable.

The two groups were *equivalent* in the following areas:

- All the participants were legally blind (disability equivalence).
- Most of the participants in both groups were congenitally blind (cause of blindness equivalence).
- All the participants were over 18 years of age (minimum age equivalence).

- Most of the participants in each group resided in the Western Cape (demographic equivalence).
- The majority of participants in both groups have studied at a post-secondary level (educational equivalence).
- The majority of participants in both groups exercise regularly (exercise equivalence).
- All but two of the participants had electronic mail access and were computer literate (access to information equivalence).

The two groups were *non-equivalent* in the following areas:

- Group 1 were guide dog owners and Group 2 not (mobility aid non-equivalence).
- Group 1 had an older mean age than the non-owner group by five years (age non-equivalence).
- Group 2 had a larger male to female ratio (1.6 males for every 1 female) than Group 1 (1.1 males for every 1 female) (gender non-equivalence).
- Group 2 included more inactive participants than Group 1 (inactivity non-equivalence).
- Group 2 included more students than Group 1 (developmental stage non-equivalence).

In the investigation of confounding variables, the focus falls on the group's non-equivalent factors. Because it is a relatively new questionnaire, Ryff's SPWB unfortunately has only limited data on possible confounding variables. Age, gender and educational level have, however, been investigated.

According to Ryff and Singer (1996), Purpose in Life and Personal Growth decline with age, while Environmental Mastery and Autonomy increase with age. A bivariate correlation was performed on the data and the only significant correlation was found between Age and Autonomy in the positive direction (see Table 6).

Table 6

*Correlations between the Sub-scales of the SPWB and Age*

Sub-scale	N	Correlation
1. Positive Relations with Others	62	.190
2. Autonomy	63	.379**
3. Environmental Mastery	62	.160
4. Personal Growth	63	.098
5. Purpose in Life	62	.090
6. Self-acceptance	61	.111

\*\*Correlation is significant at the 0.01 level (2-tailed)

This result concurs with Ryff and Singer's (1996) finding. If age confounded the results of this study, one would expect Group 1 to have better Autonomy than Group 2, for Group 1 has a higher mean age. However, there were no significant group differences between Group 1 and 2 on the Autonomy scale. If it is also taken into account that age only accounted for about 14% (calculated by  $r^2$ ) of the variance in Autonomy, it is very plausible that age did not confound the results of this study.

Ryff and Keyes (1995) found that Personal Growth and Positive relations with others are influenced by gender. Women tend to score higher than men on these two

scales of the SPWB. However, point-biserial correlations showed that Autonomy, Environmental Mastery, Personal Growth, Purpose in Life and Self-acceptance correlated negatively with gender (see Table 7). Men were coded as 0 and women as 1, and thus men scored higher on the relevant five sub-scales.

Table 7

*Correlations between the sub-scales of the SPWB and Gender*

Sub-scale	N	Correlation
1. Positive Relations with Others	64	-.197
2. Autonomy	65	-.355**
3. Environmental Mastery	64	-.416**
4. Personal Growth	65	-.274*
5. Purpose in Life	64	-.257*
6. Self-acceptance	63	-.329**

\*\*Correlation is significant at the 0.01 level (2-tailed).

\*Correlation is significant at the 0.05 level (2-tailed).

Group 2 had a higher male to female ratio than Group 1. Thus, gender may have confounded the results if the scores on the five sub-scales for Group 2 were artificially inflated by the higher male ratio in that group. This may have caused a non-significant group difference on these three sub-scales. These results do not concur with previous findings on gender and PWB, as recorded by Ryff and Keyes (1995).

Educational level mediated the scores on the Purpose in Life and Personal Growth sub-scales in previous samples (Ryff & Singer, 1996). Both groups have a majority



of post-secondary educated participants, but Group 2 contains more participants who are current students than Group 1. Most of this group of current students in Group 2 also reside in a community where blindness are more accepted and accommodated by their environment. Thus, the more conducive environment in which the students in Group 2 find themselves may have confounded the results.

A confounding variable that may also contribute to inaccurate test scores is the fact that the students may be more test-wise (familiar with the testing environment and procedure), which may artificially inflate their test scores. On the other hand, when people are familiar with a testing environment, they may respond more truthfully and yield more accurate scores. The significant between-group difference that was found for the Personal Growth sub-scale may have been confounded by the high percentage of test-wise students, either in a positive or negative direction.

A general confounding variable that may be applied to both groups and which could account for the ceiling effect of scores, is what Graziano and Raulin (2000, p.81) referred to as “response-set biases”. Response-set biases can cause measurement error and distort the results or attenuate a relationship between variables. Social desirability, or the tendency of participants to respond in a socially acceptable manner, always poses a threat to any study. Measurement error can also be caused by not standardising testing procedures. In the current study, the test setting was not standardised. Participants responded in a variety of settings and on personal or public computers with access to electronic mail.

Language can also be a general confounding variable that can cause inaccurate test scores. Not all of the participants speak English as their first language, but all the participants completed the questionnaire in its English format. Having to complete a questionnaire in a language other than your mother-tongue may confound some individuals' scores. None of the participants did, however, indicate that they had problems understanding the questions in English.

#### 4.3.2 Theoretical discussion of between-group results

The results of the quantitative study will be discussed in the context of the first two research questions, namely:

1. Do differences exist in the psychological well-being of blind persons with guide dogs (group A) and blind persons without guide dogs (group B)?
2. If differences in psychological well-being exist between the two groups, can the differences be attributed to guide dog ownership?

If it is assumed that there was sufficient control and consideration for possible confounding variables, the first research question must be answered in the negative (with the exception of Positive Growth). The data analysis showed no group differences for five out of the six sub-scales (which combine theoretically to ascertain a person's PWB). The expectation was that if any differences emerged between the groups, the guide dog owners would display better well-being. Previous literature (refer to section 2.3.5.2) has shown that there are numerous benefits to pet/service dog ownership, such as increased self-esteem (Duncan & Allen, 2000), experience

of companionship (Camp, n.d.) and social facilitation (Bernstein et al., 2000). The current results neither show increased benefits associated with guide dog ownership nor directly contradict the existing literature, for guide dog owners did report high levels of well-being (see Table 4).

Nevertheless, the mostly inconclusive findings do not reflect negatively on guide dog ownership. It was observed in section 4.2.3 that guide dog owners exhibit high levels of well-being, as represented by the six scales on Ryff's SPWB. If this measure is reliable in the current population (refer to section 4.3.3), it would have to be concluded that guide dog ownership is associated, but not exclusively related with, well-being. It is also important to note that no causal relationship can be assumed between guide dog ownership and PWB, due to the limitations placed on the study by the design which was employed. It may simply be concluded that, even though guide dog owners do not necessarily exhibit better well-being than non-owners, guide dog ownership is by no means associated with poor PWB.

Yet, the results are surprising. One would have expected, as pointed out by the literature review, that persons with blindness, who face a multitude of daily challenges, would not exhibit extremely high levels of PWB and that guide dog owners would, at least, exhibit greater Environmental Mastery than non-owners. The following sections will investigate these seemingly surprising findings.

Firstly, it is necessary to consider what Diener (1984) and Pavot and Diener (2004) have found regarding personality factors affecting SWB (refer to section 2.4.3.3.10). PWB has been shown to be related to SWB (Keyes, Shmotkin & Ryff, 2002) and one

can consider that personality factors mediate a person's well-being over time and that a person with blindness has the same potential for well-being in spite of being confronted with more daily challenges. Within this reasoning, a guide dog may provide transient mood changes, but not necessarily permanent increases in PWB.

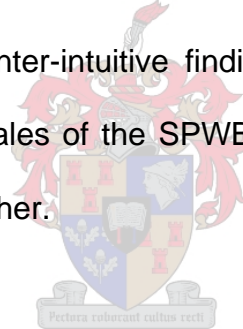
The model of positive growth following acquired physical disability (Elliot et al., 2002) can also explain why guide dog owners do not present better PWB than non-owners (refer to section 2.5). If positive growth is associated with four factors (internal locus of control, active meaning finding, limited ruminations and adaptive personality), as the model suggested, then any or all of the factors combine to determine a person's well-being or potential for positive growth. The ceiling effect of scores may show that it should at least be considered that persons with blindness have as much a disposition towards well-being as any other person. There also seems to be factors of greater importance when considering a person's well-being than just pet ownership. This would suggest that a guide dog could enhance a person's well-being through mediating other factors that also relate to well-being, but cannot be viewed as the ultimate solution to the well-being of a person with blindness. It is possible that researchers underestimate the potential that persons with disabilities have for positive growth despite their challenges.

Secondly, guide dog ownership has the potential to benefit some people, but it is not a necessary ingredient for the well-being of a person with blindness. There possibly are more important mediating factors to a blind person's well-being than just guide dog ownership. Persons who are very capable in navigating with other mobility aids may find themselves just as much in control of their physical environment, which

may transcend into a feeling of Environmental Mastery. Researchers would have to consider that not all persons with blindness would like to have a guide dog or find them necessary.

What could not be determined by this study is what the level of PWB was for the participants in Group 1 before they received their guide dogs. Only with knowledge from a within-subject, longitudinal design would one be able to conclude whether guide dogs actually cause better well-being in those that prefer to acquire a guide dog.

Thirdly, as already discussed, some uncontrolled confounding variables may have been responsible for these counter-intuitive findings. Findings on the relationship between gender and the sub-scales of the SPWB is just one possible confounding factor. Response-set bias is another.



Lastly, the form of measurement may have been fundamentally flawed. Ryff's SPWB may be an unreliable measure for this specific population. The following section will discuss this possibility.

#### 4.3.3 Questionnaire properties

The initial decision to use Ryff's SPWB was dictated by the following (refer to section 3.3):

- Professional advice by Wissing (personal communication, August 25, 2004).

- The current researcher wanted to use a multi-item, multi-scaled instrument, which measures several aspects of well-being.
- Ryff's model of PWB provided a theoretical integration of aspects of well-being.
- The SPWB had seemingly sufficient validity for use internationally (refer to section 3.3.1.5).

There were, however, some indications that the SPWB may be problematic to use. There has been no previous validation of the questionnaire on the South African population. Thus, no data exists in order to interpret the questionnaire within the uniquely South African cultures. The SPWB has also never been validated or used on a population of persons with disabilities.

There has also been previous criticism on the SPWB (refer to section 3.3.1.5). Christopher (1999) concluded that Ryff's integration of Western theories of well-being into her SPWB measure may limit the application of the questionnaire to non-Western samples. Van Dierendonck (2004) suggested that the 14-item version of the SPWB be reduced to eight items, because the 14-item version presented some psychometric problems. Kafta and Kozma (2002) questioned the SPWB's construct validity and even concluded that perhaps the SPWB may only have good face validity.

The current results on the questionnaire also raised some questions on the validity of the questionnaire. The high bivariate correlations between sub-scales of the SPWB is a cause of concern. Multi-collinearity of the sub-scales could suggest that the six

sub-scales do not in fact measure different constructs and that the six-factor structure of the SPWB should be investigated. Kafka and Kozma (2002) indeed found no support for the six-factor structure of the SPWB.

The ceiling-effect of scores could also be indicative of problems with the SPWB. A ceiling-effect of scores implies that the data was negatively skewed. Skewed data violates the assumptions of normality and, as such, questions the validity of the SPWB as a parametric measure. Skewed data also reduces the variance found within the scores of a sample and makes discrimination between groups very difficult. This has serious implications for using the SPWB as a measure of group differences, for a very large sample size would need to be obtained in order to detect significant group differences. A ceiling effect may also suggest that the 6-point Likert scale of the SPWB is excessive, and should perhaps be reduced.

A positive finding was that the individual items in each sub-scale of the SPWB positively correlate with each sub-scale's total score, leading to Cronbach's alpha statistics of between 0.779 and 0.878 for the sub-scales. This does, in the very least, confirm that Ryff's SPWB has reliable sub-scales.


Chapter 5 will present the final concluding remarks on this questionnaire and the general findings.

## 4.4 Results of qualitative design

The following sections will present the results of the qualitative design, based on the interviews with the six participants.

### 4.4.1 Descriptions of participants

All the participants have been given pseudonyms in order to protect their privacy. All the participants live in the Western Cape. All the interviews were conducted in Afrikaans, except for the interview with Martin's (participant one),. The interview excerpts were then translated into English and the translated excerpts were placed in brackets [...].



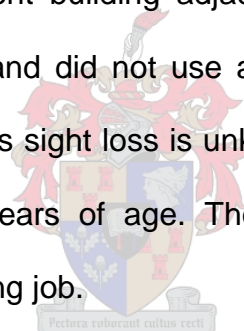
Participant one, Martin (25 years old), was a fulltime post-graduate student at the time of the first interview. He is a white male from foreign descend, but has been a South African citizen from a young age. Soon after the first interview, Martin completed his studies and at the time of the second interview he was in a transitional period from being a student to searching for fulltime employment. Martin also moved out of the university residence and back into his parents' home between the two interviews. He used a long cane as his main mobility aid before receiving his guide dog. Martin is congenitally blind after his mother contracted rubella during her pregnancy.

Participant two, Paul, is a fulltime undergraduate student. He is a coloured male and is 22 years of age. Paul lives in a university residence and his main mobility aid



before acquisition of a guide dog was a long cane. He has been totally blind from age eight, caused by retinal detachment. His blindness was precipitated by 'pink eyes', which he contracted in infancy and which caused blindness in his one eye. He only had partial sight from infancy until he lost his sight completely at eight years of age. Paul did not have problems adjusting to total sight loss ("nie juis vir my so groot aanpassing gewees, toe ek blind geword" ...*[it wasn't really such a big adjustment for me, becoming blind]*).

Participant three, Arnold, has a fulltime career in a sheltered employment organisation for persons with blindness. He is a coloured male and is 21 years of age. Arnold lives in an apartment building adjacent to his place of employment. Arnold is only partially sighted and did not use any mobility aid before guide dog acquisition. The cause of Arnold's sight loss is unknown to him, but the first signs of sight loss occurred at seven years of age. The participant derives a sense of satisfaction from his manufacturing job.



Participant four, Cobus, is a fulltime, self-employed sound engineer. He is very driven to succeed in his career. He is a white male and is 25 years old. Cobus lives in an apartment with a roommate. He used a long cane as main mobility aid before guide dog acquisition. Cobus is partially sighted and the cause of his sight loss is a condition known as retinus pigmentosa. The participant still has the ability to distinguish the outlines of objects and people, but is unable to detect much detail. Although there apparently is a cure for his condition, he cannot afford it. Cobus grew up mostly in school residences and he still exhibits a great fondness for his alma mater.

Participant five, John, is a fulltime student and lives with his wife and children in a house. He is a coloured male and is 37 years old. John commutes with a train to and from university each day. He was previously employed as a switchboard operator, before deciding to study fulltime. John acquired his blindness in two stages. Firstly, when he was eight years old, his one eye came in contact with a poisonous plant and due to a lack of medical care, he became blind in that eye. The remaining eye also gradually lost sight acuity. At 23 years of age, his remaining sight was lost, when his healthy eye was injured in a soccer game and retinal detachment caused total blindness. John is a previous guide dog owner, with about a one-year period between the new guide dog and the previous dog. John used a long cane as his main mobility aid when not owning a guide dog. The participant is a person to whom religion is very important and he found strength in this when he had to adjust to total vision loss (“definitief het die geloof, het ‘n groot bydrae gelewer met die aanvaarding...my geloof het definitief gehelp” [*religion definitely contributed a great deal to the acceptance...my religion definitely helped*]). He nevertheless found the adjustment to total blindness very traumatic.

Participant six, Michelle, is employed fulltime as Braille proof-reader. She is a white female and is 29 years old. Michelle is single and lives in her own apartment. At the time of the first interview, Michelle was about to retire her first guide dog and receive her second guide dog. At the time of the second interview, Michelle had relocated her retired guide dog to her parents' house (the apartment building where she lives does not allow pets, even if it is a retired guide dog). She gradually lost her sight to a condition called retinopathy of pre-maturity (refer to section 2.2.5.1 for a definition). The participant lost her sight in several stages. The most rapid loss of sight occurred

when she was 15 years old and again at 19 years and she is now only able to distinguish light and dark outside. Michelle likes routine and bonded very closely with her first guide dog.

#### 4.4.2 An example of the process of data analysis from the qualitative data

The raw data in this part of the study consisted of the interview transcriptions for each participant<sup>1</sup>. The transcriptions were read and re-read numerous times in order for the researcher to immerse herself into the text and the experiences of every participant. Through the process of immersion and familiarisation with the data, subsequent natural meaning units (NMUs) could be derived for each participant (Van Manen, 1984). An example of this process, extracted from a specific part of the interview with participant one, will be related here:

- *Always had pets at home ... pets as in little dogs.*
- *Our one dog that we had was basically because of me.*
- *I'm basically his favourite person at home, because I'm the one that plays with him.*
- *And I don't care if he bites he. He will like jump on my lap and I would like bite his ears.*
- *Wonderful animals, one just needs to sort or, um, set boundaries for them.*
- *Once you do that, they know what's cooking and you know what's cooking.*
- *I enjoy sort of the companionship and sort of the whole faithful thing.*

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<sup>1</sup> The full interview transcriptions are available from the current researcher.

After the initial identification of the NMUs, the researcher contextualised each NMU with regard to the research question applicable to that section of the interview. The above example represented the section about previous experiences with dogs. Even though the sections represent different ideas, it is important to keep the interview as a whole in mind and analyse each NMU within the bigger context of the whole interview. This part of the analysis (also called reduction of the data) resulted in forming an essence of the experience for each participant. This identification of the essential structure of each NMU (in the above sample from participant one) will now be illustrated:

- *Always had pets at home ... pets as in little dogs.*

Pets, especially dogs, have been consistently present throughout this participant's upbringing.

1. Dogs have been an integral part of his life so far.

- *Actually very close [relationship] ... Our one dog that we had was basically because of me.*

Participant (P) 1 describes the relationship with his pets as very involved and close. There has been active participation by the participant in the decision making process of acquiring a dog in a past.

2. Pet ownership has been actively pursued by the participant in the past.

- *I'm basically his favourite person at home, because I'm the one that plays with him. And I don't care if he bites he. He will like jump on my lap and I would like bite his ears.*

P1 still has a very close and playful relationship with his dog, in fact, it seems he is the favourite playmate for the dog.

3. The reciprocal interaction with a dog is central in his experience.

- *Wonderful animals, one just needs to sort or, um, set boundaries for them. Once you do that, they know what's cooking and you know what's cooking.*

P1 feels that dogs need consistency from their owners in order for them to be optimally enjoyed and utilised as companions.

4. Dog ownership is associated with responsibility and consistency by the owner.

- *I enjoy sort of the companionship and sort of the whole faithful thing.*

P1 especially enjoys the close bond that forms between a dog and its family, and appreciates the loyalty that most dogs have toward their families.

5. The participant derived satisfaction from reciprocal interactions with pets in the past.

The above NMUs are then compared and related essences of the experience are grouped together. In four of the five mentioned essences, a personal history of dog ownership emerged. The main theme of this participant's experience with companion animals is one of affectionate, personal and reciprocal involvement with pet dogs. The one remaining essence (dog ownership is associated with responsibility and consistency by the owner) also relates to the main essence, for it is a conclusion based on extensive experience with dogs.

#### 4.4.3 Common themes emerging from interview one

This careful analysis of the NMUs and essences of the experiences was employed throughout the whole interview transcription for each participant. Finally, through close reference to the main themes in each interview, common themes, which was present for all the participants, were identified. Seven common themes emerged from interview one. The first three themes related to the expectations that prospective first time guide dog owners have about their pending guide dog ownership. The fourth, fifth and sixth themes relate to characteristics and history of persons applying for a guide dog. The final theme explores the challenges that face persons with blindness in the South African context. Table 8 on the following page summarises the seven common themes.



Table 8

*Seven Common Themes from Interview One*

<p><b>1. A guide dog can aid with mobility:</b></p> <p>The expectation is that a guide dog can provide more efficient, timely, safer and reliable mobility. Specific reference was also made to highlight expected differences in long cane and guide dog mobility.</p>
<p><b>2. A guide dog can provide social facilitation (present for all four first time owners):</b></p> <p>It is expected that a guide dog will increase interactions with strangers and make a person seem more approachable.</p>
<p><b>3. Personal and interpersonal adjustments will be necessary in order to accommodate a guide dog (present in three of the four first time owners):</b></p> <p>A guide dog is not just a tool for mobility, but rather a potentially life altering influence. Social adjustments and increased responsibility are expected from guide dog ownership.</p>
<p><b>4. A great value on their independence:</b></p> <p>All the participants are employed fulltime and prefer doing things on their own. Unwanted dependence on others creates frustration.</p>
<p><b>5. A sense of social responsibility (in five of the six participants):</b></p> <p>Involvement in diverse organisations for social change.</p>
<p><b>6. History with pet dogs:</b></p> <p>Previous pet ownership and a love of dogs are characteristic of all the participants.</p>
<p><b>7. Multiple challenges facing a person with blindness:</b></p> <p>Environmental inaccessibility, ignorance about persons with blindness, reluctance of strangers to interact with participants and higher risk of being a victim of crime provide challenges to the normal functioning of the participants.</p>

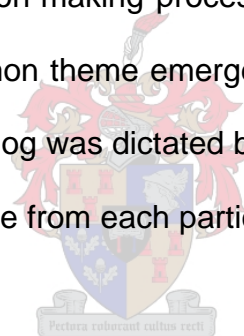
## 4.4.4 Discussion of common themes emerging from interview one

The raw data, in the form of the six interview transcriptions, were classified into meaningful common themes. Through a process of creative reduction, seven themes emerged from the data. These themes are: 1. guide dogs can potentially aid with mobility, 2. guide dogs are potential social facilitators, 3. personal and interpersonal adjustments are expected in order to accommodate a guide dog, 4. all the participants place a great value on independence, 5. the participants exhibit a strong

sense of social responsibility, 6. all the participants have a long history of previous pet ownership among, 7. persons with blindness face multiple challenges . Each theme will now be discussed in relation to the research question (the lived experience of anticipating and owning a guide dog) in order to make sense of these findings.

#### 4.4.4.1 Theme 1: Guide dogs can potentially aid with mobility

The first three themes will be discussed with regard to the four prospective first time guide dog owners (excluding the two second time owners), for it deals specifically with the expectations and decision-making processes involved in acquiring a guide dog in the first place. This common theme emerged for all four prospective owners. The decision to acquire a guide dog was dictated by the expectation that a guide dog will aid with mobility. One example from each participant relating to this theme will be given.



A guide dog is expected to help with navigation in unknown environments:

*"... get to grips with your physical environment more quickly; moving to a new environment, um, it's, um, it can be a big plus"* (Martin)

*"Daar's net soveel meer plekke waarby jy kan uitkom..."*  
*[There's just so many more places you can reach]* (Cobus)

*"En 'particular' oordat ek nie 'n plek ken nie, dan gaan dit vir my bietjie makliker wees [having a guide dog], plekke maklik te vind ..."*  
*[In particular when I don't know a place, it will be a bit easier to find places more easily]* (Arnold)



A guide dog is expected to help with safer navigation:

*“Nou as jy ‘n gidshond het, dan het jy bietjie die voordeel van hy het twee oë wat jy nie het nie, so, ek bedoel, ek dink, ek dink dis miskien vir hom moontlik dat, dat julle twee dit kan ‘negotiate’ ... jy hoef nie te ‘worry’ van jy gaan in ‘obstacles’ vasloop nie”*

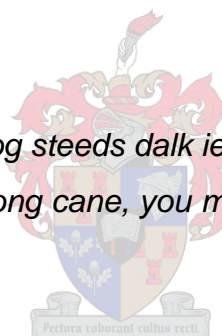
*[Now, when you have a guide dog, then you have a bit of an advantage because he has two eyes, which you don’t. So, I mean, I think, I think that perhaps it’s possible for him, that you two can negotiate ... you don’t have to worry about walking into obstacles] (Paul)*

*“dit [having a guide dog] sal vir my baie makliker maak in die donker plekke, in die aand ... gaan dit vir my baie maklik wees”*

*[it will make it easier for me in dark places, at night ... it will make it very easy] (Arnold)*

*“met ‘n kiere loop jy nog steeds dalk ietsie mis en jy val in ‘n sloot”*

*[when walking with a long cane, you may still miss something and fall into a ditch] (Cobus)*



Not only do the participants expect greater mobility, but also timelier and more efficient navigation than with a long cane:

*“... dit kan vir my tyd spaar ...”*

*[it could save you time] (Paul)*

*“... jy beweeg nie altyd so vinnig soos wat jy met ‘n hond kan beweeg nie...”*

*[you don’t always move as fast as with a dog] (Cobus)*

It is also anticipated that a guide dog is a better mobility aid than a long cane:

*“dit [having a guide dog] maak dit net 100 persent beter vir jou”*

*[it just makes it a 100 percent better] (Cobus)*

*“met die ‘white cane’ is dit, vat ‘n bietjie langer om nuwe roetes te leer ... met die stok is dit, is dit nogal beetje moeilik ... maar met die hond skakel jy dit uit”*

*[with the white cane it is, it takes a bit longer to learn new routes ... with the cane it is, it is somewhat difficult ... but with the dog you eliminate this]*  
(Paul)

*“...um, toe’t ek beseef dit kan makliker gaan as ek ‘n gidshond het ... want, um, dan hoef ek nie so baie te konsentreer op my rigting nie ...”*

*[um, then I realised it would go easier if I have a guide dog, because, um, then I don’t have to concentrate on my direction ...]* (John, when asked to reflect on his initial decision for acquiring a guide dog)

The reason for getting a guide dog is closely linked to the expected benefits to the participant’s mobility. Guide dogs have the anticipated benefit of being a faster, safer and more reliable mobility aid, especially in comparison with a long cane as a mobility aid.



These findings again highlight the importance of mobility to the person with sight disability. As international literature has shown (Imrie, 1996), mobility is a major area of concern for a person with blindness. Rusalem (1972) also found that constant attention to non-visual stimuli could be exhaustive and this could explain why a person would prefer a guide dog to a long cane.

#### 4.4.4.2 Theme 2: Guide dogs are potential social facilitators

Another theme emerging from the interviews with the prospective first time owners is the expectation that a guide dog can provide social facilitation. The following quotes served to illustrate this:

*“... [a guide dog is a] very, very good social bridge” (Martin)*

*“...dit behoort my sosiale verhoudinge te verbeter ... lyk my as jy ‘n hond het is dit net vir hulle [people in general] makliker om jou te ‘approach’ “  
[it should benefit my social relationships ... it seems when you have a dog, it’s just easier for them to approach you] (Paul)*

*“... en mense is mos lief om na mens toe te kom en , hey, dis ‘n mooi hond en so aan, en so ontmoet jy maar net meer en meer mense ...”  
[...and people love to come to you and, hey, this is a pretty dog and so forth, and subsequently, you just meet more and more people] (Cobus)*

A guide dog can potentially facilitate social interactions, by not only making the person seem more approachable, but also by making the person more obvious. As literature has shown, persons with blindness are often disadvantaged in social communication with able-bodied persons (Webster & Roe, 1998). Spontaneity, ease and frequency of social communication may be inhibited by blindness, according to Webster and Roe (1998). This could explain the need by the participants for social interaction.

The expected increase of social interaction in the presence of a guide dog could have been generated either through previous experiences with guide dogs/owners or observations about the human-animal interaction in general. Pets have been observed by researchers as being “social lubricant[s]” (Fine, 2000, p.181), encouraging people to interact. Hart (2000, p. 91) also remarked on the socialising effect of dogs, being “social magnets” and encouraging interaction and conversation between people. Since all participants have grown up with pets, it is possible that

this potential for social interaction through pets have transcended into the participants' expectation that guide dogs could provide social facilitation.

Contact with current guide dog owners could also have generated this expectation of social facilitation. Social psychology provides the basis for the explanation of expectations and attitudes towards any given phenomena. The process of social learning from others occurs when one's attitudes are influenced by observing or interacting with others (Baron & Byrne, 2000). Thus, through observational learning, the participants may have acquired the expectation of guide dogs being social facilitators.

#### 4.4.4.3 Theme 3: Personal and interpersonal adjustments are expected

A guide dog can potentially be a catalyst for change in personal and interpersonal relationships. The participants expect that a guide dog will dictate changes in their lives, which will have both positive and negative consequences:

*“the dog can become really, um, an integral part of your being ... you’ve got this major influence coming into your life” (Martin)*

*“... en ek dink dit [having a guide dog] kan vir my die lewe ook makliker maak”*

*[...and I think it could make my life easier] (Paul)*

*“dit is, verbeter my lewensomstandighede ...”*

*[it is, enhances my way of life...] (Cobus)*

*“sover is daar baie goeters waarvoor ek dit kan gebruik”*

*[there is, so far, a lot of things I could use it for] (Arnold)*

*"I do foresee some 'schlep' ... when it needs to eat ... where it needs to crap ... and all that needs to be taken care of" (Martin)*

*"I joke with people, I tell them, guys, I'm becoming a dad soon" (Martin)*

*"... vir almal by die huis gaan dit maar iets nuuts wees met die gidshond"  
[...for everyone at home, the guide dog will be a novel experience] (Paul)*

*"Ja, dis die grootste probleem wat ek gaan hê, dat mense moet verstaan dit is nou my alles"*

*[yes, that is the biggest problem I will have, that people should understand that the dog is now my all] (Paul)*

*"[a guide dog can be an] impediment sometimes when it comes to, um, visiting people who might not like dogs" (Martin)*

*"I think my family is more apprehensive about the dog than I am" (Martin)*

*'En dan daai, net daai "companionship" "*

*[and then that, just that companionship] (Cobus)*

*"Die grootste uitdaging gaan seker wees om ten volle te vertrou op die hond"*

*[The biggest challenge will be to trust the dog completely] (Paul)*

Expectations regarding guide dogs are influenced by current guide dog owners:

*"Ek het nou die naweek ook saam met mense gebraai en so aan, wat gidshonde het, en hulle het gesê ... hulle is meer 'excited' as ek oor die ding want, um, hulle weet nou al hoe dit is ..."*

*[I went to a barbecue with friends a few weekends ago and they have guide dogs, and they said ... they're more excited than I am about this thing, um, they know how it is...]* (Cobus)

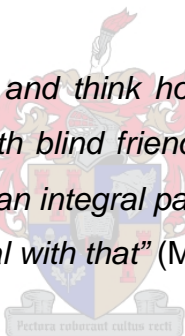
*“As ek nou moet gaan op wat ander mense vir my sê wat honde het, ek kyk maar, want ek leer maar deur ander mense ook ... wat ander mense vir my sê wat honde het ...”*

*[if I have to go on what others with dogs have said to me, I see, because I learn from other people ... what other people with dogs tell me...]* (Cobus)

*“Al die blinde mense het dan gesê jy en jou gidshond is so nou betrokke bymekaar...”*

*[All the blind people told me you and your guide dog form such a close relationship]* (Michelle)

*“um, ja, um, let me try and think how I'm going to put this into words. From what I've seen with blind friends of mine who have dogs, the dog can become really, um, an integral part of their being. Um, I, I'm still going to have to see how I deal with that”* (Martin)



*“Lyk my as jy ‘n hond het is dit net vir hulle makliker om jou te ‘approach’ ... so sê hulle ‘n man in die straat sal sommer met jou praat”*

*[It seems when you have a dog, it's easier for them to approach you ... they say the man in the street will spontaneously start a conversation]*

(Paul)

The third theme links with the first two themes, for this expectation arises from previous experiences and observations. As discussed in the previous section, it is clear that current guide dog owners have a major influence on the opinions of prospective guide dog owners about guide dog ownership. Through the process of social learning, the prospective owners expect to experience life changes and social adjustments after guide dog acquisition. Naturally, through exposure to literature on

guide dog ownership, such as pamphlets by SA Guide Dogs, the participants can also begin to foster certain expectations.

An interesting observation by Paul and Martin was that acquiring a guide dog might also influence family relations. Explicit attitudes and expression of concern by family members may have created this expectation.

What is evident from the first three themes on guide dog acquisition is that expectations play a central role in the decision of acquiring a guide dog. The expectations are mostly based on observational learning and an overall positive feeling towards guide dogs existing within all of the participants.

#### 4.4.4.4 Theme 4: Participants place great value on their independence

The ability to function independently is valued by all six of the participants. There is frustration with enforced dependence and a reluctance to ask for help:

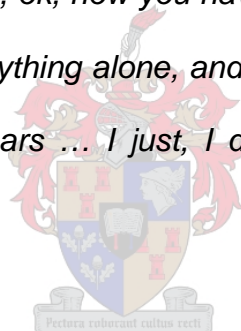
*“rely on the whims of a very loosely structured network ... which puts me in needy positions towards people ... and, ja, and frankly that pisses me off” and “I sort of value my space, so I’ll probably try and get a place of my own as soon as the salary starts coming in” (Martin)*

*“Dit ‘freak’ my nogal bietjie uit, as ek nie kan maak wat ek wil maak nie” and “baie, baie kere moet ek mense vra ... en ek is nie daai persoon nie ... ek hou nie van mense goed te vra nie ... as ek iets self kan doen, enige tyd!”*

*[It kind of freaks me out when I can't do what I want ... a lot of times, I have to ask people and I'm not that kind of person ... I don't like asking people stuff ... if I can do it on my own, any time!]* (Paul)

*"...ek 'run' my eie 'household' hierso, ek bly heeltemal alleen op my eie, niemand sal vir my sê, niemand sê vir my, oukei, nou moet jy kom eet ..."*  
and *"die jare wat ek ... alleen gespeel het, alles self gedoen het, en ek dink van my beste funksies kom uit daai jare ..."* and *"dis maar net ek doen my eie ding, ek probeer baie 'independent' wees"*

*[...I run my own household, I stay completely on my own, no-one will tell me, no-one will tell me, ok, now you have to eat ... and the years that I ... played alone, did everything alone, and I think some of my best functions came out of those years ... I just, I do my own thing, I try to be very independent]* (Cobus)



*"... ek voel gemaklik"*

*[...I feel comfortable]* (when asked about going to places by himself)  
(Arnold)

*"en omdat hy blind is, moet ons hom help en kan jy nie rêrig jou, jou lewe, um, uitleef nie. Dit is nou wat die gewone mens dink."*

*[and because his blind, we have to help and you can't really live your life. That is what the normal person thinks.]* (John reflecting on the misconceptions that a person with blindness cannot function independently)



*“dis net ek en Goldie”*

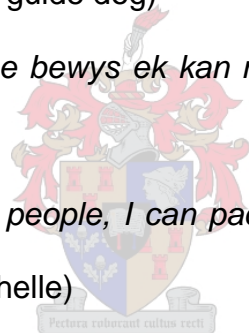
*[it just me and Goldie]* (Michelle comments that she lives on her own, with only her guide dog for company)

*and ‘vir, vir my om alleen te beweeg en om elke dag by die werk te kom, moet ek dit doen. Um, ek voel nie dis regverdig om ‘n ander kollega se roetine omver te werp om my elke oggend te kom oplaai ... ek is nie mev. Pienaar [name changed] se verantwoordelikheid ...”*

*[for, for me to move alone and to go to work each day, I have to do it. I don’t feel it’s fair to inconvenience a colleague just to pick me up each morning ... I’m not Mrs Pienaar’s responsibility.]* (Michelle, on why she applied for her second guide dog)

*and “jy moet vir mense bewys ek kan my eie toebroodjies inpak, ek kan self daar kom”.*

*[you have to prove to people, I can pack my own sandwiches, I can get there on my own]* (Michelle)



Each of the participants emphasised their resolve to function independently and that they do not feel comfortable in situations where they are dependent on others to perform their daily tasks. This independence-dependence struggle was highlighted by previous literature, such as Lindemann’s (1981) finding that the desire for independence but realistic need for assistance/dependence in certain situations places strain on the person with blindness. A study by Steffens and Bergler (1998) also revealed that dependence on others is a major stress-inducing factor for persons with visual impairment. The current findings thus support the international literature on the independence-dependence struggle facing persons with blindness.

#### 4.4.4.5 Theme 5: Participants exhibit a sense of social responsibility

Five of the participants are involved in or at least present a strong sense of social responsibility and in-group associations:

*“Ek het bewus geraak van die probleme in die gemeenskap ... da’s ‘n behoefte in die gemeenskap ... en baie keer het ek ook mense privaat beraad ... baie keer het ek self met die mense gepraat, dit het my ook verryk”*

*[I became aware of the problems in the community ... there’s a need in the community ... and on numerous occasions I also did private counselling for people ... a lot of time I talked to people and I felt enriched by it]* (John’s response on why he decided to study psychology)

*“Oukei, van ons blindes ken die dorp baie beter as van die mense ... ons werk van straatnaam tot straatnaam”*

*[Okay, we blind people know the town better than some people ... we operate from street name to street name]* (Cobus discussed with pride the unique abilities of his in-group)

*“miskien die organisasies ... soos ek is ‘n lid van SASCO en Black Students Association. So as hulle vergaderings het dan woon ek dit by.”*

*[maybe the organisations ... like, I’m a member of SASCO and Black Students Association. So, when they have meetings, I attend. (Paul)*

*“I’m chairperson of the South African Blind People’s Organisation [fictitious name] ... Then in the Cape I’m also the coordinator for the blindness sector on the Western cape network for disability ...”* (Martin)

*“en jou dissipline kan dit maak of breek ... want as my hond besluit ons is in ‘n restaurant en sy gryp sommer die kos ... gaan hulle nie gelukkig wees om haar weer toe te laat nie”*

*[and your discipline can make or break it, because if your dog decides to grab food in a restaurant, they won't be happy to allow her entry again]*  
 (Michelle, discussing the responsibility of the guide dog owner to ensure that free access for guide dogs remains desirable)

The norm of social responsibility describes a form of pro-social behaviour. The norm suggests that a person should respond to the reasonable needs of other people (Feldman, 1995). Baron and Byrne (2000) describe it as the belief that every single person has the responsibility to assist those in need. Social responsibility can also involve joining an organisation that assists persons in need (as illustrated by Martin), or that strives for the upliftment of a previously disadvantaged group (as illustrated by Paul). On a personal level, it can also represent a person's decision to support a group goal (such as illustrated by Michelle).

Not all of the participants are explicitly involved in organisations for social change, but they all do their part for the upliftment of their group associations. People join groups for several reasons (Baron & Byrne, 2000). Groups help to satisfy important psychological and social needs, such as giving and receiving attention and affection and a sense of belonging. Individuals are also able to achieve communal goals, as well as to form a positive social identity through group membership.

Elliot et al. (2002) found that social support is associated with well-being and that the internalisation of social stigma and stereotyping compounds problems of adjusting to disability; therefore it is understandable why this marginalised group will seek group membership. The group's ability, irrespective of the type of group, to provide a sense of belonging and social support, as well as to provide a springboard for developing a

positive social identity, is a valuable resource for the well-being of the person with blindness.

#### 4.4.4.6 Theme 6: There is a strong history of previous pet ownership

There is, without exception, a very strong history of previous pet ownership and great fondness for dogs among all the participants:

*"... always had pets at home ... Our one dog we had was basically because of me ... I enjoy, sort of, the companionship and sort of the whole faithful thing!" (Martin)*

*"Ek het grootgeword ... ons het altyd 'n hond gehad by die huis ... so ek is mal oor honde ... En ek is lief om met honde te speel."*

*[I grew up ... we always had a dog at home ... so I love dogs ... And I love playing with dogs] (Paul)*

*"ek het grootgeword met honde ... ons het honde by die huis ... Dis 'n naby verhouding wat ek het [with his pet dogs]."*

*[I grew up with dogs ... we have dogs at home ... it's a close relationship that I have.] (Arnold)*

Cobus's family always had dogs and he describes his relationship with dogs as *"baie goed, baie goed ... ek's lief vir diere, baie lief ... Ja, nee, ek het glad nie 'n probleem met honde nie. Nee, ek is eintlik baie lief vir diere."*

*[very good, very good ... I love animals very much ... no, I don't have a problem with dogs at all. No, actually I love animals very much.]*

*"ons het met honde grootgeword ... al van kleins af het ek 'n liefde vir diere gehad"*

*[we grew up with dogs ... from a young age, I've had a love for animals]*  
(John)

*“ons het troeteldiere gehad ... ek was baie lief vir hulle ... 'n hond is definitief my gunsteling”*

*[we had pets ... I loved them dearly ... a dog is definitely my favourite]*  
(Michelle)

All the participants have a strong history of close relations with animals, especially dogs. Paul possibly provided a very apt explanation why guide dog owners seem to have a history with dogs:

*“as jy nie van honde gehou het nie dan ... dan moet dit nogal 'n helse aanpassing wees om jou 'actually' te leer om van iets te hou wat jy nie van hou nie ... moeilik hier binne jouself moet wees!”*

*[if you didn't like dogs then ... then it has to be a hell of an adjustment to actually learn to like something you don't ... difficult within yourself]*

Pectora valent oculus recti

Through the process of attitude formation and conditioning, all the participants had positive past experiences with dogs. These positive experiences transcended into adulthood. How the positive experiences came about in the first place can be debated, as shown in section 2.3.4 by Odendaal (n.d., 2002) and Van Heerden (2001). What is of importance is that previous attitudes about pet ownership seem to have influenced behaviour (the decision to obtain a guide dog).

#### 4.4.4.7 Theme 7: Persons with blindness face multiple challenges

Environmental inaccessibility, ignorance of the public towards persons with disabilities, and being a victim of crime are all common themes among the participants.

Environmental inaccessibility/environments not adjusted for persons with disabilities:

*“Waar ek stap het ek definitief my hond nodig ... maar as jy verby die gym gaan, op pad na die skool toe waar ek werk af in die straat, is dit net ‘n oop stuk gruis met ‘n paar boompies op, en ‘n teerstraat, tussen die heinings van die huise ... dit is definitief iets waar jy maar met ‘n hond sal beweeg. Dit sal nie maklik wees om sonder dit daar te stap nie.”*

*[Where I walk, I definitely need a dog ... but when you pass the gym, on the way to the school down the street where I work, it's just an open gravel area with a few small trees, and a gravel road, between the fences of the houses ... that is definitely something you need your dog to navigate in. It won't be easy for me to walk there without it.] (Michelle)*

*“Die universiteit tot dusver is nog nie werklik aangepas vir gestremdes nie. Die bome is geplant in die middel van die sypaadjie ... parkeer voertuie op enige moontlike plek ... jy moet altyd maar weet jy kan in enigiets vasloop. Um, ja, en selfs die perseel, soos ek gesê het, is nog nie werklik aangepas vir gestremdes nie ...”*

*[The university, up to now, has not really been adjusted for disabled people. The trees are planted in the middle of the pavement ... vehicles are parked in every conceivable place ... you are resolved that you might walk into something at any time. Um, yes, and even the buildings, like I said, is not really adjusted for people with disabilities.] (John)*

*“... maar party plekke is nie gemaak vir gestremde mense nie, party plekke is gemaak vir siende mense ... ek meen, soos plekke met nie duidelike lig en so aan nie ...”*

*[... but some places were not designed for persons with disabilities, some places were designed for sighted persons ... I mean, like places with poor light and so forth] (Arnold)*

*“... verbasend genoeg is die koshuis nogal so gebou ... jy sal nooit sukkel om êrens te kom nie”*

*[... surprisingly enough, the hostel was built this way ... you won't ever have difficulties getting around] (Paul was surprised that, for once, an environment was easily accessible.)*

Lack of/poor public transport:

*“... oukei, gestremdheid maak dit vir jou moeilik om vervoer te gebruik. Publieke vervoer in die opsig dat 'n mens die, die verskillende vervoermiddelle wat in verskillende omstandighede en in verskillende areas ... byvoorbeeld die trein is, is 'n geweldige uitdaging in die sin dat die blinde persoon kan nie sien waar is die geel lyne op die perron nie ... so jy's altyd maar voortdurend blootgestel aan, aan gevaar, en daarom moet 'n ou bedag wees. Dit is nie maklik vir 'n blinde persoon om publieke vervoer te gebruik nie!”*

*[... ok, having a disability makes it difficult to use transport. Public transport in the sense that a person, the, the, different types of transport, in different conditions and in different areas ... for example, the train is a huge challenge, in the sense that the blind person cannot see where the yellow lines on the platform are ... so you're exposed to, to danger and that's why you have to be alert. It is not easy for a blind person to use public transport.] (John)*

*“... hulle moes my kanselleer omdat hulle my nie kon kom haal die vorige dag ... sulke goedjies, dis maar wat baie kere gebeur ...”*

*[... they had to cancel because they could not fetch me the previous day ... that type of thing ... that happens a lot ...]* (Cobus)

*“transport is a major ... public transport isn’t really up to scratch ... [it] makes me feel like a kid sometimes ... [it] takes away flexibility and spontaneity and just being able to go places”* (Martin)

*“ja, ek dink, want party busse het nie goeie dienste nie, dan moet ek vir myself kan doen ...”*

*[yes, I think, because some buses don’t have good service, then I have to be able to do it myself ...]* (Arnold)

Noise inhibits the ability of the person with blindness to gather environmental information and cues:

*“... met die stok is dit, is dit nogal bietjie moeilik, want dit raas baie, sommige kere ... en veral as dit reën”*

*[... with the cane it is, it is somewhat difficult, because there is a lot of noise sometimes ... and especially when it rains]* (Paul)



*“... pubs that aren’t that noisy, where you can have a decent conversation ... the kind of situations that make me feel most threatened are situations where there are lots of noise ... my radar system gets bugged ... To me [my hearing] is a crucial part of how I operate.”* (Martin)

*“... hierdie dansplekke met hierdie ‘loud’ musiek ... irriteer my baie keer, ek kan nie elke dag soontoe kan gaan nie, want ek het my ore nodig om, uh, om te kan praat in die omgewing ...”*

*[... these clubs with their loud music ... it irritates me a lot of the times, I can’t go there every day, because I need my ears to, uh, be able to speak in the environment]* (Cobus)



*“In terme van busdiens en taxi’s is dit moeilik, want baie kere is die, is die musiek so hard om die taxi, dan kan die ou nie hoor wat jy sê waar moet jy afklim nie.”*

*[It is difficult in terms of the bus service and taxis, because a lot of times, the music is so loud around the taxi, then the guy cannot hear where I want to get off.] (John)*

*“Um, dis ‘n groot oop straat met baie geluide, baie verkeer, baie geraas.”*

*[Um, it’s a big open street, with a lot of noise, a lot of traffic, a lot of noise.] (Paul)*

The public often confuses sight disability and mental impairment:

*“... as hulle agterkom jy kan nie sien nie, dink hulle jy het ook nie intelligensie nie”*

*[... when they realise that you can’t see, they think that you don’t have intelligence either] (Michelle)*

*“... onkunde in terme van mense weet nie werklik wanneer is jy gestremd en wanneer is jy blind nie. Hulle verwar altyd die twee. Hulle idee van ‘n gestremde is omdat hy blind is, is hy ook half verstandelik vertraag.”*

*[... ignorance in terms of people don’t really know when you’re disabled and when you’re blind. They always confuse the two. Their idea of a disabled person is, because he’s blind, he’s also kind of mentally retarded.] (John)*

There is general ignorance among the public regarding persons with disabilities:

*“almal verstaan nie altyd jy het hom nie gesien nie ... daai goed is maar baie in die lewe ... mense is miskien bang om met blinde mense te praat, dis wat ek self ervaar het ...”*

*[everyone doesn’t always understand that you didn’t see him ... those things occur a lot in life ... people are perhaps afraid to talk to a blind person, that is from my own experience] (Paul)*

*“And I think it’s just when people get to know me, they sort of learn more how I want to be treated.” (Martin)*

*“a blind person, something which is very much the unknown for people ...” (Martin)*

*“die mense is nie so ingesteld daar op ‘n blinde persoon nie ... hulle sien jy word gelei, hulle sal tussen die twee probeer deurloop ... wat my ma-hulle kwaadmaak, nie vir my nie ... vir hulle is dit ongeskik en vir my, ek sien dit as onkunde” and “... al gaan ek Kaap toe, is dit vir die mense snaaks ... en dan sê hy jy moet sien hoe kyk die mense vir ons, dan dink hulle ons is nou gay of iets”*

*[the people there are not so attuned to a blind person ... they see that you are being guided, they will try and walk between you and your guide ... which infuriates my parents, but not me, I perceive it as ignorance ... even if I go to Cape Town, the people find it strange ... and then he [his companion] says, you have to see the way people are looking at us, they think we’re gay or something] (Cobus)*

*“as ek gewoonlik kommunikeer met gewone mense, um, die eerste ding wat ek probeer doen is om vir hulle te wys ek is net so mens soos hulle ... maar die onkunde sal nog vir lank daar wees ...”*

*[usually when I communicate with ordinary people, uh, the first thing I do is to try to show them I’m a person just like they are ... but the ignorance will remain for a long time still ...] (John)*

*“ja, um, jou gestremdheid ... mense weet nie altyd waarom om met jou te gesels nie ... in ‘n ander dorp sal iemand dalk aan gehardloop kom en net vir jou vra, weet jy waar jy is, is jy seker jy wil soontoe gaan ... maar lede van die publiek is lede van die publiek!”*

*[yes, um, your disability ... people don’t always know what to say to you ... in a different town, a person might run towards me and just ask me, do you know where you are, are you sure you want to go there ... but members of the public are members of the public!] (Michelle).*

Risk of being a victim of crime:

*“... loop ook die risiko om geroof te word, soos enige ander mens. Maar die feit dat jy gestremd is, maak dit vir jou makliker, maak dit vir jou ‘n makliker ‘target’ ”*

*[you run the risk of being robbed, like any other person. But the fact that you’re disabled, makes you an easier, it makes you an easier target]*  
(John)

*“Ongelukkig is dit nou maar so dat vandag kry jy nou maar dat mense maklik goed gryp, grypdiewe word, en of wil bedel op straat en vir jou geld wil vra, die straatmense wat nie werk het nie.”*

*[Unfortunately, in today’s world, you get people who grab things, become purse-snatchers, or they beg on the streets and ask you for money, the people without jobs.]* (Michelle)

*“En, um, toe vat ek haar gou huis toe, dis twee blokke op en toe ek terugstap met my kiere het die polisie my voorgekeer en gesê ons moet net baie versigtig wees, ons moet lieverste nie meer so stap ... so dit is nie meer veilig om so te stap nie.”*

*[And, um, I took her home, it’s just two blocks up and when I walked home, with the cane, the police approached me and warned me to be careful, we should rather not walk like this ... so it’s not safe to walk like this anymore.]* (Cobus)

As discussed in section 2.2.5.3.1, the INDS (1996) listed certain barriers in the social environment that specifically influence persons with blindness in South Africa. These include:

- lack of accessible and safe public transport;

- inaccessible public services, especially in places such as museums, libraries, clinics, media and postal services;
- buildings, nature trails, urban and rural infrastructures were not designed to support persons with disabilities and planning professionals do not incorporate accessible environment planning in their designs;
- supporting technology, such as Braille and specific computer programmes, is expensive or limited to computer/Braille literate consumers only and thus inaccessible to most.

Another finding by the INDS (1996) was that all persons with disabilities face discrimination. A possible explanation for discrimination towards persons with disabilities could again be found in Social Psychology. Two related concepts, prejudice and discrimination, often determine people's reactions to a certain group of people. Prejudice refers to an attitude towards members of a certain group, based solely on their membership to that group, according to Baron and Byrne (2000). Within this framework, persons with disabilities are grouped together and evaluated according to the perception of the group as a whole. Prejudice is very often the product of stereotyping. In order to conserve mental effort, persons are grouped into stereotypes. This may explain the association of any physical disability with mental impairment. Discrimination is when negative actions are taken against members of a certain group, when attitudes of prejudice are translated into action (Baron & Byrne, 2000). According to these definition distinctions, one would rather conclude that persons with blindness are often the victims of prejudiced thinking, rather than discrimination, unless, of course, the prejudiced feeling towards persons with

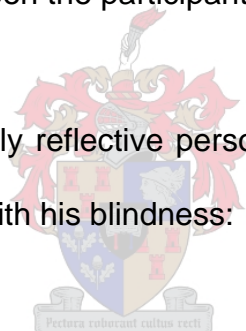
disabilities transcends into action, such as limiting educational access (as mentioned by Cobus in section 4.4.8).

The current findings, thus, support the findings by the INDS (1996), and it would seem that the INDS and South Africa as a whole still have a long way to go to truly support persons with disabilities.

#### 4.4.5 Variations among the participants in interview one

Although several common themes have emerged from the data, it is natural that certain variations will occur between the participants.

Martin (participant one) is a highly reflective person and finds himself at a stage in his life where he is comfortable with his blindness:



*“Um, at first sort of when I came to Stellenbosch, my big thing was to blend in as much as possible ... which I think was very valid. Now I’ve sort of proven to myself that I can do it quite well, so now I can move on.”*

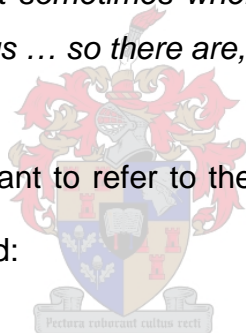
Martin also uniquely described his pending guide dog ownership as something similar to parenthood:

*“I joke with people, I tell them, guys, I’m becoming a dad soon. Um, so I enjoy their reactions. But I think on a level, its in a way true, because you’ve got this major influence coming into your life.”*

There is a sense of strong emotional ambivalence in Martin about guide dog ownership. He was very careful to point out the predicted positive and negative outcomes of guide dog ownership:

*“And I think as far as the negative aspects are concerned, I do foresee some schlep. The reasons why I haven’t got a dog yet, um, are basically that, um, you can’t fold a dog and put it in your pocket, um, which is something I can do with my cane. So I, with the cane, I liked the idea that my mobility aid was not such a central feature of my life, I liked that kind of flexibility or independence. Whereas now, the dog is something that needs to be taken care of, which I feel readier to do than ever, now. But still, I foresee the occasional frustration, and, ja, the dog might also be a kind of an impediment sometimes when it comes to, um, visiting people who might not like dogs ... so there are, there are complications.”*

Martin was also the only participant to refer to the limited access that persons with blindness have to the written word:



*“Well, there’s a lot of stuff, access to information to the written word, which is littering the environment, um, littering in the positive sense ... Um, ja, so there are all kinds of little, little irritations, things to deal with.”*

This is quite understandable, as Martin was the most highly educated participant and found himself in a very academic setting.

Paul (participant two) seemed unsure as to the functioning of a guide dog. It seemed that he has done little research on how guide dogs operate:

*“Dat dit, as dit veilig is om die pad oor te steek, ek bedoel, dan ... **daar’s miskien iets wat hy doen**, dan kan jy weet, oukei, ‘right’, nou kan ek die pad kruis, dis veilig.”*

*[That it, when it is safe to cross the road, I mean, then ... **then perhaps there’s something he does**, then I know, ok, right, now I can cross the road, it’s safe.]*

A very unique variation for Paul was his discomfort with offers of help from strangers. He presented great concern about others’ opinions of him:

*“Ek is nogal baie bewus daarvan, veral as ek mense kry en ek is op pad kampus toe, ek loop miskien. Gaan hulle my altyd vra, kan ek jou help. Soms gaan ek sê ja, maar soms gaan ek sê nee, ek is oraait. Maar dan wonder ek altyd agterna hoe het daardie een gevoel as ek dit van die hand gewys het.”*

*[I’m very conscious of it, especially when I encounter people on the way to campus, I’m maybe walking. Then they always ask, can I help you. Sometimes, I will say yes, but sometimes I say no, I’m all right. But then I always wonder afterwards, how did that person feel when I declined his offer.]*

Arnold (participant three) found the interview situation quite uncomfortable and found the articulation of his feelings quite new. Arnold was the only participant who had no particular explicit expectations of the influence his prospective guide dog might have on his life:

*“ag, dis nie eintlik veel wat, uh, moet gebeur in my ... hy kan maar net, daar’s nie eintlik baie wat die gidshond gaan verander en so nie”*

*[Oh, not much has to happen in my ... he just has to, there’s not really much that the guide dog will change and so on.]*

He was also the only participant employed in a sheltered employment setting. Arnold also talked about perceived differences between one’s pet dogs and stray dogs:

*“Ons het honde by die huis, en, uh, die honde kan jy leer, meer as die honde daar buitekant, maar ek sien die honde hier buitekant rondloop, maar jy kan nie met hulle daarso gesels of meer met hulle speel as wat jy met jou eie honde by die huis kan nie.”*

*[We have dogs at home and, um, you can teach the dogs, more so than with dogs outside, but I see the dogs walking outside, but you can’t speak to them or play with them, like you would with your own dogs at home.]*

Cobus (participant four) was the only first-time prospective guide dog owner to raise safety as a reason for guide dog acquisition:

*“Dis veiliger ... in terme van as jy maar net alleen stap of saam met jou kerie is gaan hulle jou makliker pla en beroof as wat jy met ‘n hond loop ... omdat dit nie meer so veilig is vir my om te stap in die aand nie, sit ek baie aande hier en doen dalk werk om die aand om te kry, omdat ek nie in die aand wil stap, ek gaan nie, ek gaan definitief nie die noodlot tart nie. Ek gaan nie daai kans vat nie. Wag maar liewerste ‘n maand of wat, kry my hond, ek weet dis heelwat veiliger.”*

*[It’s safer ... in terms of when you walk alone or with a cane, it is easier for them to bother you and mug you than when you’re walking with a dog ... because it’s not as safe anymore to walk around at night, I spend many nights here and continue working to get through the night, just because I don’t walk at night. I won’t, I definitely won’t tempt fate. I won’t*



*take that chance. Rather wait a month or so, get my dog, and I know it's a lot safer.]*

He is also the only self-employed participant. Cobus discussed his relationship with dogs quite extensively, with a strong focus on a disciplined relationship:

*“selfs sy hond luister dalk in ‘n mate baie meer vir my as vir hom. Ek het net daai ekstra bietjie ... So ek sou nou nie ‘n hond wat heelyd hier gaan rondhol in die huis nie, as die hond op sy plek moet wees, moet die hond op sy plek wees. So, um, ek is, ek hou van ‘n gedissiplineerde hond.”*  
*[even his dog obeys me more than him. I just have that bit extra ... So I don't want a dog that runs around in the house the whole day, when the dog needs to behave, he needs to behave. So, uh, I am, I like a dog with discipline.]*

Cobus uniquely discussed the negative impact of his blindness on his job opportunities and educational choices:



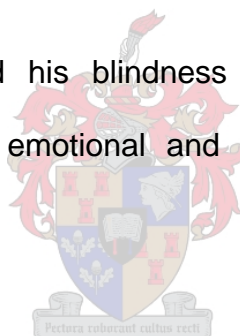
*“oukei, as ek nou vinnig moet dink om hierdie besigheid. Want baie mense het gesê dowe mense, ag, blinde mense se gehoor is baie goed so hierdie klankingenieurswese-werk behoort goed te wees, want dis wat jou oor nodig het. Maar sodra jy instap en sê maar oukei, kom ons doen die kursus, o, nee, nee, dan kom nou, dan kom al die maar's skielik”*  
*[ok, If I have to quickly think about this business. Because many people said that deaf people, no, blind people's hearing is very good, so the sound engineering work ought to be good, because that's what your ear needs. But, as soon as you say, ok, lets do the course, then it's oh, no, no, then all the 'buts' appear]*

Finally, he alluded to misconceptions that existed about him, specifically because of his normal appearance. He is also of the opinion that 'looking' normal is an advantage:

*“En nie om te gaan om daai persoon af te kraak of so iets, omdat hy nie weet ek is blind nie, dis my pluspunt as ‘n ou nie kan sien ek is nie. Soos baie mense ken my dalk al ‘n week of twee, dan glo hulle nie my as ek vir hulle sê ek is blind en so nie.”*

*[And not to go and be derogative towards the person, because they don't know that I'm blind, it's to my advantage when a person cannot see that I am. Like, many people know me for a week or two already, then they don't believe me when I tell them I'm blind and such.]*

John (participant five) acquired his blindness later in life than all the other participants. He discussed the emotional and interpersonal trauma involved in acquiring blindness:



*“um, meestal is die emosionele veranderings en aanpassings wat ‘n ou moet maak. Want wat eerstens gebeur is jy voel alleen en die grootste ding waarmee jy worstel is om jouself te aanvaar ... dat jy blind is en, ek het geworstel daarmee so vir ‘n hele paar jaar. Um, en as jy jouself aanvaar het, dan ontdek jy eers daarna maar jy't nie vriende nie, almal het jou gelos. Um, um, die mense se siening verander ook in jou. Hulle begin jou bejammer en jou nie te aanvaar soos jy altyd was nie. En dan begin die proses wat jy moet vir hulle ook rehabil ... jy moet jou self rehabiliteer en dan ook vir hulle weer onderrig om mens te aanv ... te hanteer en om nog altyd ... jy's nog altyd dieselfde mens, jy kan maar net nie sien nie.”*

*[um, mostly it's the emotional changes and adjustments that one has to make. Because, what happens firstly, is that you feel alone and the biggest thing that you battle with is to accept yourself ... that you're blind,*

*and I struggled with that quite a few years. Um, and when you've accepted yourself, then only after that you discover that you don't have friends, everyone left you. Um, um, people also think differently about you. They start feeling sorry for you and do not accept you as you always were. And then the process through which you have to rehab ... you have to rehabilitate yourself and then also teach them to accept ... to cope with it and to always ... you're still the same person, you just can't see.]*

He also made specific reference to his religion as a mediating factor in his adjustment to disability:

*“definitief het my geloof versterk deur die proses, gedurende die aanpassing en dit versterk met daaglikse kontak ... um, ja, definitief het die geloof 'n groot bydrae gelewer met die aanvaarding. In die opsig dat, um, as jy jousef aanvaar, dan kan die ander rondom jou aanvaar en dan is jy oortuig dat, um, God aanvaar jou ook ... My geloof het definitief gehelp.”*

*[my religion was definitely strengthened by the process, during the adjustment and it grows stronger every day ... um, yes, the faith definitely contributed a great deal to my acceptance. In the sense that, um, when you accept yourself, then those around you can accept you and then you're convinced that, um, God also accepts you ... My religion definitely helped.]*

A traumatic event changed John's approach to life:

*“um, dis die eerste keer toe ek hard in 'n paal vasgeloop het en toe my gesig heeltemal beseer het. Um, en daarna het ek besluit om kalmer te bly en om dinge stadiger te vat ... ek het vir my self meer geduld aangeleer.”*

*[um, it was the first time that I collided heavily with a pole and totally injured my face. Um, and after that I decided to stay calm and to take things slower ... I taught myself more patience.]*

John discussed at great length his amazement at the human-animal interaction:

*“Ek het besef, um, hoeveel diere vir ons as ‘n mens werklik beteken. En hoe goed ons en doeltreffend ons dit vir menslike hulpbronne kan aanwend.”*

*[I realised, um, how much animals can mean to us as humans. And how well and efficiently we can apply them as human resources.]*

He was the only participant that experienced monetary exploitation due to his blindness:

*“Natuurlik moet jy ook altyd voorbereid wees om jou kleingeld of jou spesifieke bedrag gereed te hê want jy kan ‘n probleem optel as jy die kleingeld van hom af terugkry.”*

*[Obviously, you have to be constantly prepared to have your change, or the precise amount, ready, because you can encounter problems when you receive your change from him.]*

Michelle (participant six) is the only female participant. She was very amused with her initial idealistic expectations of guide dog ownership:

*“saam met jou loop, al’s dadelik verstaan wat jy wil doen, lief vir jou wees [laughs] ... jy droom en idealiseer mos iets.”*

*[walk with you, immediately understand everything that you want to do, love you ... you tend to dream about and idealise something.]*

She seems to be in competition with her mother for the affection of their pets and very reluctant to share her pets:

*“Ek was baie lief vir hulle, um, maar ek het hulle basies naweke gesien, omdat ek ‘n koshuisstudent was. Ma het die versorging gehad, so hulle het ma aanbid en haar soos ‘n skaduwee gevolg. En dan’s dit hartseer, want jy’t vir Wimpie vir jou verjaarsdag persent gekry, maar hy’s baie lief vir Ma. Maar ek was lief vir hulle.”*

*[I loved them dearly, um, but I basically saw them on weekends, because I stayed in the hostel. Mother did the caring, so they idealised mother and followed her like a shadow. And then it’s sad, because you received Wimpie as a birthday present, but he loves mother more. But I loved them dearly.]*

*“my ouers moet haar [the retired guide dog] vat vir ‘n rukkie moontlik, hopelik, ek weet nie, weer ‘n huis gaan kry wat ek finansieel kan bekostig en waar sy dan weer kan kom bly. Um, in daai opsig, hoe lief gaan sy vir my ma raak ...?”*

*[my parents have to take her for a while, possibly, hopefully, I don’t know, get a house that I can afford and where she can come stay again. Uh, in that sense, how much will she grow to love my mother ...?)*

Perhaps because Michelle is the only female participant, she was the only person to mention the challenge of wardrobe choice and dressing for a person with blindness:

*“Um, ag omdat ‘n mens alleen bly, jy moet nog steeds aanvaarbaar en netjies lyk vir die werk. Dit, dit kan nogal iets wees, wat vir ander mense normaal kom, moet jy aanleer, want jy’t nie ‘n besef van kleur nie ... So ek moet maar leer, deur te memoriseer, wat by watter uitrustings pas.”*

*[Um, because one stays alone, you still have to look acceptable and neat for work. That, that can be quite something, what comes naturally to other*

*people, you have to learn, because you don't have a concept of colour ... So, I have to learn, by memory, what goes with what outfit.]*

Michelle also discussed her struggle for acceptance as a normal person in the larger community, something that was mentioned by John as well:

*“as hulle agterkom jy kan nie sien nie, dink hulle jy het ook nie intelligensie nie. Hulle beseft nie jy't ook die verstand om 'n rekenaar te verstaan en byvoorbeeld daarmee te werk, of 'n programmeringskursus te voltooi, of regte te gaan studeer en 'n prokureur te word nie.”*

*[when they realise you can't see, they think you don't have intelligence either. They don't realise you too have a brain to understand a computer and, for example, to work on it, or to complete a programming course, or to study law and become an attorney.]*

Michelle's struggle for acceptance as a normal person is an example of cases discussed by Wright (1960), who found that it is the wish of many persons with disabilities to appear well-adjusted. This benefit of normal appearance was also highlighted by Cobus.

Finally, Michelle found the transition from school to the 'real world' quite daunting:

*“Dit was 'n aanpassing. Um, die skool het jou baie beskerm grootgemaak ... dit was regtig ingerig vir 'n blinde persoon. Um, en nou weet jy nie wat jy gaan verwag nie want jy gaan na 'n vreemde omgewing toe.”*

*[It was an adjustment. Um, the school sheltered you ... it was really designed for a blind person. Um, and now you don't know what to expect, because you're going to an unfamiliar environment.]*

The common themes and variations converge in order to provide a rich description of the living world of the participants. The following section will focus specifically on the participants' experiences as guide dog owners.

#### 4.4.6 Common themes emerging from interview two

The second set of interviews had the singular purpose of discovering the meaning of the experience of acquiring and owning a guide dog for the six participants. As with the data from the first interviews with the same participants, the NMUs and essences of the experiences were identified and analysed. Common themes (themes present in all the participants) emerged from the second interviews. It should be noted that the two second-time guide dog owners, John and Michelle, were already asked in their first interviews to comment on their experiences as previous guide dog owners. The dialogues from these two participants regarding their previous experiences as guide dog owners were incorporated with the findings of the second interviews. All the names of the participants, their dogs and significant locations were changed or omitted in order to ensure the participants' privacy.

Eight themes regarding guide dog ownership emerged from interview two. The themes are summarised in table 9.

Table 9

*Eight Common Themes regarding Guide Dog Ownership from Interview Two*

<p><b>1. A guide dog improves mobility:</b></p> <p>Guide dog ownership has enhanced the mobility of all the participants. Guide dogs are described as providing safer, quicker and more dynamic mobility aid than a long cane.</p>
<p><b>2. A guide dog provides companionship:</b></p> <p>A guide dog is seen as a companion to the owner. The owner and dog form a close working relationship/partnership. Feelings of affection towards the dog develop, as well as perceived reciprocity and unconditional love from the dog towards the owner. The participants also feel that some common personality characteristics are shared between the dog and its owner. An almost human-like perception of the dog emerged.</p>
<p><b>3. A guide dog necessitates personal changes:</b></p> <p>All except one (see the discussion on Martin in section 4.4.8) of the participants felt that their guide dog had increased their independence, mainly through its ability to provide better mobility and personal safety. All the participants experienced other forms of personal change as well, such as mood elevations, increased assertiveness and increased self-confidence. <b>Initial mental adjustments are necessary for the owner to adjust to a guide dog.</b></p>
<p><b>4. Lifestyle changes result from guide dog ownership:</b></p> <p>A guide dog is a major responsibility, according to all the participants. A guide dog not only requires care (both everyday care and health-related care) and food, but also time (physically caring for the dog and making plans to accommodate the dog in social settings) and effort. Some of the participants likened guide dog ownership to parenthood. Environmental changes also needed to be made by some in order to accommodate the new guide. The participants also commented on their responsibilities as a guide dog owner to educate people on guide dog ownership.</p>
<p><b>5. Guide dogs are <i>absolute</i> social magnets:</b></p> <p>An absolute magnet both pulls objects towards it and pushes objects away from it. A guide dog seems to have two distinct influences on people in public. It acts as a social facilitator, to induce greetings and conversation with people who are familiar with dogs and who enjoy contact with them. However, guide dogs also repel people who are afraid of dogs and cause them to avoid the owner and dog.</p>
<p><b>6. Distractions inhibit the guide dog's ability to guide the owner successfully:</b></p> <p>Guide dogs can get distracted by a variety of events, objects and other animals and people.</p>
<p><b>7. Ignorance regarding the role, rights and functioning of a guide dog still persists:</b></p> <p>Members of the general public still exhibit ignorance regarding a guide dog's functioning and role in the life of a person with visual impairment. There are also accounts by all the participants about being denied access to public places with their guide dog.</p>
<p><b>8. Guide dogs can be a source of pride to the owner:</b></p> <p>The participants all expressed their wonder and pride regarding the talents and training of their dogs and an appreciation for their dogs' abilities.</p>

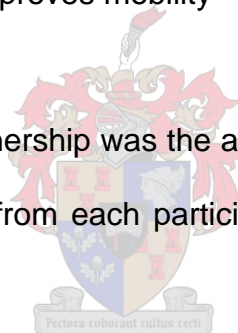


#### 4.4.7 Discussion of common themes emerging from interview two

The six interview transcriptions were classified into common themes. Creative reduction resulted in nine common themes. These themes are: 1. guide dogs can improve mobility; 2. guide dogs can provide companionship; 3. personal changes are necessitated by a guide dog; 4. lifestyle changes are needed in order to accommodate a guide dog; 5. a guide dog is a true social magnet; 6. distractions inhibit the dog's ability to guide; 7. ignorance regarding the role and rights of guide dogs remains; 8. a sense of pride of their dogs develops with the owners.

##### 4.4.7.1 Theme 1: A guide dog improves mobility

The first theme on guide dog ownership was the ability of a guide dog to improve the participants' mobility. Examples from each participant relating to this theme will be given.



A guide dog is a safer mobility aid than a long cane or residual sight:

*“Alles, ag, ek kan nou roetes loop wat ek nooit voorheen, met my stok, wou loop nie, want ek was, ek was te bang om dit te loop. Maar met die hond, ag, ek is nie meer bang nie ... Ek kan enige roete, die ouens vra hoe moet ek loop en hoeveel kruisings en sulke goed, want ek weet met die hond, die kans dat jy in “obstacles” gaan vasloop is soos in zero ...”*  
*[Everything, ag, I can now walk on routes that I never could before, with my cane, because I was, I was too scared to walk there. But with the dog, I'm not a scared anymore ... I can do any route, just ask the guys how many crossings and things like that, because I know, with the dog, the chance that I will walk into obstacles is like, zero ...]* (Paul)

*“Ek het verwag dat hy vir my mooi gaan lei oor die paar goed, goeters en so aan, goed in my pad. En hy kan darem ‘face’ waar, party goed wat ek miskien nie raakgeloop het, party stopplekke, van die stopplekke het nie ... party van hulle het ‘n trap so ... Omdat [town’s name] so baie slote het, op die rand van die sypaadjies is daar mos ‘n sloot, ek gaan nou nie dadelik, nou maklik in daai sloot [val nie], want jy weet daar is nou ‘n sloot daarso.”*

*[I expected that he should guide me nicely over a few things, things and so on, things in my way. And he can face where, somethings that I perhaps missed, some stops, some of the stops don’t have ... some have a step ... Because [town’s name] has so many ditches, there is a ditch on the fringes of the pavement. I won’t now, not [fall] easily into the ditch, because you know there’s a ditch there.] (Arnold)*

*“... en soos nou het ek gestap as die wind waai, waar dit voorheen ‘n ‘problem’ was want jy het jou ore nodig en dan is hy heel rustig. Jy kan nou lekker met hom stap en jy weet. Ek kan nie onthou dat ek al in iets ergs wat my seergemaak het vasgeloop het nie ...”*

*[... and like now, I walked while the wind was blowing, where it was a problem previously, because you need your ears and the [the dog] is calm. You can now walk with confidence, because you know. I can’t remember that I’ve collided with anything that had hurt me ...] (Cobus)*

*“Dit is makliker om daar [openbare plekke] te beweeg, ek beweeg daar met groot selfvertroue, sonder dat ek enigsins bang sal wees dat ek in iets sal vasloop.”*

*[It is also easier to move in {public places}, I move there with great self-confidence, without being scared at all that I will collide with anything.] (John)*

*“Dit is ook vir my baie makliker om voorwerpe te vermy met ‘n gidshond ... Verkeer ook, hulle kan die verkeer hanteer en as dit baie winderig is, kan my hond sien hier kom ‘n voertuig aangery na die stopstraat toe, wat ek nie sal hoor nie.”*

*[It is also a lot easier for me to avoid obstacles with a guide dog ... Traffic as well, they can handle the traffic and when it's windy, my dog can see when a vehicle is approaching the stop sign, something which I cannot hear.] (Michelle)*

A guide dog saves on transit time by allowing the owner to move faster (and through open spaces) and with less mental effort than using a long cane or residual sight:

*“Um, a long cane, um, maybe can't allow you to travel exactly as fast as what you would with a dog ... the long cane probably has a shorter field of perception ... the long cane is, I mean, it makes you a lot more reliant on your own, uh, internal map of the environment. And you're much more reliant on yourself to identify landmarks.” (Martin)*

*“Ek kom by plekke baie gouer as wat ek het. Soos vanoggend was ek laat gewees juis. En dit het my soos in, gewoonlik met die “long cane” het dit vir my so 20 minute of so gevat, het ek dit vanoggend in iets soos 14 minute kampus toe geloop.”*

*[I get to places faster than before. Like, this morning, I was late. And it took me, like, usually with the long cane, it took me about 20 minutes or so, this morning I walked to campus in about 14 minutes.] (Paul)*

*“Ek kan sê dis vinniger, ja.”*

*[I can say it's faster {using a guide dog}, yes.] (Arnold)*

*“En dis vinnig. Ek kan nie glo ... as ek saam met 'n persoon stap wat my moes gelei het, elke keer stap ons vinnig. Maar nou is dit vinnig!”*

*[And it's fast. I can't believe it ... when I walked with a human guide, we walked fast. But now it's fast!] (Cobus)*

*“Dit was meer 'n gerusstelling omdat jy nou nie meer hoef te onthou wat staan waar nie en jy's ook meer kalm, want die hond sal wegdraai as daar*

*‘n ‘obstacle’ in die pad is en jy hoef ook nie meer so erg te konsentreer hoe om waar te draai nie. Jy hoef ook nie meer onseker te wees oor wat vorentoe wag vir jou nie; ‘n ou kan nou lekker stap.’*

*[It gave me peace of mind, because you don’t have to remember where everything is, and you’re also calmer, because the dog will turn away when there’s an obstacle in the way. And you don’t have to concentrate so hard on where and how to turn. You don’t have to be afraid about what might be in front of you, you can walk with confidence.] (John)*

*“En ek spaar baie tyd [wanneer ek loop met die gidshond]!”*

*[And I save a lot of time {when I’m walking with the guide dog!}] (Michelle)*

A guide dog is a more dynamic mobility aid and more reliable than a long cane or a human guide:

*“...what the guide dog can do what the cane can’t, is that the long cane can’t anticipate” (Martin)*

*“Ja, die nadeel van die ‘long cane’ was weer, jissie man, alhoewel jy die roete geken het, het jy altyd nog in “obstacles” vasgeloop ... en met Voyo, die voordeel as ek loop ... loop ek feitlik in niks meer vas nie.”*

*[Yes, the drawback of using the long cane was, oh, even though you know the route, you still collided with obstacles ... and with Voyo, the advantage is that I very rarely collide...collide with anything.] (Paul)*

*“Hy werk, hy’s goed. Hy kan vir my nou party plekke loop, presies die plekke waar ek vir hom vra waar hy moet gaan.”*

*[He works, he’s good. He can now walk with me to some places, exactly the places I ask him to go.] (Arnold)*

*“Met die ‘cane’, ... as ek op die hoek met Buddy [dog’s name changed] staan sou ek vir hom sê ‘forward’. En as daar ‘n kar is sal hy terug ... jy*

*kry baie keer die kar wat mos sag is, en dan hoor jy hom glad nie – dan sal hy jou terughou tot hy sien dis reg.”*

*[With the cane, ... when I'm standing on the corner with Buddy, I will command him 'forward'. And if there's a car approaching, he will wait ... often you get a car that's very quiet, and then you don't hear it at all – then he will hold you back until he sees it's fine.]*

*“... al lei jy my vergeet jy so nou en dan om te sê hier's 'n bruggie – jou aandag is dalk vir 'n oomblik afgetrek en iets gebeur ...”*

*[... even if you guide me, you occasionally forget to warn me – your attention is divided for a moment and something happens ...] (Cobus)*

*“'n gidshond kan diagonaal oor 'n ruimte stap ... dan kan sy vir jou die maklikste oop pad uitsoek, want sy weet wat 'n deur is ...”*

*[a guide dog can walk diagonally across an area ... then she can look for the easiest route, because she knows where the door is ...] (Michelle)*

A guide dog gives more mobility confidence to the owner (also in unknown environments):



*“...for two days this week I've been working in Cape Town for the first time, so that was an environment which I didn't know. And, ja, there I can see the potential of where the dog would, could be useful.” (Martin)*

*“Soms het 'n ou nie die roete geken nie en as jy haar die bevel gee om die roete te vind, dan reageer sy positief daarop en [dit het] 'n ou nogal baie selfvertroue gegee om die roete te loop sonder enige kommernisse’  
[Sometimes you don't know the route and when you tell her to find the route, she reacts positively and it gave you a lot of confidence to navigate the route without any worries.] (John)*

According to the current participants, guide dogs as mobility aids are safer, faster and more dynamic than other mobility aids, which seemingly translated into more

mobility confidence for the participants. In the first interview, the participants all had expectations regarding the facilitation of mobility by their prospective guide dogs. The participants expected guide dogs to provide better mobility aid than a long cane, to make their journeys safer, to make unknown environments more accessible and to be more timely than other mobility aids. Based on the participants' expectations regarding the influence of a guide dog on their mobility, it would seem that their expectations have been met and satisfied.

Increased mobility confidence may well translate into other advantages, such as increases in social contact (see theme 5) and perceived independence (see theme 3). As mentioned in the discussion of the first interview, mobility is a major area of concern for a person with blindness (Imrie, 1996). If mobility improved, as these findings may suggest, it could reduce the constant worry that persons with blindness have regarding their mobility. Rusalem (1972) found that constant attention to non-visual stimuli could be exhaustive, and Martin and John specifically referred to the reduction in mental effort that their guide dogs have facilitated.

This theme lends support to the argument that guide dogs are successful and effective mobility aids, at least to those persons that prefer to obtain one. The finding of enhanced mobility concurs with the findings by the Guide Dog Foundation for the Blind, Inc. (2002).

#### 4.4.7.2 Theme 2: A guide dog provides companionship

The second theme that emerged from the second interview (for all the participants except Arnold) is the experience of companionship between the owner and the guide dog. Several quotes highlighted the variations on this theme.

The guide dog provides companionship and evokes affection:

*“well, it’s, it’s a companion, so in that sense it’s, it’s very nice to have this dog who is always with you and who really seems to care and love me. And, um, because I like dogs, its always a treat having this little doggie, who responds and interacts and ja, so that’s very nice ...”* (Martin)

*“Want ek bedoel, omdat sy my na aan die hart lê ...”*  
*[Because, I mean, she is dear to me ...]* (Paul)

*“Ons het mos baie gepraat net oor daardie ‘companionship’ wat jy het met die hond het, en dit is daar, definitief.”*  
*[We talked a lot about that companionship that you have with the dog, and that’s definitely there.]* (Cobus)

*“Hy’s ‘n hulpmiddel en hy’s jou, hy’s jou vertroueling. Want soos die jare aangaan ontwikkel julle ‘n regte ‘relationship’, of verhouding, tussen julle twee, verstandhouding. Julle raak na aan mekaar soos die tyd verby gaan.”*

*[He’s an aid and he’s, he’s your confidant. As the years go by, the two of you develop a real relationship, understanding. Your grow attached as time passes.]* (John on his first guide dog)

*“Dit wat Vito [dog’s name changed] doen, is verskriklik baie, want jy gaan nie vandag ‘n mens kry wat dit vir jou sal doen nie. Sy’s beskikbaar enige tyd; sy is 24 uur beskikbaar. Sy is saam met my in die moeilike*

*omstandighede. Net die feit dat, haar bereidwilligheid, jy gaan dit nie vandag kry deur 'n mens nie ...”*

*[What Vito does, is a lot, because you won't find a person today that would do the same. She's available any time, she is available 24 hours. She's with me in difficult circumstances. Just the fact that, her willingness, you're not going to find it in a person today ...] (John on his second guide dog)*

*“En natuurlik my lewe het sy nege jaar lank as my gidshond gedeel.”*

*[And of course she shared my life, as my guide dog, for nine years.] (Michelle on her first guide dog)*

*“... so ongemerk het ek maar begin speelgoed koop en koekies gee en jammer kry as iemand iets sê van Toby [dog's name changed] ... sy het in my hart gekruip ... ja, sy's my hond, ek's lief vir haar, sy's ook my hele hart. Ek het ook my alles vir haar gegee.”*

*[... so unnoticed, I started buying toys and giving biscuits and felt sorry for her when somebody said something about Toby ... she's found a place in my heart ... yes, she's my dog, I love her, she's has my whole heart.] (Michelle on her second guide dog)*

*“Sy's 'n waardige opvolger. Sy vervang nie die ander een as vriendin nie; sy's weer 'n vriendin in eie reg.”*

*[She's a worthy successor. She doesn't replace the other one as a friend, she's a friend in her own right.] (Michelle on her new dog compared to the old one)*

There is also an experience of reciprocal love from the dog:

*“ja, and I think that what has helped is that, um, um, notwithstanding how firm I was with the dog ... it still loves me afterwards ...” (Martin)*



*“So, dis die een ding van die hond ... jy moet die heelyd aan hom ook dink, maar dis nie ‘n probleem nie – dis nie ‘n nadeel of so iets nie. Teen dit wat hy vir jou doen is dit NIKS nie.”*

*[So, that’s the one thing about the dog ... you have to think about him the whole time, but that’s not a problem – it’s not a disadvantage or something. Compared to what he does for you, it’s NOTHING.]* (Cobus)

*“En, en sy gee my definitief liefde, op haar manier.”*

*[And she definitely gives me love, in her own way.]* (Michelle)

*“...maar die liefde wat hulle vir my gee maak dit oor en oor die moeite werd.”*

*[... but the love that they give me, makes it all worthwhile.]* (Michelle)

Some of the participants felt that they even share personality characteristics with their guide dog or that their dog suits them, which helps their understanding and their relationship:

*“Ek en die hond verstaan mekaar...”*

*[The dog and I understand each other]* (Paul)

*“Sy persoonlikheid is baie soos myne.”*

*[His personality is a lot like mine.]* (Cobus)

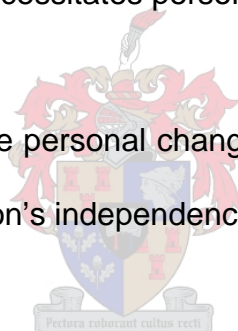
*“Daar’s baie dinge in ons geaardheid wat ooreenstem, um, ek kan amper sê geaardheid, want sy’s ook een wat hou van laat slaap, um, sy’s, sy hou ook daarvan om verskillende paadjies te stap en nie net elke dag die selfde ding te doen nie.”*

*[There’s a lot of commonalities in our temperaments, um, I can almost call it temperament, because she also enjoys sleeping late, um, she also enjoys alternative routes, not doing the same thing every day.]* (Michelle)

This theme suggests that guide dogs can provide companionship, are a source of reciprocal affection and have perceived shared personality characteristics with their owners. This theme concurs with literature on the potential benefits of pet and service dog ownership, specifically regarding the experiences of companionship and affection/support between the owner and dog (Camp, n.d.; Guide Dog Foundation for the Blind, Inc., 2002; Lane et al., 1998; Valentine et al., 1993). The perceived affection and acceptance by their guide dogs could also facilitate self-acceptance and the development of improved self-esteem, as suggested by Van Heerden (2001).

#### 4.4.7.3 Theme 3: A guide dog necessitates personal changes

A guide dog seems to necessitate personal change in their owners' perceptions and has the ability to enhance a person's independence.



A guide dog can enhance a person's independence (mentioned by all the participants except Martin):

*“Definitief onafhanklikheid! Ek, ek hoef rêrig nou nie meer by iemand te vra, ek sê ‘ek moet nou daartoe gaan’, want ek kan nou basies net by iemand ‘directions’ kry ... Dan hoef ek nie te ‘worry’ nie, dan moet ek net tot daar loop en seker maak ek hou al die ‘directions’.”*

*[Definitely independence! I really don't have to ask someone, I say 'I have to go there,' because I can basically just get directions from someone ... Then I don't have to worry, then I just have to walk there and keep track of the directions.] (Paul)*

*“Ekstra vryheid wat jy het [met 'n gidshond] ...”*

*[Extra freedom that you have {with a guide dog} ...](Cobus)*

*“Ek dink jy voel meer tevrede met jouself. Ek kan nie dink hoe om dit te stel nie. Jy voel ekstra ‘confident’, ek hoef nie nou iemand te vra ... veral soos vandag wat die wind waai, ek wil gou vir hom veearts toe vat nie.”*

*[I think you feel more satisfied with yourself. I can’t think how to put it. You feel extra confident. I don’t have to ask someone ... especially today when the wind is blowing, I want to take him to the vet.] (Cobus)*

*“Ek kan gaan waar ek wil, daar is nie beperkings nie. As 'n ou se beweeglikheid beperk word, dan is dit net so goed jou vryheid is beperk. En as jou vryheid beperk word dan is jou hele lewe beperk in baie aspekte. En as dit beperk is moet jy gewoonlik na ander bronne kyk ... As jy vry kan beweeg, beteken jy kan dinge doen soos jy wil. Dit beteken jy hoef nie te wag vir ander mense om jou te help om te beweeg nie. Jy hoef nie te wag vir terugvoering nie.”*

*[I can go where I want, there’s no restrictions. When one’s mobility becomes restricted, then it’s just as good as if your freedom is restricted. And when your freedom’s restricted, then your life is restricted on many levels. And when it’s limited, you usually have to turn to other sources ... When you’re free to move, it means you can do things your way. It means that you don’t have to wait for other people to help you move. You don’t have to wait for feedback.] (John)*

*“Sy gee my weer onafhanklikheid; ek kan weer aangaan, ek kan weer winkel toe gaan, ek kan weer stap waar ek wil wees.”*

*[She gives me independence again. I can go out again, I can go to the shops, I can walk to where I want to be.] (Christine on her second dog).*

The relationship with the dog can also cause diverse, but positive personal changes:

*“um, one interesting change which I noticed from, um, the word, uh, go nearly of getting the dog was that, um, suddenly I’ve had to learn to be very firm with another being. Which was with me, sort of, a conscious*

*decision of something that I ... I sort of saw myself of one to be, sort of, more gentle, um, more non-directive kind of person. Um, but I mean, that doesn't work with a dog. And I think its actually been very good for me to, to explore that part of myself as well ... of having to be firm, of having to assert my will very firmly on another being. Um, so, I think that's been a very good thing, um ... assertive would be a good word."* (Martin)

*"... beplanning ... maar ek dink dis ook goed, dis nogal 'n voordeel. Ek is 'n ou wat mos nooit beplan het nie. Ek het net opgestaan en gelewe so ... ek dink dit help.'*

*[... planning ... but I think it's good also, it's an advantage. I'm a guy that never planned. I got up and lived, so ... I think it helps.]* (Paul, describing the way his guide dog forced him to become more organised)

*"Ja-nee ... dit was, ek, ek dink bietjie miskien die heel belangrikste is, ek het baie goed geleer om my, my ... om tyd te 'manage'."*

*[yes ... it was, I think it was maybe the most important thing, I learned how to, to ... manage my time.]* (Paul)

*"... maar dis ook bietjie makliker as om op jou eie te loop. Want hy kry party goed wat hulle miskien raak kan sien wat dan 'n bietjie oraait is ..."*

*[... but, it's also a bit easier than walking on your own. Because he may find somethings that he has spotted, and that's fine with me ...]* (Arnold)

*"Aan die begin was dit ... onder stres en dan is 'n mens se geduld nie so ... my geduld is baie beter. Jy weet self ... as nou iets gebeur, staan net terug en kyk na die situasie."*

*[At the beginning it was ... under stress, and then one's patience is not ... I have a lot more patience now. You know how ... when something happens, just stand back and assess the situation.]* (Cobus)

*"Ek dink dis meer wat my vriende vir jou sal kan sê (of ek verander het of nie). Ek weet nie. Daai ekstra verantwoordelikeidsin."*

*[I think that's something my friends will be more able to tell you {whether I changed or not}. I don't know. That extra sense of responsibility.]* (Cobus)

*“Ek sal nie sê dit [gidshondeienaarskap] het my verander op ‘n manier nie, maar dit het wel my lewensvisie verbreed en gemaak dat ek uit ander hoeke na sommige aspekte kyk ...”*

*[I won't say it {guide dog ownership} changed me in any way, but it gave me more purpose in life and has taught me to look at things from different angles ...] (John)*

*“En dit is, ja, dit maak definitief ‘n verskil in ‘n ou se lewe in die opsig wat jou beweeglikheid betref en jouself meer ... dit lig bietjie jou selfvertroue want jy weet jy sal nie maklik in ‘n voorwerp vasloop nie.”*

*[And yes, it definitely makes a difference in your life with regards to your mobility and ... it enhances your self-confidence, because you know you won't easily walk into something.] (John)*

*“Dit gee jou definitief selfvertroue. Jy kan amper, kan ek sê, amper gelyk meeding met wat siendes kan doen. Jy kan in jou eie reg funksioneer.”*

*[It definitely gives you self-confidence. You can almost, can I say, you can almost compete with what sighted people can do. You can operate in your own right.] (Michelle)*

Initial mental adjustments are also needed by the owner in order to accommodate and form a partnership with the guide dog:

*“I mean people will come up to me and play with the dog and I've actually experienced somebody doing that for a good two minutes, just play with the dog and not necessarily talking to me ... I think it's learning how to deal with the situations. Deciding whether I actually want to bother to introduce myself and say hello and um, or whether to just sort of continue with the conversation I'm having on the other side.” (Martin)*

*“Ek dink die hele idee om te vertrou op ‘n hond. Ek bedoel, ek het vir ‘n hele aantal jare net met ‘n “long cane” geloop, so dit was nogal ‘n helse aanpassing.”*

*[I think the whole idea of trusting a dog. I mean, I have walked with a long cane for many years, so it was one hell of an adjustment.] (Paul)*

*“Ja, jy sien, aan die begin is jy mos nie gewoond aan ‘n hond nie. Jy’s gewoond jy’s op jou eie. Dan nou aan die begin is dit nogal ‘n redelike storie, klein bietjie moeilik.”*

*[Yes, you see, at the beginning you’re not used to a dog. you’re used to being on your own. Then at the beginning it’s a challenge, somewhat difficult.] (Arnold)*

*“Ja, dit was nogal vir my ‘n aanpassing [om op die hond te vertrou] omdat ek nog ‘n bietjie kan sien en dan sien ek oukei, hierdie paal kom nou taamlik vinnig en dan ... Ek het my later begin om net te ‘focus’ op hom. Ons het aande gaan stap; ek ‘like’ mos die aande. Aande gestap en in die dag gestap; jy moet net ‘focus’.”*

*[Yes, it was kind of an adjustment {to trust the dog}, because I could still see somewhat and then I see, ok, this pole is approaching quite fast ... Later, I just started focusing on him. We went walking at night, I like the evenings. Walked at night and in the day, you just have to focus.] (Cobus)*



*“Verstandhouding – die gehoorsaamheid van die hond, hoe ons sekere dinge doen ... ja, en dit is basies waaroor alles gaan – verstandhouding tussen ek en sy. Wanneer sy ook self oordeelkundig leiding kan neem (afhingend hoe vêr ek haar toelaat) en sulke tipe van dinge.”*

*[Understanding – the obedience of the dog, how we do certain things ... yes, and that’s basically what it’s all about – understanding between me and her. Also when she can take control (when I let her) and things like that.] (John)*

*“En met hierdie een spesifiek, omdat sy jonk is en spelerig, is dit ‘n aanpassing want ek moet streng met haar wees. Nie omdat sy stout is nie, maar omdat sy jonk en nuuskierig is.”*

*[And with this one specifically, because she's young and playful, it's an adjustment, because I have to be firm with her. Not because she's naughty, but she's young and inquisitive.] (John on his second guide dog)*

*“Um, en nou weet jy nie wat jy gaan verwag [van die opleiding] nie want jy gaan na ‘n vreemde omgewing toe. En, toe begin die klasse, waar jy leer wat ‘n gidshond is, want dis nie ‘n troeteldier wat ma versorg en net by jou kom lê en wat jy mee speel nie. Jy’s nou die verantwoordelike persoon vir hom.”*

*[Um, and now you don't know what to expect {from the training}, because you're going to an unfamiliar environment. And then the classes started, where you learn what a guide dog is, because it's not a pet that your mom takes care of and that just sleeps and plays with you. You're the responsible person now.] (Michelle)*

*“... en, en jy moet die opleiding handhaaf wat hulle die hond gegee het. Jou ja moet nog ja wees en nee moet nog nee wees. En die hond moet nog weet dat hy eintlik vir jou werk, al raak jy hoe lief vir hom.”*

*[... and, you have to maintain the training they gave the dog. Your yes must still be yes and your no must be your no. And the dog has to know that he's actually working for you, irrespective of how much you come to love him.] (Michelle on her first guide dog)*

*“Die groot ding hierdie keer was, ek moes met die hond probeer bind ... Die teorie ken ek, maar dis die praktiese deel waaraan ek gewoon moet raak. Jy's nie dadelik lief vir die hond nie; dit vat baie aandag aan mekaar gee, baie tyd saam spandeer.”*

*[The big thing this time was that I had to bond with the dog ... I know the theory, but it's the practical part I had to get used to. You don't love the dog immediately, it takes a lot of attention both ways, and time together.] (Michelle talking about the adjustments needed with her second dog)*

Guide dog ownership, according to the participants, enhanced independence and personal growth. There was an expectation that a guide dog will be a catalyst for personal change (see theme 3 from interview one). The participants needed to make personal changes when they obtained their guide dogs.

What is very pleasing is the fact that all but one of the participants has experienced an increase in independence due to guide dog ownership. Theme 4 for interview one already stressed the importance that the participants placed on their independence. Findings by both Lindemann (1981) and Steffens and Bergler (1998) emphasise the desire for independence by persons with blindness. If the participants are convinced that guide dog ownership has increased their independence, it vouches well for their sense of well-being.



The theme of perceived increments in independence after guide dog acquisition was also supported by literature from several authors (Camp, n.d.; Valentine, Kiddoo & LaFleur, 1993; Steffens & Bergler, 1998). Philpott (2004) argues that children with disabilities should be rehabilitated in order to function as independently as possible; this requirement may well be extended to adults with blindness. If a guide dog can provide additional independence, as seems to be the case, it should be considered as a worthwhile intervention to promote the healthy functioning of people with blindness.

If one also considers the model by Ryff (1989) that was employed for the quantitative part of this study, both increases in independence and personal growth can lead to



the improvement of well-being for persons with blindness. Guide dogs thus seem to have the potential to increase their owners' well-being, according to Ryff's model.

#### 4.4.7.4 Theme 4: Lifestyle changes resulted from guide dog ownership

A common theme for all the participants (except Arnold) is the life altering effect that a guide dog has on its owner.

A guide dog is a major responsibility and requires consistency:

*"I mean it's not like a cane which you can fold up and put and put in your bag and it's gone. Its, it's a big living creature with needs and with hair that it sheds and it causes quite a bit of 'schlep', um, which one needs to sort of cater for."* (Martin)

*"Eerstens, dis 'n helse verantwoordelikheid om 'n gidshond te hê ... ek bedoel, jou hele lewe word omvêr gegooi, jou hele roetine."*

*[Firstly, it's a major responsibility to have a guide dog ... I mean, your whole life is uprooted, your whole routine.]* (Paul)

*"Ek meen, hy's heelyd daar. Die naweek toe ek by die mense gekuier het, het ek later gesê ek wil huis toe gaan. Ek het die heelyd gewonder hoe gaan dit met hom. Dit is heelyd in jou gedagtes ... wat maak hy nou as hy nie by jou is nie; is hy orait as hy by iemand kuier."*

*[I mean, he's always there. This weekend when I visited people, after a while I said that I wanted to go home. The whole time I was wondering how he was. It's in your mind the whole time ... what is he doing without you; is he ok visiting someone else.]* (Cobus)

*“... maar definitief dis baie verantwoordelikheid. Ek sal nie ... as jy nie verantwoordelikheid kan hanteer nie moet jy liewerste nie [‘n gidshond kry nie].”*

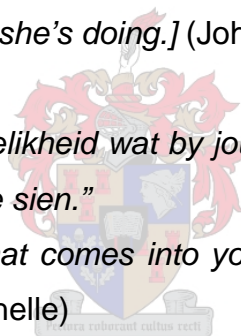
*[... but definitely, it’s a lot of responsibility. I won’t ... if you can’t handle the responsibility, then rather don’t {get a guide dog}.] (Cobus)*

*“Met hierdie nuwe hond, omdat sy nog baie jonk is, moet ‘n ou voortdurend haar dophou. Jy kan nie slaplê vir ‘n oomblik nie, en dit lyk my hulle tel dit op ... Dan moet ‘n ou maar net besef, jy kan nie slaplê, jy moet die hond voortdurend vir haar wys en bewus wees van wat sy doen.”*

*[With this dog, because she’s still young, you have to watch her the whole time. You can’t relax for a moment and it seems they pick that up ... Then one has to realise, you can’t relax, you have to constantly correct the dog and be aware of what she’s doing.] (John)*

*“Dit is ‘n verantwoordelikheid wat by jou lewe kom want dit is iemand om te versorg en na om te sien.”*

*[It’s a responsibility that comes into your life, because it’s someone you have to care for.] (Michelle)*



Guide dog ownership is even likened to parenthood by some of the participants:

*“I was bragging about my impending fatherhood ... it’s probably a good preparation because you, you need to be completely responsible for another being.” (Martin)*

*“... ek weet nou nie hoe dit moet voel om eendag jou eie kinders te hê nie, maar ek kry so ‘n ‘glimpse’ daarvan. Ja dit voel nogal so. Dis nogal iets waaraan ek baie dink – ek dink amper dis hoe ouerskap is.”*

*[I don’t know what it feels like to have your own children, but I get a glimpse of it. Yes, it feels like that. It’s something I think about a lot – I almost think that’s what parenting is like.] (Cobus)*

*“n Gidshond, dit voel vir my dis, dis baie soos met ‘n kind. Jou dissipline en jou hantering van die hond kan dit maak of breek.”*

*[A guide dog, it feels to me it’s a lot like a child. Your discipline and your handling of the dog can make or break it.] (Michelle)*

Time is invested in ensuring the guide dog’s well-being and ensuring that the dog is clean and healthy:

*“... en ek dink ook, seker een van die probleme is ook die honde moet nogal, vereis nogal baie van ‘n ou se aandag en tyd. ‘n Man besef nie altyd nie jy, jy kan nie net ... baie kere dan kom ek hier en dan’s ek moeg man, dan dink ek ‘jissou, nay’, die hond moet nog eet jong, sy moet nog uitgaan ek kan nie net nou slaap soos altyd nie. Ek moet haar nou weer, ek moet haar baie keer voor my stel, voor my eie behoeftes.”*

*[... and I think also one of the problems is that the dogs require a lot of one’s attention and time. You don’t always realise, you can’t just ... a lot of the time I come here and then, I’m tired, man, then I think, “jissou, nay”, the dog has to eat, she has to go out, I can’t just sleep like I always had. I have to, a lot of the time, I have to put her needs before my own.] (Paul)*

*“Ek sorg net dat ek hom eenkeer of so in ‘n dag laat los hardloop – net so vir ‘n halfuur dat hy homself kan moeg hardloop of so. Dan weet ek hy’s oraait – as hy nie kan werk vir die dag nie.”*

*[I just ensure that I allow him to run around freely once a day – just for half an hour or so, that he can get rid of all his energy. Then I know he’s fine – when he can’t work during the day.] (Cobus)*

*“Ek draf nie met haar nie, al wat ek doen is ek loop net met haar daar waarna toe ek wil gaan, dan kom ons huis toe en dan laat ek vir haar rus en ek speel baie met haar sodat sy ontslae ook kan raak van haar daaglikse stres.”*

*[I don't jog with her, all I do is I walk with her to where I want to go, then we come back home and I allow her to rest. And I play with her a lot, to ensure that she gets rid of her daily tension.] (John)*

*“En, dan besef jy, dis ... jy gaan niks uit jou hond uit kry as jy nie liefde gee nie. ... Wat jy in 'n menseverhouding insit, kry jy terug. En net soos met hulle.”*

*[And then you realise ... you're not getting anything from your dog if you don't give her love ... What you put into a human relationship, you receive back. And it's the same with them.] (Michelle)*

*“En ek het net begin besef ek sal vir die hond moet liefde gee om uit haar uit goeie werk te kry, dat sy voel sy word waardeer. Hoekom moet sy werk as sy net raas en slae daarvoor kry. As sy vanaand in 'n hoek gesit word op 'n kussing en sê daar bly jy en jy kom nie naby my nie.”*

*[And I just realised that I'd have to give this dog love in order for her to perform at her job, so that she feels she's appreciated. Why must she work if she just receives abominations, if she's just put in a corner with a pillow at night and told to stay there, away from me.] (Michelle)*

Social behaviour and routines needed to be adjusted with the arrival of a guide dog.

*“you need to take the dog's needs into consideration all the time. Um, when you, I mean as far as feeding is concerned ... I go somewhere for a few days, I need to take the dog and, and his paraphernalia. I need to stick to certain schedules as far as feeding is concerned, I need to keep in mind when he might want to go to the toilet ... I also need to check with people if whether it's actually ok if I bring the dog, and if its not ok to see what I can do with the dog while I'm there.” (Martin)*

*“ja, ja, daai, daai vriende wil altyd as ons uitgaan sê nou maar ... en dis die eerste ding waaraan ek ook aan dink is, as hulle my vra dan sê ek, ouens, ek gaan eerste kyk of ek iemand kan kry wat na my hond kan kyk. En as ek niemand kry nie, nee, dan gaan ek nie.”*

*[Yes, yes, those friends always want to, when we go out ... and that's the first thing I think of, when they ask me, I say, 'guys, I first have to see if there's anyone available to look after my dog. And if I find no-one, no, then I don't go.]* (Paul commenting on changes to his social life)

*“Soos, ek was gewoon om laat op te staan, maar ek moet nou deesdae, omdat die hond het 'n roetine, sy moet op 'n sekere tyd uitgaan, so, ek moet elke dag nou sesuur opstaan, of dit nou naweek is en of dit 'n vakansiedag is, of vakansie is, maak nie saak nie. Sy moet haar besigheid doen, sy moet eet, sy moet geborsel word.”*

*[Like, I was used to getting up late, nowadays, because the dog has a routine, she has to go out at a certain time, so I have to get up at six every day, whether it's a weekend or a public holiday, or in the holiday, it doesn't matter. She has to do her business, she has to eat, she has to be brushed.]* (Paul)

*“Toe't ek maar dat hy liewerste by 'n vriend gaan bly – sulke goed – jy moet healtyd dink, oukei, jy het nou die hond ... as ek gaan speel by funksies ook; gaan dit 'n probleem wees? Is daar genoeg plek?”*

*[So I rather let him stay with a friend – things like that – you have to constantly think. Ok, you have the dog ... when I go and play at functions as well; will that be a problem? Is there enough space?]* (Cobus commenting on the additional considerations that the guide dog added to his life)

*“Sy het natuurlik 'n invloed op my in die opsig, dat daar's baie van die vriende wat nie verkies om nie vir haar in die kar te ry nie; en daar's ook vriende wat glad nie hou van honde binne-in die huise nie. So, daar het ek ook baie, veranderinge aangebring.”*

*[Obviously she has an influence on me in the sense that a lot of my friends prefer not to have her in their cars; and then there are friends that doesn't like dogs indoors at all. So, there have been many changes.]* (John)

*“Ek het nogal gevind as ek haar dadelik voer in die oggend as ek opstaan dan, um, maak sy my op 'n Saterdag bittervroeg wakker en sê ‘maar ek soek nou kos’ ... haar lewe is roetine, jy sien. Vir hulle moet jy so ver as moontlik in ‘n vaste roetine hou.”*

*[I found that if I fed her immediately after I got up in the morning, um, she wakes me very early on Saturdays and say, ‘but I want food, now’ ... her life is routine, you see. For them, you have to keep to a set routine as far as possible.] (Michelle)*

Changes in the participants’ environments were necessitated by the dog:

*“Um, well, the dog sleeps with me in my room, so I’ve sort of needed to change a few things about my room, for example installing a little air freshening device because of doggie smells, so that also has cost implications ... it’s not big, but it’s still a little bit.” (Martin)*

*“Maar toe besluit ek om my kamer te draai man. Toe sien ek, nee, hier’s te min ‘space’ man, die hond vat bietjie baie ‘space’ toe dink ek ek gaan dit weer terugdraai soos dit was. Dis gemakliker en sy’s onder die tafel, uit die pad uit.”*

*[But I then decided to rearrange my room. Then I saw, no, there’s too little space, the dog takes up a lot of space. So I thought I’d change it back to the way it was before. It’s more comfortable with her sleeping under the table, out of the way.] (Paul)*

*“Prakties, ek bly een alleen in ‘n woonstel, so my ouers moet haar vir ‘n rukkie moontlik [vat], hopelik, ek weet nie, weer ‘n huis gaan kry wat ek finansieel kan bekostig en waar sy dan weer kan kom bly.”*

*[Practically speaking, I stay alone in the apartment, so my parents have to take her for a while, hopefully, I don’t know, I can find a place I can afford and she can come and stay with me again.] (Michelle talking about the relocation of her retired dog due to space constraints in her living environment)*

There are also financial implications to guide dog ownership:

*“The long cane also has less cost implications [than a guide dog has] ...”*

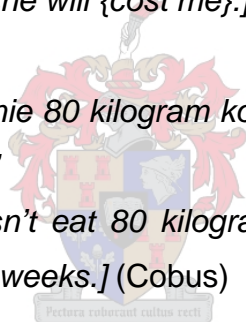
(Martin)

*“Ja-nee, sy klim in jou sak, want sy moet soos in twee keer ‘n maand moet sy, moet ek vir haar kos koop ... Maar ek dink sy gaan my nogals kos. Uh, sy kry nog, binnekort moet sy inspuitings kry en ek moet vir haar nog Frontline koop en, uh, ek dink sy gaan nogal. Sy’t nog nie rêrig in my sak geklim nie, maar sy gaan [my] nog [kos].”*

*[Yes, she does cost you money, because she has to, like, twice a month, I have to buy her food ... But I think she’s going to cost me. Uh, she still gets, she has to get her shots in the near future and I have to buy her Frontline, uh, I think she will {cost me}.] (Paul)*

*“Die “long cane” eet nie 80 kilogram kos in twee weke op wat jou R80 in twee weke kos nie...”*

*[The long cane doesn’t eat 80 kilograms of food in two weeks, which costs you R80 in two weeks.] (Cobus)*



*“Um, ek sal natuurlik nog steeds vir haar, vir haar kos en so verantwoordelik wees...”*

*[Um, obviously I will still be responsible for her food and such...]*

(Michelle reflects on the financial implications of supporting a retired guide dog)

*“Ek moet vir haar versorging finansieel instaan...”*

*[I still have to support her financially.] (Michelle)*

The participants invest effort into educating people and putting them at ease about the guide dog:

*“So dis maar net, ek dink, die feit dat hulle maar onkundig was, ‘n man moes hulle maar net bietjie reg help. En ek doen dit nog steeds met, met, met sekere ouens van die familie wat ek nou lanklaas gesien het en gewoon was om my te “guide”. Dan sê ek vir hulle nee, dis nie meer nodig nie, ek het nou die hond en dis basies maar haar werk om ‘n man te “guide”, dan sê ek net vir hulle.”*

*[So it’s just, I think, the fact that they were ignorant, you just had to educate them. And I still do it with some member of the family that I haven’t seen for a while, who were used to guiding me. Then I tell them, no, it’s not necessary anymore, I have the dog and it’s basically her job to guide me, then I just tell them.] (Paul)*

*“... wat ek doen is, as ek sien die persoon is bang vir die hond of het geskrik vir die hond soos die dametjie wat hier skoonmaak – sy is baie bang vir die hond. En ek het net die eerste dag vir haar gesê kom net saam en ek het die hond vasgehou. En ek het vir haar gesê dit is Buddy en ek het net hulle aan mekaar voorgestel en dat sy aan hom vat – geen ‘problem’ nou nie.”*

*[... what I do is, when I see a person fears the dog or got frightened by the dog, like the lady that cleans here – she is very scared of the dog. And on the first day, I just told her to come along and I just held the dog. and I told her, this is Buddy and I just introduced them and let her pat the dog – no problem now.] (Cobus)*

*“Dan is dit ‘n lang proses om vir hulle te verduidelik waarom sekere dinge gebeur, hoe diere se gedragspatrone kan wissel en dan ook moet ek vir hulle verduidelik hoe die, wat is ‘n gidshond, wat maak hom so uniek en verskillend van ander honde.”*

*[Then it’s a lengthy process to explain to them why certain things happen, how animals’ behavioural patterns can differ. And then I also*



*have to explain how, what a guide dog is, what makes him unique and different from other dogs.] (John)*

*“En dié wat wel bang is, sodra die geleentheid hom voordoer dan verduidelik ek die proses, ek verduidelik hulle van Vito en vertel vir hulle wat is 'n gidshond”*

*[And those that are scared, as soon as I get an opportunity, I explain the process, I explain to them about Vito and tell them what a guide dog is.] (John)*

*“En jy moet vir hulle verduidelik maar soos iemand anders ‘n bril nodig het om te kan sien, het jy die hond nodig om jou te help van punt A na punt B.”*

*[And you have to explain that it's like someone who needs glasses in order to see, you need the dog to help you from point A to point B.] (Michelle)*

Guide dog ownership seems to entail added responsibility, time investment, social and environmental changes, economic investment and a need to educate others on the functioning of guide dogs. This theme lends support to existing literature that has found that service dog ownership entails added responsibility (Camp, n.d.), investment of time in the dog and caring for it (Valentine, Kiddoo & LaFleur, 1993), as well as financial expenses (Valentine et al., 1993).

Interpersonal adjustments were expected (see theme 3 of interview one) by the participants before guide dog acquisition, and this has subsequently been experienced following guide dog acquisition. The adjustments that were needed mostly centred around the constant consideration of the guide dog's care when the participants went out to socialise or on business. Camp (n.d.) refers to the responsibilities and adjustments needed to care for a guide dog as the “drawbacks of

service dog ownership” (p.8). Prospective guide dog owners and advocates of the benefits of guide dog ownership need to consider and understand that guide dog ownership has some negative aspects and consequences that may limit and influence some aspects of the owner’s life.

The final sub-section under this theme is the need to educate people on the functioning of guide dogs. This could be linked to the participants’ sense of responsibility (see theme 5 of interview one). There is a need to inform people and to do your part for the guide dog cause, in order to assist other persons in need of a guide dog.

#### 4.4.7.5 Theme 5: Guide dogs are *absolute* social magnets

This was a very dominant theme among all the participants. Interestingly, guide dogs seem to both attract some people and repel others, acting almost as a true magnet.

Martin provided the most descriptive dialogue to illustrate this point:

*“... I made a joke to someone the other day and said the dog is an absolute magnet ... some people will gravitate towards the dog and other people will be polarised away from the dog.”*

Guide dogs provide social facilitation through inducing public greetings, contact and conversation:

*“I’ve actually had a few incidents where the dog caused me to have conversations with interesting people, which I’m also happy about.”*  
(Martin)

*“Um, it, um, sort of gives a topic of conversation and, and, um, I think it helps to provide positive vibes more easily where ... I mean a dog, for people who like dogs, usually brings a smile.” (Martin)*

*“Dis verbasend hoedat mense jou stop as jy loop om net te ‘chat’, bietjie te vra oor die hond en, jis, ek het al baie mense in die klas ook, gewoonlik, ek ‘deal’ nou met ouens as ek my “long cane” gehad het, ek glo nie sou ge“deal’ het nie. Want omdat die hond daar is, hulle sal eerder altyd eerste kom en oor die hond praat. En dan sal hulle hulle voorstel en sê wat hulle doen. So ek het, in die tyd, het ek al baie ouens ge“meet’ al ... deur die hond.”*

*[It’s astounding how people stop you when you’re out walking, just for a chat, ask about the dog and, wow, I’ve met a lot of people in class, usually, I now deal with people that I don’t believe I would have dealt with had I still used my long cane. Because the dog is there, they will always rather come and talk about the dog. And then they will introduce themselves and say what they do. So I have, recently, met a lot of guys ... through the dog.] (Paul)*

*“Ek ontmoet eintlik nou bietjie meer mense, party van die mense ken ek. Ja, hy’t darem ‘n bietjie, ‘n paar van die vriende na my toe gebring.”*

*[I actually meet more people, some people I already know. Yes, he has brought a few friends to me] (Arnold)*

*“Ja, daar’s nou baie meer mense wat groet en so aan as gevolg van die hond. Daar’s nou meer mense wat gesels ...”*

*[Yes, there now are a lot more people that greet me and so forth, because of the dog. There are now more people that talk ...] (Arnold)*

*“As dit heeltemal ‘n vreemde persoon is, wat baie bang is vir honde dan sal hy my vermy, maar andersins met mense ontmoet of enigiemand wat jy net groet in die straat wat voorheen nie sou nie. Dis nogal ‘weird’. Ek ervaar dit nogal. Noudat ek stap met die hond sal meer mense my groet as wat ek stap met die kierie ... Ek dink die hond help baie. Dit*

*help vir my as blinde persoon – vir enige blinde persoon – daai ekstra, hulle ... sonder dat jy dit wil hê is dit jou aanknopingspunt met ‘n persoon.’”*

*[If it’s a total stranger who has a fear of dogs, then he will avoid me, but otherwise, with people or anyone who greets you spontaneously in the street that never did it before. It’s kind of weird. I kind of experience that. Now that I walk with the dog, more people will greet me than when I walked with the cane ... .I think the dog helps a lot. It helps me as a blind person – for any blind person – that extra, they ... without you wanting it, it prompts conversation with another person.] (Cobus)*

*“Mense sien ‘n hond en dan weet hulle nie regtig wat hulle is nie. Die volgende paar weke dan gesels hulle en vra wat is ‘n gidshond, hoe lank het jy die hond, hoekom het jy die hond, watse soort hond is dit, wat doen die hond in my lewe ...”*

*[People see a dog and then they don’t know what they really are. The following weeks, they talk to you, ask what a guide dog is, how long I’ve had the dog, why do I have the dog, what type of dog is it, what is the dog doing in my life ...] (John)*



*“Baie mense sien my soms by ‘events’ dan sien hulle nie die hond daar nie. En die oomblik wanneer hulle my sien met die hond op straat dan het hulle groter vertroue om na my toe te kom, ‘ons het jou daar gesien by die wedloop; hoekom het jy nie met die hond gehardloop nie’, of ‘ons het nie geweet jy het ‘n hond nie’. Dan kom die vrae sommer in rye.”*

*[A lot of people see me at events and they don’t see the dog there. The moment when they see me in the street with the dog, then they have extra confidence to approach me, ‘we saw you there at the race, why didn’t you run with the dog?’ or, ‘we didn’t know you had a dog’. Then the questions just keep coming.] (John)*

*“Sy maak ook vir my vriende – sy’t so mooi geaardheid dat almal na haar toe kom. Sy lyk natuurlik mooi, sê almal omdat sy nou lig is met die donker ore en donker snoet.”*

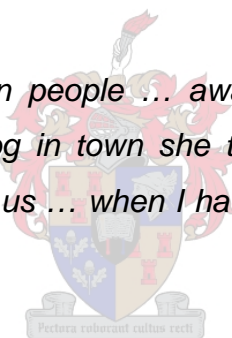
*[She also makes friends for me – she has such a nice disposition, which attracts everyone. She’s naturally beautiful, everyone says this because she’s light with dark ears and a dark snout.]* (Michelle)

*“Dit, dit maak vir siende mense dit ook makliker om na jou te kom, hulle sal makliker met jou gesels as die hond by jou is. Dis, dis nogal ‘n aanknopingspunt ...”*

*[It, it also makes it easier for sighted people to approach you and it’s easier for them to converse with you when the dog is with you. It’s, it’s kind of a conversation starter ...]* (Michelle)

On the other hand, guide dogs may cause people to avoid the owner, mostly because they fear dogs in general:

*“...specifically African people ... away ... I mean when walking with somebody with a dog in town she told me that, um, people just like make way in front of us ... when I have the dog ... sort of try and really steer clear.”* (Martin)



*“Weet jy, swart mense is veral baie bang vir die hond. So, soos in paar keer met die trein [pleknaam] toe gegaan het en dan mense is soos, ‘hey, enjasi’, hy sê hy’s bang vir die hond. En ek het eendag in die [inkopiesentrumnaam] ook geloop, in die ‘Mall’, toe kom ons daarso in, en ek en my een vriend het geloop en daar was meisies voor ons en hulle het weggehardloop vir die hond!”*

*[You know, black people especially are scared of the dog. So, like in a few times, I went to [place name] with the train and then people, like, ‘hey, enjasi’, he says he’s afraid of the dog. And I walked in the [shopping centre name] one day, in the Mall, so we went in and I walked with one of my friends and there were some girls in front of us who then ran away from the dog!]* (Paul)

*“... party van die mense is bang vir hom.”*

[... some of the people are afraid of him.] (Arnold)

*“Ek weet nie, hulle is baie bang ... ons het dit op die klas ook gesien – mense is baie banger, maak nie saak watter kleur nie. Ons het gesien daar in die ‘Mall’. As ons daar in die ‘Mall’ gewerk het: wit mense, swart mense, dit maak nie saak nie; as hulle die swart hond sien, dan is hulle weg.”*

*[I don’t know, they’re very scared ... we saw it during the class as well – people are much more afraid, doesn’t matter which colour. We saw there in the Mall. When we worked in the Mall: white people, black people, it doesn’t matter, when they see the black dog, then they’re gone.] (Cobus)*

*“Mense is verskriklik, in die trein, bang vir die hond en dit wissel van die arbeidersklas tot op op die ... [onduidelik op bandopname], veral die polisiemanne, sekuriteit op die trein is verskriklik bang vir die hond. Mense wat langs my wil sit kom nie sommer langs my sit nie.”*

*[People are extremely, in the train, afraid of the dog, and it varies from the worker’s class to the ... [unclear on recording], especially the policemen, security on the train are extremely scared of the dog. people that want to sit next to me don’t really come and sit next to me.] (John)*

*“Ek vind nogal dat sommige assistente kan nogal bang wees vir die hond, maar dan verduidelik jy maar dat sy opgelei is en dat jy haar vashou ... dat sy nie by hulle sommer net kan kom nie.”*

*[I find that some assistants tend to be scared of the dog, but then you explain to them that she’s trained and that you’re holding her ... she can’t simply reach them.] (Michelle)*

Probably the majority of research on the effects of service dogs has focused on the ability of dogs to provide social facilitation. Research has proven that dogs/animals can provide a socialising effect between humans (Bernstein, Friedmann & Malaspina, 2000; Fine, 2000; Hart, 2000) and that service dogs help their owners

with social facilitation (Allen & Blascovich, 1996; Eddy, Hart & Boltz, 1988; Mader, Hart & Bergen, 1989; Valentine et al., 1993). Camp (n.d.) and Lane, McNicholas and Collis (1998) also found that guide/assistance dogs increase self-perceived social integration, community participation and social contact. The current theme thus reaffirms both previous literature which found that dogs provide social facilitation, as well as the expectations of the participants themselves (see theme 2 of interview one).

The research on the potential of service animals to provide social facilitation was probably prompted by findings such as reported by Wright (1960) and Davies (1991), which emphasised that persons with disabilities are more socially withdrawn and isolated than their able-bodied peers and are often marginalised and have an inferior social status.



Based on the numerous findings on the socialising effects of service dogs, it is tempting to conclude that guide dogs always provide social facilitation and attract people. There are, however, evidence that warns against this assumption. The current findings suggest that guide dogs can be a social repellent as well. Although some authors (Deshen & Deshen, 1989; Serpell, 1996) have addressed the possibility of the negative social consequences of guide dog ownership, the overwhelming amount of literature does not mention this negative aspect at all. There could be two explanations for this seemingly unique finding. Firstly, it could be that in our unique South African culture and political background (where the oppressed majority were often threatened with dogs), more people fear dogs and are ignorant about guide dogs than in Western societies (where most of the previous

research has been based). Secondly, other authors may not have deemed it necessary or neglected to explore the possible negative social consequences of dogs due to the overwhelming evidence of their positive social effects. Whatever the reason for the lack of evidence that people also avoid guide dogs, the current theme definitely suggests that guide dogs have a dualistic social influence in South Africa: it attracts people who like dogs and it repels people who fear dogs.

#### 4.4.7.6 Theme 6: Distractions inhibit the guide dog's ability to guide

Guide dogs are well trained, but they remain living beings prone to distractions, whether it is in the form of other people and animals, or any other object. This has a negative impact on their ability to guide their owner successfully:

*"The only thing is we walk quite close to the gardens, so he gets very distracted by the squirrels. So I don't know ... for me I'm still making up my mind whether the usefulness balances out with the distraction from the squirrels, because my cane doesn't get distracted by squirrels."*  
(Martin)

*"Net party dae as sy bietjie stout is, soos as sy weggehardloop het en sy't miskien in die modder gaan speel, dan's dit 'n probleem. Dan dink ek, jissie man, die hond is darem stout jong."*

*[Just some days when she's somewhat naughty, like if she ran away and maybe played in the mud, then it's a problem. Then I think, boy, the dog is very naughty.]* (Paul)

*"Wel, sy is [mal] oor mense wat met balle speel of 'frisbees', en vir ander mense in 'general'. Ek weet nie, sy's nogal verskriklik baie oor aandag, dis ... en dan maar seker maar kos en haar jaag-instink is, ek*



weet nie, fenominaal. Sy wil net, as jy voëltjies teen die pad kry, sy wil net jaag. So dis van die groot ‘distractions’ wat daar is.”

*[Well, she’s mad about people playing with balls and frisbees, and of other people in general. I don’t know, she’s into getting attention, it’s ... and then probably food, and her chase instinct is, I don’t know, phenomenal. She just wants, when she spots birds on the road, she just wants to chase. So that’s some of the biggest distractions there is.]*  
(Paul)

“Klein goedjies, hulle [die ander mense met gidshonde se] honde was dalk ‘dog distracted’ of deur voëltjies. As hulle iets sien wat beweeg wou hulle net gaan speel, dan loop hulle in iets vas.”

*[Small things, they’re {the other guide dog owners} dogs got dog distracted or by birds. When they see something move, they just wanted to go and play, they will walk into something.]* (Cobus)

“Gewoonlik in die besige areas verwag ‘n mens dat [daar] meer ‘distraction’ [sal] wees wat die hond se aandag sal trek . Maar in haar geval is dit net die teenoorgestelde situasie. In besige areas het ek nie baie probleme met haar konsentrasievermoë nie. Daar’s niks wat haar aandag trek nie. Sodra die area stil raak, dan begin sy rond te snuffel en enige iets te doen wat sy nie veronderstel is om te doen nie ... Ek het op ‘n stadium gesê ‘jy’s wragtag ‘n handvol!’”

*[Usually in the busier areas, one expects there to be more distractions that will attract the dog’s attentions. But in her case, it’s just the opposite thing. In busy areas I don’t have a problem with her ability to concentrate. There’s nothing that attracts her attention. As soon as the surroundings become quiet, then she starts sniffing around and doing anything she’s not supposed to ... I said at one time, ‘you are truly a handful!']* (John)

“... Eerstens is sy baie mal oor water. Ons het ‘n geval gehad by die ‘campus’ waar dit die dag gereën het ... ek het, toe loop sy deur die water... Spring sy binne ‘n poel water en ek was toe heeltemal

*natgespat. So ek aanvaar dat sy lief is vir water, maar ons werk daaraan.”*

*[... Firstly, she loves water. We had this incident on campus when it rained the day ... I did, then she walked through the water ... she jumped into the pool of water and I got totally wet. So I assumes that she loves water, but we're working on it.] (John)*

*“... Maar honde trek makliker Abby se aandag af as Toby s'n.”*

*[... But dogs distract Abby more easily than Toby.” (Michelle)*

*Voëls is natuurlik 'n groot probleem. Hierdie ene ... o, hierdie ene is nie eintlik oor katte nie, waar Toby weer oor katte was.”*

*[Obviously birds are a huge problem. This one ... oh, this one's not really into cats, but Toby was into cats.] (Michelle)*

The participants talked about instances where their dogs did not do what they were suppose to; where they acted contrary to their training. Camp (n.d.) also found this in her qualitative study and discussed it under the heading of “challenges’ (p.9) of service dog ownership. De Jager (1988) also mentions that faulty handling of service dogs might disadvantage the dog or cause it physical harm. When a guide dog becomes distracted, the owner may be tempted to handle the dog with force, which could put the dog at risk. Although this could be a risk factor to a successful partnership between the dog and owner (and the health of the dog), all the participants reported that their dogs become distracted once in a while and that they find alternative routes or pay attention to environmental cues. None described punishment of the dog.

Obviously the dog’s distraction could also have negative consequences to the human partner, something of which prospective owners should be aware. Most of the participants did, however, describe in the interviews that after a while they were

able to detect when their dogs became distracted. None of the participants were very much disadvantaged by their dogs' momentary distractions and accepted it as part of having a dog.

#### 4.4.7.7 Theme 7: Ignorance regarding guide dogs

As theme seven in interview one would suggest, there is a general ignorance of the public towards persons with disabilities. This ignorance seems to persist regarding the rights and functioning of guide dogs as well. There is also seemingly insufficient education of security guards and personnel on the rights of guide dogs to public access.

There is ignorance regarding the role and functioning of guide dogs:

*“Mense, hulle, hulle het ons so baie gesien, so vir my, hulle vra baie vrae van, omdat hulle onkundig is. Somstyds is dit vir my nogal bietjie “irritating”, want ek is ‘n ou, ek hou nie van goed aanmekaar te sê nie. So, dit krap bietjie.’*

*[People, they, they saw us a lot, so for them, they ask a lot of questions, because they're ignorant. Sometimes I find it somewhat irritating, because I'm the type of guy, I don't like repeating myself. So that annoys me somewhat.] (Paul)*

*“Jy kry ‘stupid’ mense wat nou ... ‘n ou in Johannesburg het gevra oor ‘n roete. Toe gaan die ou en verduidelik dit aan die hond en nie aan die mens nie. Sulke goed. Ons het al interessante stories gehoor wat mense aanvang.”*

*[You get stupid people that ... a guy in Johannesburg asked a route. So the guy goes and explains it to the dog and not the person. Things like*

*that. We've heard some interesting stories about people's escapades.]*  
(Cobus)

*"Mense verstaan nie regtig nie [hoe en wat gidshonde is nie] en ek neem hulle ook nie kwalik nie ... Daar's mense wat baie koerant lees, mense wat T.V. kyk, mense wat aandag gee, aan, wat belangstel in die lewe van gestremdes. En solank jy nie regtig belangstel in die lewe van gestremdes nie, gaan jy nie weet watter soort hulpmiddels vir hulle beskikbaar is nie, en 'obviously' sal jy ook nie verstaan wat is 'n gidshond nie."*

*[People don't really understand {how and what guide dogs are} and I don't really blame them ... there are people who read the paper a lot, people who watch T.V., people who pay attention to, who are interested in the lives of people with disabilities. and as long as you're not interested in the lives of the disabled, you won't know what type of tools there are available to them and, obviously, you won't know what a guide dog is either.]* (John)

*"O, ja, mense vra baie vrae. Ten spyte van die publisiteit wat daar maar gereeld is. Jy kry die interessantste vrae: "kan die hond kleure sien," um, "kan hy vir jou lees, kan hy die goed vir jou in die winkel help uitsoek?"*

*[Oh yes, people ask a lot of questions, despite the regular publicity. You get the strangest questions: 'can the dog see colour', um, 'can he read to you', 'can he help select things for you in the shop?']* (Michelle)

There is a lack of education of security guards and personnel regarding the rights of the guide dog to enter public places:

*"soos ons was, waar, Sondagaand ja, toe't ons Spar toe gegaan en die sekuriteitsou wou nie hê ek moet ingaan met my hond nie! Toe sê my een vriend van my, 'jy kan mos sien dis 'n gidshond die'. Toe sê die ou, 'nee, maar hy kan nie ingaan nie.' Maar toe agterna toe sê hy jy kan*

ingaan, maar toe sê ek, ‘ag, dis oraait, ek sal buite by die ... ek sal buite bly” [laughs it off].

[like we were, where, Sunday evening, yes, we went to the Spar and the security guard didn’t want me to go in with my dog. Then my one friend said, ‘you can surely see this is a guide dog’. Then the guy said, ‘no, but he can’t go in’. But then afterwards he said, ‘you can go in’, but then I said, ‘ag, it’s ok, I will stay outside with ... I will stay outside’.] (Paul)

“...dit het eenkeer by die [name of the shopping centre] ook gebeur ... die ou wil nie hê ek moet ingaan nie ...”

[... it once happened at the [name of the shopping centre] as well ... the guy wouldn’t let me in ...] (Paul)

““Ja. Want kyk nou, oukei, daar is nou van die plekke wat nou nie ‘n gidshond wil toelaat nie, um, ek weet nou nie hoekom.”

[Yes.Because, see, okay, there are a lot of places that do not want to admit a guide dog, I don’t know why.] (Arnold)

“Ja, ons het nogal saam met ‘n vriendin bietjie uitgery Kaap se kant toe om daar in ‘n Wimpy te eet en toe ons daar stop langs die pad, toe sê die sekuriteit honde ‘not allowed’ Toe sê ek maar dit is ‘n ‘guide dog’ ... Toe sê ek vir hom maar hy kan hier lees as hy wil. Hy wou nie. Hulle het vir jou ‘n kaartjie gegee [by SA Gidshonde] ... Toe sê ek net ek wil met die manager gesels. Toe sê hy dis goed as dit ‘n gidshond is. Ons het binnegekome, en die ‘waitress’ het vir ons nee gesê.”

[Yes, we drove out towards the Cape with a friend, in order to eat at the Wimpy and when we stopped next to the road, the security said, ‘dogs not allowed’. Then I said, ‘but it’s a guide dog’ ... I told him he could read here. He didn’t want to. They gave you a card {at SA Guide dogs} ... so I just said that I wanted to talk to the manager. Then he said it’s fine if it’s a guide dog. We got inside and the waitress said no to us.] (Cobus)

*“Toegang was vir my geweier by 'n rekenaar “internet shop”. Snaaks dis nogal in Kaapstad waar die meeste gidshonde is. Ek het daar ingegaan om, ek wou 'n “e-mail” weggestuur het, en die ou het gesê hy kan my nie huisves nie nie, want daar is nie spasie binne-in die winkel nie, en die hond gaan die “customers” afskrik. Ek het met hom probeer praat ... Dit is ontstellend in die opsig dat 'n mens gesels met hulle, jy verduidelik vir hulle die hele proses, en steeds weier hulle vir jou en hulle kan nie regtig 'n grondige rede aanvoer hoekom hulle toegang weier nie.”*

*[I was denied entrance at a computer internet shop. Strangely enough, in Cape Town where a lot of people have guide dogs. I went in there to, I wanted to send an email and the guy told me that he could not accommodate me, because there was no space inside the shop and the dog would scare the other customers away. I tried to talk to him ... it's disturbing in the sense that one tries to talk with them, you explain the whole process to them, and still they deny you, and they can't really give a valid reason why they won't allow you entrance.] (John)*

*“Ek het nog net een winkel gekry wat haar geweier het en dit was, ek was saam met iemand wat kon sien ons wou materiaal gaan koop.”*

*[I've only found one shop that did not allow her and that was, I was with someone that could see. We wanted to buy fabric.] (Michelle)*

All the participants talked about instances where people were ignorant regarding guide dogs. Members of the public seem ignorant about the functioning and abilities of guide dogs, while some security staff and other personnel seemed uninformed about the rights of the guide dog to enter public places. This does not seem to be a uniquely South African problem, however, for Camp (n.d.) and Valentine, Kiddoo and LaFleur (1993) reported similar problems for service dog owners in their American samples. This also again confirms the conclusion of the INDS (Philpott, 2004),

namely that there is a prevailing need to educate the public on matters concerning people with disabilities, including their mobility aids.

#### 4.4.7.8 Theme 8: Guide dogs can be a source of pride to the owner

There seems to be a great appreciation for the guide dog and a sense of pride regarding the guide dog's training and performance:

*"I'm impressed with how clever he is, with how quickly he learns routes."*  
(Martin)

*"And apparently his a cute, pretty dog and so I get a lot of compliments about him as well."* (Martin)

*"En ek was verstom oor die hond se geheue, om te sien hoedat sy die areas ken, so nou weet ek nee, ek kan ten volle op my hond vertrou. Sy sal die ding doen wat sy moet doen."*

*[And I was amazed by the dog's memory, to see how well she knows the areas, so now I know, no, I can trust my dog completely. She will do what she has to do.]* (Paul)

*"Dit is net, ek is net verstom elke keer as ek met 'n hond, dat ... hoe goed hulle ge'train' is man. Dit verstom my net elke keer."*

*[it's just, I'm astounded each time when I'm with a dog, how well they're trained man. It amazes me each time.]* (Paul)

*"En baie ouens het vir my ook al gesê, 'nay man, hierdie hond is slim jong, sy onthou lank'. Dis altyd wat die mense vir jou sê."*

*[And a lot of guys also told me, nay, this dog is intelligent, she remembers well. That's what the people always tell you.]* (Paul)

*“Hy werk baie goed.”*

*[He works very well.] (Arnold)*

*“Oukei, ek het hom nou twee maande waarvan – drie maande waarvan een maand net opleiding was. So, die laaste twee maande wat ek nou alleen is met hom, is wonderlik, hoor. Honderd persent wonderlik.”*

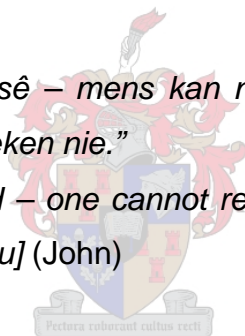
*[Okay, I have him for two months now, of which – three months of which one month was training. So the last two months that I’ve been alone with him has been wonderful. Hundred percent wonderful.] (Cobus)*

*“... hy’t al by ‘n paar mense oorgebly wat vir my gesê het dat hulle wil hom nie teruggee nie. Hy is baie rustig en baie soet.”*

*[... he’s stayed over with a few people, who told me that they don’t want to give him back. He’s very docile and very obedient.] (Cobus)*

*“Wat ek net kan bysê – mens kan nie eintlik waarde heg aan wat ‘n gidshond vir jou beteken nie.”*

*[What I can just add – one cannot really put a price tag on how much the dog means to you] (John)*



*“Hy’s nie net basies ‘n hond nie!”*

*[He’s not just an ordinary dog!] (John)*

*“Hy’s ‘n hulpmiddel en hy’s jou, hy’s jou vertroueling. Want soos die jare aangaan ontwikkel julle ‘n regte “relationship”, of verhouding, tussen julle twee, verstandhouding. Julle raak na aan mekaar soos die tyd verby gaan.”*

*[He’s your aid, he’s your confidant. As the years go by, you develop a real relationship between the two of you, an understanding. You grow attached as time passes.] (John)*

*“Maar sy’s ook ‘n baie goeie gidshond; ek was so beïndruk – ons het eenkeer met haar na my werk toe gestap. Die tweede keer het sy my presies soontoe gevat, presies.”*



*[But she's also a very good guide dog; I was really impressed – we walked to my workplace once. The second time she took me there precisely, precisely.] (Michelle)*

*“Dis vir my ongelooflik hoe sy die verskil weet tussen wanneer sy ‘n harnas het en na my moet omsien en wanneer sy net ‘n hond is wat los is in die huis ... Ja, maar dis vir my ongelooflik hoe die hond kan aanleer dat sy vir jou werk.”*

*[It's amazing to me how she knows the difference between when she has her harness on and has to look after me and when she's just a dog, running freely in the house ... Yes, but it's amazing how the dog can learn that she works for you.] (Michelle)*

The participants all seem to appreciate their dogs' capacity for learning and adapting to them. Although this is not an explicit theme with any of the other literature that was consulted, this theme could be explained by reflecting on the long history that each of the participants had with previous pets. It would be understandable that if one grew up with a pet dog and then received a well-trained, very capable guide dog, one would be impressed by its training.

The confidence that the participants have in their guide dog's ability may also have contributed to their feelings of increased independence and confidence. Having something to be proud of can also give the participants a unique opportunity for favourable social comparisons with other able-bodied peers. Having something desirable to others may indeed create a positive mood, which in turn raises a person's self-esteem and confidence, as explained by Esses (in Baron & Byrne, 2000). This feeling of having something special was described by Cobus in particular (*“he's stayed over with a few people, who told me that they don't want to give him back”*).

#### 4.4.8 Common themes for the two second-time guide dog owners

The two second-time guide dog owners (John and Michelle) presented two additional themes regarding guide dog ownership: traumatic separation from the first dog and comparisons between old and new dog when acquiring the second dog. These two themes will be briefly discussed.

##### 4.4.8.1 Traumatic separation

Whether a guide dog dies (as was the case with John) or needs to be retired (as was the case with Michelle), the experience is traumatic in nature.

There was a feeling of loss of confidence/independence:

*“En na sy dood kon ek nooit, um, met groot selfvertroue loop nie. Ek loop maar altyd met die vrees dat ek gaan enige oomblik in iets vasloop.” (John)*

*[And after his death, I never walked with confidence again. I always walk with the fear that I will collide with something at any moment.]*

*“Um, en selfs as ek gewoon is, ek was gewoon aan hom, en ek loop nie, en ek loop nie so gemaklik met ander mense as wat ek met hom beweeg het nie.”*

*[Um, and even when I'm used to it, I was used to him and I don't walk, and I don't walk as comfortably with other people as I did with him.]*  
(John)

*“... nou dat ons nege jaar saam [was], um, is dit vir my vreeslik om te dink ek moet haar nou laat gaan en ‘n ander hond in haar plek kry omdat sy nie meer vir my kan werk nie.”*

*[... now that we’ve been together for nine years, it is horrible to think I have to let her go now and get another dog in her place, because she cannot work for me anymore.] (Michelle)*

*“Dit was baie swaar om vir Toby te laat gaan ...”*

*[it was very hard to let go of Toby ...] (Michelle)*

*“En daai naweek was erg. Ek ek het ‘n idee waar my vriende bly – ek ken die volgorde van die strate in die middedorp en alles. Maar ek was te bang om soontoe te loop ... Dit was vir my aaklig en my hart was hartseer want dit voel of ek Toby verraai.”*

*[And that weekend was bad. I have an idea where my friends stay – I know the sequence of the streets in the centre of town and everything. But I was too scared to walk there ... It was horrible for me and my heart was sad, because it felt as if I was betraying Toby.] (Michelle)*

The risk factors of the human-animal interaction were discussed in section 2.3.6, and bereavement was listed as one of the psychological problems that could arise from pet ownership. The traumatic retirement (Michelle) and adjustments after the death of a guide dog (John) are both negative aspects of guide dog ownership. There have been limited empirical studies on the negative impact of ending the guide dog partnership. One exception was a study by Nicholson, Kemp-Wheeler and Griffiths (1995) on the distress associated with the end of a guide dog partnership. They found, in a survey-study on a small sample (43 participants) in the United Kingdom, that the loss of a guide dog generates similar levels of distress than is found when a pet or close friend dies.

There is also a type of independence-dependence dichotomy that arose for both Michelle and John after prolonged guide dog use. Their guide dogs gave them the freedom to move with confidence, but the absence of their guide dogs made alternate forms of mobility aid even more unpleasant than before guide dog ownership.

#### 4.4.8.2 Comparisons between old and new dogs

Inevitable comparisons also seem to arise when the second-time owners received their second guide dogs:

*“Maar wat deur ‘n ou se kop gaan voortdurend is: jy is nou hier vir ‘n hond; hoe gaan ek reageer, want ek gaan voortdurend terug neig na die vorige hond toe. Ek het nie hierdie probleem gehad nie en nou het ek hierdie probleem. Jy sal ... voortdurend gaan daar nou gedagtes wat handel oor tussen ooreenkomste – hoe die vorige hond was. Vergelykings plaas jy die heelyd.”*

*[But what goes through one’s head the whole time is: you’re here for a dog now; how will I react, because I’ll constantly reflect on my previous dog. I didn’t have this problem and now I have this problem. You will ... there’s constant thoughts about similarities – how the previous dog were. You are making comparisons the whole time.] (John)*

*“My hart was nog seer. Ek sou nie ... ek het gedink aan hoe dit was om vir Toby te kry en dit was ook hoekom ek daarteen opgesien het – hierdie hardkoppige, eiesinnige hond. As ek ‘n tweede so-een moes kry, hoe gaan ek so hond leer om van my te hou?”*

*[My heart was still broken. I wasn’t going to ... I thought about how it was when I got Toby and that was also why I didn’t’ look forward to it –*

*this hard-headed, stubborn dog. If I were to get another one like that, how would I teach a dog like that to like me?]* (Michelle)

*“... En dit het een of twee keer gebeur dat ek haar per ongeluk Toby genoem het.”*

*[... And it happened once or twice that I accidentally called her Toby.]*  
(Michelle)

For John, these comparisons often resulted in frustration:

*“Die enigste tye wat ek vergelykings getref het – dit kom maar outomaties dat ‘n ou frustreerd raak want jy moet dieselfde ding moet jy elke dag tien keer doen en dit kan nogal op ‘n ou werk. Dan sê jy sommer ook jy wil nie meer ‘n hond hê nie.”*

*[The only time I made comparisons – it happens automatically that one gets frustrated, because you have to repeat the same thing ten times and that can get to you. Then you also say you don’t want a dog anymore.]*

*“Wanneer jy vergelykings begin tref, dis die tye wanneer jy frustreerd raak, geïrretereerd raak oor iets wat nie reg wil werk nie, of oor iets wat die vorige dag reggewerk het en skielik ...”*

*[When you start making comparisons, those are the times you get frustrated, get annoyed about something that doesn’t want to work correctly, or about something that worked the previous day and suddenly ...]*

For Michelle, the fact that her two dogs differed in temperament made the transition easier:

*“Ek kon agterkom dis twee verskillende honde; moenie van die een verwag om die ander een te wees nie. En wat dit vir my makliker*

*gemaak het is die feit ... ek is geneig om iets bekends in iets te soek. Maar omdat die twee so verskillend is, daar's niks eenders aan hulle. So jy kan nie iets van die ander soek nie. En ek is dankbaar daarvoor.”*  
*[I became aware that the dog differed; don't expect the one to be like the other. And what made it easier for me is the fact ... I'm prone to search for something familiar in something. But, because the two were so different, there's nothing similar about them. So you can't look for something in the other. And I'm grateful for that.]*

It would seem that second-time guide dog owners present a unique challenge to guide dog service providers. It would seem that acquiring a guide dog for the second time is laden with emotion and that it requires more of an emotional adjustment than a practical one. However, literature on second-time owners and their emotional experiences is limited to personal accounts on the Internet. No articles could be found on the way second-time owners cope with a new dog.

#### 4.4.9 Variations among the participants in interview two

As with the first interview, variations on the different themes were noted for each participant.

Martin (participant one) is the only participant who is not entirely satisfied with guide dog ownership. He gives several reasons for his lack of satisfaction. He feels that his guide dog does not facilitate substantially better mobility:

*“But, um, as far as mobility is concerned, up to now, the dog hasn't really been making such a huge difference in life. Because all the places that I've been with the dog are places I used to navigate efficiently with*

*a long cane in any case. And so up to now, mobility wise, it hasn't been such a big, um, such a big plus."*

Martin is especially annoyed by the limitations that a guide dog imposes regarding international travel:

*"One of the big things now is I recently thought of going to the UK and, and they have hectic quarantine laws and you need to put the dog in quarantine for six months and pay 30 000 bucks for it, to travel and be in quarantine. And that is a major, major drawback to my independence. Which is, for a lack of a better word, it seriously pisses me off!"*

Martin also feels that his previous long cane efficiency detracts from the usefulness of his guide dog as a better mobility aid:

*"So I think there is, is a level of personal preference as, as for mobility aids that you use, involved, and also the degree of skill you have to start off with a cane. Which will influence how, um, big an impact the dog will have on your independence levels."*

His ambiguous feelings regarding guide dog ownership is a source of anxiety for Martin:

*"But, ja, I certainly feel, um, guilty, um, and ... for not, um, taking the, sort of, more time to access and to decide, because it might mean eventually that I decide to give the dog up. Or to put him through a rather unpleasant quarantine process ..."*

*Um, but, um, ja, I certainly feel like I've been a bit stupid and a bit "oorhaastig", over-hasty with getting the dog. So that's, that's not nice."*

Although he does enjoy guide dog ownership, he feels that, on hindsight, he should perhaps have not acquired the dog:

*“um, it’s a positive experience in the here and now [guide dog ownership], because I have what I need to be able to deal with the, um, the discomforts and, sort of, the pleasure of the dog with me and so on, because I like dogs ... it’s positive, I enjoy that ... But when I think about, sort of, the UK et cetera, um, when it ... it gives it a big cloud. I think as far as going to the UK is concerned, if I just think of that dimension, I would say that I probably wouldn’t have gotten the dog.”*

Martin also found that current guide dog owners created the perception that guide dog ownership is almost perfectly positive and that they communicated very few negative experiences with their dogs:

*“Ja, I found it quite interesting, because everybody that I’ve spoken to that owns a guide dog, um, has been telling me how great and wonderful it has been for them with very, very few mitigating, um, statements ... Um, and then I can’t help wondering whether, um, I am ... whether there’s something wrong with me or whether they are just denying quite a lot of what, um, the dog adds to their life in the negative sense just to make it better ... for themselves. Um, so ja, I’m quite curious about that.”*

Paul (participant two) specifically referred to his friends’ inability to grasp the importance of his dog to him and they seem unwilling to make compromises in order to accommodate the dog on outings:

*“En as ek uitgaan dan los ek nogal die hond, maar nee, ek gaan nie méér uit nie. Want dit is so bietjie ‘n storie man, want mense wil nie*



*altyd verstaan my hond ... veral nie die ouens wat, wat karre het nie, dis nogal bietjie 'n storie. Jy kan nie 'n kar ... die hond in 'n ou se kar laai nie, die ouens wil nie verstaan, sê 'nay man, my kar gaan vol hondehare raak' en nou, so dis nou bietjie 'n storie.'"*

*[And when I go out I tend to leave the dog, but no, I don't go out more often. Because it's a bit complicated, man, because people don't always want to understand that my dog ... especially not the guys that have cars, it's quite a thing. You can't put a car ... the dog in someone's car, the guys don't want to understand, say 'no, man, my car will be covered with dog hair,' and now, so that's quite something.]*

He also expressed his discomfort with conflict situations and aims to avoid conflict as much as possible, even to the detriment of his mobility:

*"Ek weet nog nie, ek het nog nie rêrig na plekke in [pleknaam] gegaan nie want, want ek los ... ek is te wagte eintlik, want ek is nie 'n ou, ek hou nie van 'argue' nie man. Veral nie as ek gaan om 'n lekker tyd te het nie, want dit is nogal ... ek voel dit gaan my aand 'spoil', want as ek eerste nou eers met die ouens moet stry om die hond te laat ingaan ... So ek sal altyd sorg dat sy iewers veilig is voor, voor ek uitgaan."*

*[I don't know yet, I haven't really gone to places in [town name], because, because I leave ... I'm actually expecting [trouble], because I'm not a guy – I don't like arguing, man. Especially not when I go to have a good time, because it's quite ... I feel as if it will spoil my evening, because if I have to argue with the guys to allow the dog inside ... So I will organise that she's somewhere safe, before I go out.]*

Arnold (participant three), again, seemed uncomfortable in the interview setting and struggled to articulate his feelings regarding guide dog ownership. He was, however, the only participant that did not feel that he experienced significant personal or lifestyle changes after acquiring his guide dog:

*“Ek glo nie regtig hy’t veel verandering gebring nie” and “Nee, my roetine is nog dieselfde ... eintlik niks verander nie.”*

*[I don’t really believe he really caused a lot of change] and [No, my routine is still the same ... actually nothing has changed.]*

Cobus (participant four) perceives himself as a strict guide dog owner, who focuses on consistency and calmness when interacting with his dog:

*“Maar ... ek dink ... ag, ek weet nie ek is taamlik streng met hom ensovoorts. As hy sy streke uithaal. Ek weet nie – ek het al baie gevind die meeste honde met wie ek streng is kom altyd na jou toe terug. Ek weet waar ek met hom staan, en hy weet waar hy met my staan.”*

*[But ... I think ... ‘ag’, I don’t know, I’m rather strict with him and so forth, when he starts misbehaving. I don’t know – I’ve found on numerous occasions that the dogs that you’re strict with always return to you. I know where I stand with him, and he knows where he stands with me.]*

Cobus was one of two participants (Michelle is the other) that appreciated their guide dogs for the sense of personal security that it provides by being a deterrent to potential criminals. Cobus mentioned the potential of a guide dog to provide personal security in his first interview (see section 4.4.5):

*“Wat baie voordelig is dat hy swart is. Ek weet nie, hulle is baie bang ... ons het dit op die klas ook gesien – mense is baie banger, maak nie saak watter kleur nie.”*

*[What is very advantageous is the fact that he’s black. I don’t know, they’re very scared ... we saw it at the class as well – people are a lot more afraid, doesn’t matter what colour they are.]*

He was also the only participant that explicitly expressed the wish that people whom they encounter in public should first ask to approach the guide dog before patting it:

*“Jy sal die mense kry wat sien dit is ‘n gidshond of so iets. Dan sal hulle nader kom en vir jou eers vra en so aan. Hulle moet jou eers vra: kan hulle na die hond kyk en aan hom vat of so iets.”*

*[You will get the people that see it’s a guide dog or something. Then they will come closer and ask you and so forth. They must ask you, can they look at your dog and pat him or something.]*

In his first interview (see section 4.4.5), Cobus also mentioned the misconceptions that often exist regarding his seemingly normal appearance. He feels that the guide dog is a more explicit symbol of his blindness, almost alerting people to his lack of sight:

*“As ek moet dink ... as jy my die eerste keer sien ... baie mense het gesê dit lyk nie of ek blind is nie. Dat mense met jou praat en jy reageer nie oor jy nie weet hulle praat met jou nie. Nou as hulle die hond sien, help dit ‘n bietjie, ja.”*

*[If I have to think ... when you see me for the first time ... a lot of people have said that it doesn’t look as if I’m blind. So people will talk to you and you don’t react because you don’t know they’re talking to you. Now, when they see the dog, it helps a bit, yes.]*

John (participant five) discussed his initial uncertainties about his second guide dog. He was somewhat distressed over his lack of control of the specific dog that SA Guide Dogs were to assign him:

*“Die hond wat by jou gaan pas, wat hulle op verweer het, is ook natuurlik ‘n tweede probleemarea. Jou opinie en hulle opinie verskil*

*maar omdat hulle die ‘trainers’ is, weet hulle ten beste en omdat dit hulle werk is, het hulle ook al baie navorsing gedoen op watter metodes en maatstawwe gebruik word om te kyk of ‘n hond by ‘n ou pas. Dan raak jy bietjie bekommerd, want wat gaan gebeur as julle nie bymekaar kan aanpas nie?”*

*[The dog that will suit you, according to them, is of course a second area of concern. Your opinion and their opinion differ, but because they’re the trainers, they know best, because it’s their job, they have conducted a lot of research on which methods and measures are being used to see if a dog suits you. Then you get a bit worried, because what happens if you can’t adjust to each other?]*

John also talked about the consultations that he had with the staff at SA Guide Dog, something that gave him more peace of mind:

*“En dan is jy aan die begin ‘n bietjie bangerig want jy weet nie hoe gaan die hond hom gedra of hoe gaan sy werkvermoë is nie. Maar aan die einde van die dag, na die konsultasie, dan voel ‘n ou ‘n bietjie meer gerus.”*

*[And then you’re a bit scared at the beginning, because you don’t know how the dog is going to behave or what his working ability will be. But, at the end of the day, after the consultation, then one feels a bit more at ease.]*

*“Die konsultasie help ‘n ou baie om die probleme aan te spreek.”*

*[The consultation helps a lot to address the problems one had.]*

He was also the only person who explicitly expressed his gratitude and respect for the staff at SA Guide dogs and concern for the future of SA Guide Dogs:

*“En in die ander opsig dat die ‘trainers’ by die gidshondvereniging is hulle nou huidiglik net vyf persone ... En met ons land met stygende lewenskostes, kan ‘n mens net bid vir hulle en dankie sê dat hulle nog altyd daar is. Want wat gaan gebeur as hulle môre, of in die volgende paar maande wat kom, nuwe aanbiedinge gaan kry, dit gaan ‘n groot probleem wees vir die ouens wat gidshonde nodig het.”*

*[And in another sense the fact that there are currently only five trainers at the Guide dog association ... and with our country’s rising living expenses, one can only pray for them and be grateful that they’re still there. Because what happens if tomorrow, or in the next couple of months, they receive a new offer. That will be a big problem for the guys that need guide dogs.]*

John is the only participant with a family of his own. He remarked on the positive interactions between his children and his guide dog:

*“Ek het ‘n probleem met my gesin, want hulle kan nie genoeg kry van Vito nie. Gewoonlik as ons by die huis kom, dan is dit ‘n gespelery, hulle hou haar besig ... ons is almal lief vir Vito.”*

*[I have a problem with my family, because they can’t get enough of Vito. Usually, when we get home, then they play around – they keep her busy ... we all love Vito.]*

Michelle (participant six) is the only participant who has to support a retired guide dog in addition to her second guide dog. She and Cobus both mentioned the ability of their guide dog to be a deterrent to criminals:

*“Ongelukkig is dit nou maar so dat vandag kry jy nou maar dat mense maklik goed gryp, grypdiewe word en of wil bedel op straat en vir jou geld wil vra, die straatmense wat nie werk het nie. Um, en hulle sal nie*

*sommer met jou moeilikheid soek nie, want jy't 'n groot hond by jou. So dit is vir my ook 'n sekuriteit. Dit is 'n afskrikmiddel."*

*[Unfortunately today, you get people who grab things quite easily, who become purse-snatchers or beg on the streets and ask you for money, the people on the streets that don't have a job. Um, and they won't easily make trouble, because you have a big dog with you. So, it's also a form of security to me. It's a deterrent.]*

Michelle reports an interesting dependence-independence dichotomy that develops after a period of guide dog ownership:

*"En jy raak afhanklik ook van hulle. Hy gee vir jou die onafhanklikheid om, om self te kan beweeg en na plekke toe te gaan, en ek is nie bang om in strate te beweeg nie, omdat sy by my is."*

*[And you also become dependant on them. He gives you the independence to, to move on your own and to go places, and I'm not afraid to walk in the streets, because she's with me.]*

*"... ja, um, ek het nêrens gegaan toe sy siek was nie, ek was heeltemal te bang. Ek het myself nooit as so bang mens geken nie."*

*[... yes, um, I didn't go anywhere when she was sick, I was too scared. I never knew myself to be such a scared person.]*

She also referred to her internal conflict about letting her parents foster her retired guide dog:

*"En ek het vir my ouers gesê, 'moet asseblief net nie dit doen nie' [om die hond van haar te vervreem nie]. Ek wil nog darem haar liefde hê. En dis vir my interessant weet jy, sy't my nie gesien toe ek met vakansie was nie, en voor dit ook nie, want my ma-hulle was weg met [werkbeskrywing van ouers]. So vir vier weke het sy my nie gesien nie."*

*Maar toe ek by my ma-hulle gaan bly die naweek het sy vir my gevra om uit te gaan, sy't vir my kom kos vra, sy en Abby het alby langs my bed geslaap ...”*

*[And I told my parents, ‘please, don’t do that’ {estrangle her dog from her}. I still want her love. And it’s interesting, you know, she didn’t see me when I was on holiday, and not before that either, because my parents were away with [vocation of parents]. So for four weeks, she didn’t see me. But when I went to stay with my parents this weekend, she asked me to go out, she came to me to ask me for food, she and Abby both slept next to my bed ...]*

Michelle talked about the problems and anxiety associated with an old guide dog approaching retirement:

*“Jou brein sê ook vir jou Toby het begin ouer raak, sy’t stadig begin stap, sy kon nie meer in die aand sien nie ... so dis onmenslik om haar te forseer om aan te hou werk net omdat jy haar by jou wil hou ...”*

*[Your brain tells you that Toby’s starting to get old, she started to walk slowly, when couldn’t see at night anymore ... so, it’s inhumane to force her to continue working just because you want to keep her with you.]*

*“Dit was so hartseer om ‘n hond te hê wat altyd siek is en bekommerd wees wat gaan van die hond word.”*

*[It was so sad having a dog that was sick all the time and being worried about what’s going to happen to your dog.]*

#### 4.4.10 Validity of findings

Giorgi and Giorgi (2003) pointed out that it is not quantification that defines science, but rather obtaining the “most precise knowledge possible’ (p.258). A scientific study is valid when knowledge was obtained systematically, methodically and critically and

when it applies generally. These four requirements translate into a valid scientific study and will be discussed briefly in order to make a judgement on the validity of the current qualitative results. Giorgi and Giorgi's (2003) explanation of the four requirements for a scientific study will guide this discussion.

A systematic approach to a problem requires that there must be a logical connection between several sub-fields in a specific discipline. Giorgi and Giorgi (1993) used the example of learning and motivation to illustrate the logical connection that is required to exist in order to approach a scientific study systematically. In order for a scientist to approach a problem systematically, he/she needs to be aware of the different logical connections which already exist in any given discipline. This usually entails a thorough literature review on a subject of interest. The current author identified two logical sub-fields to be studied, namely guide dog ownership and psychology. It was observed that previous studies have found a connection between dog ownership and diverse psychological constructs. It was thus a systematic extension of an already existing logical connection that led to the investigation of guide dog ownership and the influence it has on a person's life and psyche.

A methodical approach to science requires that basic steps in the research process must be made explicit and that they are replicable by others. A thorough discussion of the procedures and perspective for the qualitative study was presented in the third chapter of this document (see section 3.4.2), and the method of data analysis was also made explicit in section 4.4.2. The current author believes that due attention was paid to these issues to make the study replicable and thus methodical.



Furthermore, the researcher is required to be critical of his/her findings, and the findings must also be subjected to peer-review in the community of scientists. Throughout the discussions of the common themes that emerged from the interviews, the current author was careful to evaluate the knowledge that was gained through basing her conclusions on existing theories and knowledge gained by other scientists. In section 5.2 there is also a clear discussion of the limitations of the current research. Finally, the current author's findings were subjected to peer-review. A current doctoral student, who employed the same methodology in her master's thesis for psychology, critically evaluated the common themes that were identified by the current author and her feedback was incorporated into the subsequent findings.

The final step in ensuring that a study is valid and scientific, according to Giorgi and Giorgi (1993), is the ability to generalise the findings to situations other than the ones in which the knowledge was obtained. However, care must be taken that the findings are only generalised to populations and situations with similar characteristics as the ones employed in the study. Giorgi and Giorgi (1993) stress that the findings need not be universal, but that it can be general or typical of a certain type of situation/person. In the current study, care was taken to discuss the findings and to generalise only to persons who share similar characteristics as the participants that formed part of the study. For example, it was made explicit on numerous occasions that the themes that emerged from the interviews can only be generalised, and then with caution, to people who want and willingly apply for a guide dog, and not to all people with blindness. The phenomenological methodology that was employed also imposed parameters for the type of person that could participate in the study. In order to achieve an understanding of a phenomenon, the participants had to be

experiencing the phenomenon of guide dog ownership themselves. Thus, the findings are based on and can only be generalised to *current* guide dog owners who willingly applied for their dogs.

Based on the requirements for a scientific study, as discussed by Giorgi and Giorgi (1993), the current author is satisfied that the current study is valid and scientific.

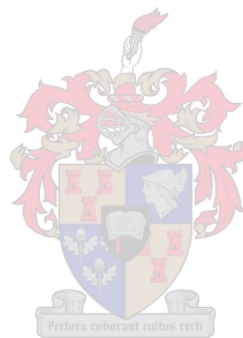
#### 4.4.11 Conclusions

This chapter presented the findings of the two research methodologies that were employed in this study.

The quantitative design yielded inconclusive results (refer to section 4.2.3). Only one sub-scale on Ryff's SPWB, namely Personal Growth, presented group differences, but in the opposite direction than was anticipated. Persons with blindness *without* guide dog ownership had better personal growth than persons with blindness *with* guide dog ownership, according to Ryff's SPWB. A lengthy discussion was dedicated to this unpredictable finding (refer to section 4.3) and the conclusion was made that confounding may have been responsible for this result. None of the other five sub-scales of SPWB yielded any significant group differences. According to the findings of the quantitative research design, guide dog owners do not present better psychological well-being than non-owners, but both groups present a very high degree of psychological well-being. This led to a critical discussion of the psychometric properties of Ryff's SPWB (refer to section 4.3.3).

The qualitative design yielded a wealth of information on the lived experience of anticipating and owning a guide dog (refer to section 4.4). Seven themes emerged regarding the anticipation of guide dog ownership (refer to section 4.4.3). The findings of the second set of interviews yielded eight themes (refer to section 4.4.6), all regarding the lived experience of being a guide dog owner.

Each finding for both the methodologies was also discussed with reference to previous literature.



## CHAPTER 5

# CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS

### 5.1 Introduction

From the current study, conclusions can be made regarding guide dog ownership and psychological well-being, as well as the lived experience of guide dog owners. In order to make conclusions, the following research questions (as formulated in chapter 1) have to be taken into consideration:

1. Do differences exist in the psychological well-being of blind persons with guide dogs (group A) and blind persons without guide dogs (group B)?
2. If differences in psychological well-being exist between the two groups, can the differences be attributed to guide dog ownership?
3. What is the lived experience of anticipating and adjusting to life with a guide dog in South Africa?

The following sections will make conclusions based on the findings from the current study.

### 5.2 Conclusions from the literature

Based on the results presented in chapter 4, conclusions can be presented regarding the research questions. The conclusions from this study will be organised

into two sections, namely conclusions based on the quantitative methodology (section 5.2.1) and conclusions based on the qualitative methodology (section 5.2.2).

### 5.2.1 Conclusions based on the quantitative methodology

Research question one (which explored whether differences exist in the psychological well-being of blind persons with or without guide dogs) has a negative answer, with the exception of one of the sub-scales of the SPWB. The two groups differed significantly on the Personal Growth sub-scale of the SPWB. The non-owner group presented better personal growth than the guide dog owner group. As discussed in section 4.2.3, this result was somewhat surprising and several confounding variables were identified in section 4.3 which might explain this finding. Mostly, however, there was no significant difference between the well-being of guide dog owners and non-owners.



The second research question was dependent on the findings regarding question one, for it asked whether differences in psychological well-being between the two groups can be attributed to guide dog ownership. If no significant group differences emerged, however, as was mostly the case, question two becomes void. Guide dog ownership could not distinguish the well-being of the two groups. It has to be pointed out, however, that guide dog ownership *was associated with well-being* (based on the high mean scores obtained on the SPWB by the guide dog owner group), albeit not significantly more than non-ownership. What is also clear from the high mean scores by both groups in the study (if the validity of Ryff's SPWB is accepted) is that there is a great potential for persons with blindness to achieve well-being, despite

their challenges. This finding paves the way for future researchers to explore the potential of persons with disabilities and not just their challenges.

The current study was very much explorative in nature. Due to practical limitations (as discussed in section 3.1.1), the research design that was chosen was always subject to possible confounding. Section 5.2 will discuss the limitations of the current study and, more importantly, section 5.3 will present recommendations for more high constraint research in the future. The most definite conclusion that can be made from the results of this study is that well-being seems to be mediated by a myriad of factors and that guide dog ownership has the potential to be one contributing factor.

Even though the findings of the quantitative study were mostly inconclusive, the current study has contributed to the very limited databank of knowledge on the subject of the psychology of guide dog ownership. A foundation for investigating guide dog ownership from a psychological and psychofortological viewpoint has been established. The combination of literature from three previously distinct topics, namely positive psychology, the psychology of disability and the human-animal interaction, provided new insight into the potential that exists when combining knowledge from different disciplines. A pilot study of the applicability of one of the measuring instruments in the field of positive psychology (Ryff's SPWB) in the South African context was established. Finally, the symbiotic use of two research methodologies proved that McGrath and Johnson (2003) were correct when they concluded that qualitative and quantitative research need not be approached as opposing perspectives, but rather as complementary. The inconclusive findings of

the quantitative study were supplemented by very insightful qualitative data, which will now be discussed.

### 5.2.2 Conclusions based on the qualitative methodology


The final research question, which explored the lived experience of guide dog ownership, was explored in a qualitative fashion. Each of six participants was interviewed twice and the transcription data was subjected to a phenomenological orientated analysis.

The common themes that emerged from interview one answered the first part of the third research question regarding the lived experience of anticipating a guide dog. Due to the fundamentally dynamic nature of interviews, the questions that were asked and the seven themes that emerged from interview one included a broader discussion on various topics and not just the anticipated experience of guide dog ownership.

In answering the first part of question one directly, the lived experience of anticipating a guide dog is dominated by expectations regarding guide dog ownership. The first three themes emerging from interview one all dealt with the expectations of guide dog ownership (refer to table 8 in chapter 4 for a full summary of the themes from interview 1). A guide dog is expected to *aid with mobility*, to *provide social facilitation* and to *necessitate personal/interpersonal change*. An interesting sub-theme that emerged from the first three themes was the strong

influence that current guide dog owners had on shaping the expectations regarding guide dog ownership for prospective guide dog owners.

The next three themes that emerged from interview one do not directly apply to the third research question, but rather provided insight into the shared characteristics of the participants. These characteristics, although identified from qualitative research, could provide valuable insight into the type of person who apply for a guide dog. All the participants placed a great premium on their independence, all but one of the participants exhibited a sense of social responsibility and every one of the participants had a long and happy history of previous pet ownership. In fact, previous pet ownership was so explicitly present with all the participants that it seems to be a strong predictor for future guide dog ownership.



The final theme that emerged from interview one highlighted the multiple challenges that face persons with blindness in South Africa. These findings confirm that there are still a myriad of challenges facing persons with blindness, such as inaccessible environments and poor public transport. These challenges create internal conflict for persons who want to operate independently, but are forced to ask for help (independence-dependence paradox). In section 2.2.2, the objectives of the INDS were mentioned (Philpott, 2004) and one objective which apparently has not been achieved is to reduce prejudices against persons with disabilities. The participants in the current qualitative study have identified a persisting ignorance about persons with disabilities and the fact that there is still reluctance by the public to interact with them.



The second interview was conducted to answer the second part of the third research question. Eight themes emerged from the second interviews for all six participants, and two additional themes emerged for the two second-time guide dog owners (refer to table 9 in chapter 4 for a full summary of the themes from interview 2). The following may be concluded regarding the lived experience of owning a guide dog:

Guide dog ownership influenced different aspects of the participants' functioning. The owner of a guide dog experience changes in his/her physical functioning (mobility), personal functioning, lifestyle and social environments and interactions. The guide dogs improved the mobility of the participants and enhanced their physical functioning.

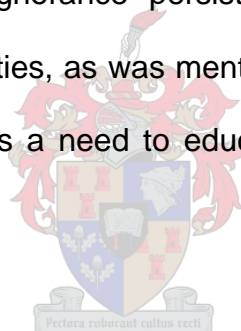
A guide dog influences more than just a person's mobility, according to the common themes that emerged from the interviews with the six participants. In an article on the internet on working dogs, Honsch (n.d., p.1) claims that "guide dogs provide the blind with vision, independence, and love". Although this is a non-academic article, the current results would suggest that, for the most part, Honsch's statement rings true. A guide dog provides vision through mobility enhancement (theme 1), a sense of independence (theme 3) and love/companionship (theme 2).

The fourth theme that emerged from the second interview suggests that guide dog ownership implies certain lifestyle changes and added responsibility for the owner. The care of a guide dog (financially and physically) can be costly and require time and careful planning. The sixth theme also warns that guide dog ownership has negative aspects. A dog, unlike a long cane, can become distracted. The guide dog

owner needs to adjust and to be aware of the possibility that his/her guide dog will sometimes cause discomfort and annoyance.

The fifth theme provided insight into the guide dog's social influences. This theme concurs in part with numerous other findings that service dogs act as social facilitators and attract people. It does, however, also highlight the influence of culture on the perceptions of a guide dog. In the South African context, guide dogs attract some people (thus facilitating social interaction) and repel others (thus inhibiting social interaction).

Theme seven confirmed that ignorance persists regarding the lives (and aids employed) of people with disabilities, as was mentioned in theme seven of interview one. Theme seven also identifies a need to educate security personnel and other staff on the rights of guide dogs.



The last theme which applies to all the participants was a sense of pride and wonder regarding the training and abilities of guide dogs. This is a very good indication of the quality of training that was provided by SA Guide Dogs and the success of their selection and placement programmes.

The two unique themes for the second-time guide dog owners highlighted the need to prepare current owners for the loss/retirement of their guide dogs. The retirement/death of a guide dog was a traumatic experience for both participants who had previously owned a guide dog. Service providers must also be aware of the

emotional adjustments that second-time owners must go through in order to accept their second guide dogs.

The findings of the two sets of interviews have implications for the service provision of the South African government to persons with blindness. The INDS (1996) confirmed that urban and rural infrastructures were neither designed for nor very accessible to persons with disabilities. An improved means of mobility in those environments through the use of a guide dog, such as was reported by the participants, may increase the accessibility of previously inaccessible environments for persons with blindness.

The findings also have theoretical implications. Webster and Roe (1998, p.112) comment that “mobility for many individuals with visual impairments is synonymous with personal independence,” and thus emphasise the need to find ways to improve mobility and access for persons with blindness. Five out of the six participants experienced an increased sense of independence due to guide dog ownership. Guide dog ownership seems to be a viable solution for providing personal independence to those who prefer to acquire a guide dog.

In conclusion to this section, the questions posed in chapter one will be answered and it will be considered whether guide dogs can empower a person with blindness (refer to section 2.5).

The following paragraph appears in section 1.3 of the current thesis:

*Promotional pamphlets by SA Guide Dogs also placed emphasis on the independence and self-respect a person can gain through guide dog ownership (South African Guide-dogs Association for the blind, 2003). One such pamphlet makes reference to “a vision beyond sight” (South African Guide-dogs Association for the blind, n.d.<sup>1</sup>), which implies that guide dog ownership has more benefits than merely providing mobility aid. In another pamphlet (South African Guide-dogs Association for the blind, n.d.<sup>2</sup>), guide dogs are highlighted as companions, friends, and agents which give mobility and life to a person with sight disability, painting an attractive picture of guide dog ownership.*

Based on the results of mostly the qualitative study, it may be concluded that guide dogs are, at least to the six participants that were involved in the study, indeed companions and friends. Guide dogs seem to provide more than just mobility aid.

What is not mentioned by promotional pamphlets, however, is that guide dogs are also a major responsibility. Guide dogs are not perfect beings capable of single-handedly giving a person “life”. Guide dogs can be a source of concern, of anxiety, of trauma and of agitation. It can also inhibit certain social encounters and cause problems with public access. The experience of owning a guide dog seems to be both positive and negative, although all but one of the participants readily agree that they would rather have a guide dog than not. In that sense, guide dogs seem to enhance the lives of those people who willingly apply for one.

In section 2.5, the question was posed whether a guide dog can be a tool for empowerment. Self-efficacy and sense of control form part of Dempsey and Foreman's (1997) definition of empowerment. Given that the participants in the qualitative study felt more in control/independent after guide dog acquisition and that they were able to increase their participation in their local communities (through the dog's social facilitation), guide dogs can indeed prove to be a tool for empowerment.

Ultimately, however, this study was designed to investigate whether a guide dog has the potential to enhance the well-being of persons with disabilities (through integrating theory, results and personal accounts). Although the quantitative part of the study proved inconclusive, the qualitative part did provide some promising findings. If Ryff's (1989) theory of psychological well-being is accepted, albeit not necessarily her measurement tool, it may well be concluded that guide dogs seem to enhance a person's autonomy (independence), positive relations with others (including a pet), environmental mastery (in the form of better mobility) and personal growth (see theme 3 of interview two).

It may be that the well-being of a person seeking a guide dog increases with guide dog ownership. Nevertheless, guide dog ownership is not a solution for all the challenges facing a person with blindness, nor is it a solution for all persons with blindness. A guide dog may benefit some, while others will not benefit from it. It seems that a guide dog forms a very integral part of the life of its owner, but that it is not the only factor that determines the well-being of a person with blindness.

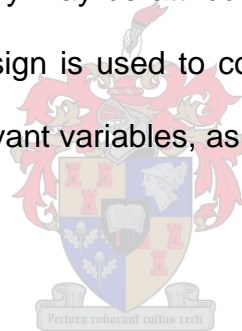
The following two sections will conclude this study by discussing the limitations of the current study, as well as recommendations for future research on this topic.

### 5.3 Limitations

The following sections will discuss the limitations of the quantitative design and qualitative design separately.

#### 5.3.1 Limitations of quantitative study

Most of the limitations of the study may be attributed to the differential design which was employed. A differential design is used to compare naturally occurring groups on one or more theoretically relevant variables, as explained by Graziano and Raulin (2000).



The perfect differential design would have the two groups under investigation differ only on a single dimension (such as having a guide dog or not). This, however, is rarely possible and researchers usually rely on multiple comparisons before drawing conclusions on how group differences influence the dependant variable (Graziano & Raulin, 2000). The multiple comparisons that were recorded for the participants in the current study included theoretically relevant demographic information that have been shown to influence the dependent variable (Psychological Well-being), according to previous literature. It is also possible that some other variable confounded the results and yielded group differences or minimised differences to the

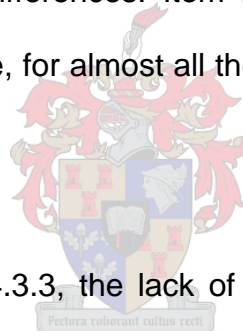
extend that differences were not present. Thus, the findings from this naturally-occurring, control-group design may have been confounded by extraneous variables.

Another limitation of the current study may be attributed to the limited number of potential participants in the Western Cape (there are only approximately 105 guide dog owners in the Western Cape). Each guide dog owner was contacted for participation in an ad hoc fashion, or via Snowball sampling. This type of sampling limits the interpretations of the findings to only this particular sample and other populations with exactly the same characteristics. The sample was thus not randomly selected from the population and, as such, not representative of the whole population of persons with blindness. For example, all the participants in the current study were computer-literate and had access to electronic mail. This may imply that the sample for the current study has a higher level of education than the general population of persons with blindness, or that they have a higher socio-economic status and higher levels of employment than the general population. Caution was thus taken not to generalise the results of the current study to the whole population, but only to populations with exactly the same characteristics.

The two levels of the independent variable in the current study, namely Guide dog owners and Non-owners, were also not manipulated. As such, this design limits interpretations of causality. Whatever the findings on group differences may be, it cannot be concluded that the variation in the independent variable *caused* the variation in the dependent variable.

Numerous limitations also resulted from the properties of the measurement instrument employed. Ryff's SPWB yielded non-parametric data, even though the sample sizes were quite substantial. The non-parametric data necessitated non-parametric statistical analysis, which limited discriminatory power. Parametric testing is more robust and powerful and should detect group differences more accurately than non-parametric testing. This may have caused a Type II error, where the current researcher may have failed to reject the null hypothesis (that the two groups are equal), even though it is false.

Specific items on the questionnaire may also have limited the overall strength of the questionnaire to detect group differences. Item number 25, for example, had no discriminant value for this sample, for almost all the subjects in both groups scored it exactly the same value.



As also pointed out in section 4.3.3, the lack of South African validation of Ryff's SPWB as well as the lack of validation for persons with blindness limit interpretation of the results within the uniquely South African population.

A further limitation on the quantitative study may have been a limited sample size. Even though the sample size of 65 was seemingly substantial, an effort was made to extend the study to all regions of South Africa. As there was a reliance on Snowball sampling (organisations were reluctant to release contact details of potential participants) for this extension, there were very limited response outside the Western Cape. A very large sample may have ensured a more normal distribution of scores,



which could have facilitated the use of parametric statistical tests. A large sample may also have contributed to a more representative sample for the current study.

Finally, there were no baseline scores on the SPWB available for the guide dog owners before they received their guide dogs. This makes it impossible to establish whether a guide dog increases the well-being of a person wishing to obtain a guide dog (in addition to the seemingly high level of well-being that was recorded in the current study).

### 5.3.2 Limitations of qualitative study

Due to the inherent subjective nature of qualitative research, several limitations were imposed on the current study.



#### 5.3.2.1 Limitations based on a Positivistic view of research

Objectivity is the hallmark of quantitative research (Graziano & Raulin, 2000), which implies that the phenomena under investigation, procedures used to investigate the phenomena and the researcher doing the investigation must remain objective in order for the results to be objective (McGrath & Johnson, 2003). Objectivity in itself means that the material world and experience under investigation is independent of the observer (or researcher). Qualitative research, however, proposes an alternative paradigm, by means of which the researcher is seen as an interdependent participant in research and always has a value-laden orientation to every phenomenon.

If qualitative research is considered from the dominant quantitative, positivistic orientation, then the use of the qualitative design limited the current study through a lack of:

- objectivity;
- standardised testing procedure;
- repeatability (reliability);
- quantitative data;
- generalisability;
- causality.

The current researcher does not support a pure positivistic view of qualitative research. As explained in chapter 1, qualitative and quantitative research should rather be approached as complementary in nature and not in direct conflict with each other. The current researcher accepts that, from a quantitative point of view, certain limitations apply to qualitative research (such as the lack of repeatability). The benefits, however, far outweigh the costs, given the in-depth and rich knowledge one can obtain through qualitative research.

#### 5.3.2.2 Limitations based on the nature of qualitative research

Due to the nature of the data collection in this qualitative design, three main areas could limit the results of the current study:

Data collection was based on interviews with six participants. *The skills of the interviewer* (in this instance, the current researcher) could have adverse effects on the participants and interview as a whole. A skilled interviewer will keep to the predetermined questions, be respectful and courteous and offer limited personal comments and advice (Creswell, 1998), and probe the participant at suitable times. In essence, a good interviewer needs to be a good listener. Good interviewing is a skill that needs to be refined. As this was the first formal qualitative enquiry undertaken by the current researcher, her lack of experience may have limited an optimal interview protocol.

Qualitative research also relies on *the articulations of the interviewee*. The articulations of the interviewee directly translate into the study's data. An interviewee who is new to the interview setting may exhibit fear or inhibitions, which negatively influence the fluency of the interview and candidness of participant. The in-depth nature of the interviews will be greatly limited by an inhibited interviewee; this was especially the case with one participant in the current study, who had difficulties articulating his feelings and who was reluctant to expand on his initial answers. Very limited conversation could be extracted from this participant, which adversely affects the volume of data that could be analysed for this participant.

A final possible limitation on the qualitative data may also be attributed to *the inexperience of the current researcher*. As the common themes that emerged from the data were dependent on the subjective and creative interpretation of the text by the researcher, inexperienced research methods may have led to the inclusion of irrelevant information or the exclusion of important themes. The data interpretation

and themes were, however, subjected to peer evaluation by a doctoral student (Combrinck, personal communication, diverse dates), who also employed phenomenological, qualitative research in her thesis (Combrinck, 2004). In that way the threats to validity due to inexperience were minimised as far as possible.

#### 5.4 Recommendations

This final section will consider the conclusions from both the quantitative and qualitative methodologies and make recommendations regarding future studies on the various subjects covered by this thesis.

An experimental design remains the best method of establishing causality when doing research on a topic. One of the characteristics of an experiment is the random or unbiased assignment of participants to the experimental conditions (Graziano & Raulin, 2000). In doing research on guide dog ownership, however, the researcher is normally prevented from doing this, because it would be unethical to randomly assign people to become guide dog owners. As such, it is suggested that future research on guide dog ownership be undertaken on a quasi-experimental level. The most achievable approach when investigating the influence of a guide dog on a person's life seems to be a non-equivalent control-group design (Graziano & Raulin, 2000), where two naturally occurring groups are used (persons not receiving a guide dog and persons receiving a guide dog). A quasi-experimental design can include a pre-test for both groups (before one of the groups receive their guide dogs) and then a post-test for both groups (after a period of guide dog ownership by the one group). In order to control for some of the confounding variables due to non-random

assignment of groups, it is suggested that the control group be as similar to the experimental group as possible. For example, all the participants have to be blind, and possibly only persons who are considering guide dog ownership in the future should be included.

Practical suggestions regarding future research on this topic would be to base the research in Johannesburg, where the only training centre for guide dogs in South Africa is based. This will ensure accessibility to all the prospective guide dog owners.

Other methodological recommendations can also benefit future researchers. Before any further research in the South African context is undertaken with Ryff's SPWB, the current author would strongly suggest a complete factor analysis of the questionnaire. This would firstly determine whether the six sub-scales on Ryff's SPWB are warranted. Secondly, a South African validation study is necessary to determine whether the questionnaire (and its items) needs to be adapted for use in South African contexts. Thirdly, Ryff's SPWB also needs to be validated for persons with disabilities.

As this was largely explorative research, the most comprehensive measure of well-being (Ryff's SPWB) was chosen, and as a result limited significant findings were made. If future researchers choose to replicate this study, a bigger sample size is suggested to ensure that the data obtained is parametric in nature. A further suggestion would be to use more specific questionnaires on a variety of variables, based on the findings of the current qualitative study.

In this research successful use was made of electronic mail and computers for data collection on a sample of persons with blindness. It is strongly recommended that future researchers use this medium, not only as a means for persons with blindness to interact with a given questionnaire, but also as a medium to potentially increase sample size (through increasing the accessible population). This recommendation is, of course, limited for use in populations with high levels of computer literacy and access.

Future qualitative studies on this topic will perhaps benefit from extending the adjustment period to a guide dog from three months to six months. The participants still seemed in an adjustment period with their new guide dog after three months, and a different picture may emerge once the participant has fully integrated the dog into his/her life. Practically, this will entail either extending the time between the two interviews with the same participant (from three to six months) or, preferably, adding a third interview with each participant (six months after guide dog acquisition). The second option may prove the most valuable.

The use of both quantitative and qualitative methodologies was very rewarding. Both methodologies present unique characteristics and explore research from different points of view. The quantitative design presented the current researcher with data that could be statistically analysed and discussed according to specific mathematical and tested strategies. The data that is obtained through questionnaires are, however, limited to the properties of any specific questionnaire (such as the specific variable tested by the questionnaire) and subject to the questionnaire's validity and reliability. The qualitative design, in turn, provided rich descriptions of several,

related phenomena, with little boundaries on the breadth of the topic under investigation. The qualitative data is subject to more subjective interpretations and poor replicability.

The combination of the two methodologies presents all the advantages of both research strategies and offers a more dynamic and holistic approach to researchers who are studying a specific phenomenon.

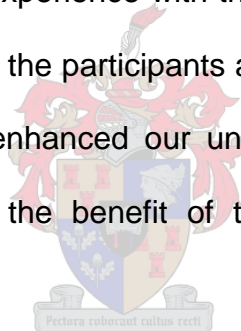
Finally, based on the conclusions of this study, the following recommendations may be made to several groups and organisations that are involved in this topic:

1. Prospective guide dog owners need to understand the responsibilities that guide dog ownership entails. Guide dog ownership seems to be a life changing experience.
2. SA Guide Dogs has the responsibility to inform prospective guide dog owners on the negative aspects of guide dog ownership as well. Their campaigns to inform the public of the uses and rights of guide dogs should also receive more attention. The organisation can also provide guidelines and information to guide dog owners for dealing with the death or retirement of a guide dog (this was also found with another guide dog organisation – Guide Dogs for the Blind, Inc., n.d.).
3. Policy makers must become aware of the potential/help that guide dogs provide to those who wish to obtain them, and of the phenomenon that people become dependent on their guide dogs. This implies a great need for the sustainability of the guide dog movement.

4. The South African government must provide more explicit environmental support for persons with disabilities. There is also a need for better education in schools regarding the ways in which to interact with persons with disabilities. The general public must be made aware of the aids that are available to persons with disabilities (including guide dogs for persons with blindness).

## 5.5 Concluding remarks

This study proved to be a highly enriching experience for the current researcher. It provided the researcher with insight into the worlds of persons with blindness and allowed her to share an unique experience with them. It was a process of discovery for the researcher and, hopefully, the participants as well. It is the wish of the current researcher that this study has enhanced our understanding of the psychology of guide dog ownership, both for the benefit of the scientific community and the participants themselves.



The study also made the researcher aware of the potential of fortological research to explore human experiences. Fortological research provides a basis for enriching the lives of people, to work on their strengths, and not just on the alleviation of some or other pathology (as psychopathological perspective to psychology would suggest). Through a more positive psychology, we can, as Seligman (2002, p.8) describes it, “learn how to build the qualities that help individuals and communities not just endure and survive but also flourish”.



## References

- Als, H., Tromick, E., & Brazelton, T.B. (1980). Affective reciprocity and the development of autonomy: the study of a blind infant. *Journal of American Academy of Child Psychiatry*, 19, 22-40.
- Anderson, E.M, & Clarke, L. (1982). *Disability in adolescence*. London: Methuen & Co. Ltd.
- Antonovsky, A. (1987). *Unravelling the mystery of health: how people manage stress and stay well*. San Francisco: Jossey-Bass.
- Allen, K. (n.d.). The healthy pleasure of their company: companion animals and human health. Retrieved August 30, 2004 from <http://www.deltasociety.org/dsz003.htm>
- Allen, K., & Blascovich, J. (1996). The value of service dogs for people with severe ambulatory disabilities. A randomized controlled trial. *JAMA*, 275(13), 953-954. Retrieved January 27, 2005 from PubMed database.
- Baenninger, R. (1995). Some consequences of animal domestication for humans. *Antrozoös*, 8(2), 69-77.
- Bandura, A. (1997). *Self-efficacy: the exercise of control*. New York: Freeman.
- Banks, M.R., & Banks, W.A. (2002). The effects of animal-assisted therapy on loneliness in an elderly population in long-term care facilities [Abstract]. *Journals of Gerontology*, 57A(7), M428-M432. Retrieved February 24, 2003 from PsycINFO database.
- Barnard, C.P. (1994). Resiliency: a shift in our perception? *The American Journal of Family Therapy*, 22(2), 135-144.
- Baron, R.A., & Byrne, D. (2000). *Social Psychology* (9<sup>th</sup> ed). Needham Heights: Allyn and Bacon.
- Baum, M.M., & McCabe, B.W. (2000). The role animals play in enhancing quality of life for the elderly. In A. Fine (Edit.), *Handbook on Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice* (pp.237-251). San Diego: Academic Press.
- Beaty, L.A. (1991). The effects of visual impairment on adolescents' self-concept. *Journal of Visual Impairment and Blindness*, 85, 129-132.
- Beck, A.M. (2000). The use of animals to benefit humans: animal-assisted therapy. In A. Fine (Edit.), *Handbook on Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice* (pp.21-40). San Diego: Academic Press.

- Bernstein, P.L., Friedmann, E., & Malaspina, A. (2000). Animal-assisted therapy enhances resident social interaction and initiation in long-term care facilities [Abstract]. *Anthrozoos*, 13(4), 213-224. Retrieved March 02, 2003 from PsycINFO database.
- Bigelow, A.E. (1987). Early words of blind children. *Journal of Child Language*, 14, 47-56.
- Bowe, F. (2000). *Physical, Sensory, and Health Disabilities: an introduction*. New Jersey: Prentice-Hall, Inc.
- Brickel, C.M. (1986). Pet-facilitated therapies: A review of the literature and clinical implementation considerations. *Clinical Gerontologist*, 5(3/4), 309-331.
- Brief, A.P., Butcher, A.H., George, J.M., & Link, K.E. (1993). Integrating bottom-up and top-down theories of subjective well-being: the case of health. *Journal of Personality and Social Psychology*, 64(4), 646-653.
- Burlingham, D. (1979). To be blind in a sighted world. *The Psychoanalytic Study of the Child*, 34, 5-30.
- Campbell, C. (2000). *Letting them die: How HIV/AIDS prevention programmes often fail*. Bloomington: Indiana University Press.
- Camp, M.M. (n.d.). *The use of service dogs as an adaptive strategy: a qualitative study*. Retrieved August 08, 2004 from <http://www.workingdogs.com/doc0037.htm>
- Carver, V., & Rodda, M. (1978). *Disability and the Environment*. London: Elek Books Ltd.
- Center to Study Human-Animal Relationships and Environments (n.d.). *Animals as Live-in companions in long term care and assisted living environments*. Retrieved March 04, 2004 from <http://www.censhare.umn.edu/LTC1.htm>
- Christopher, J.C. (1999). Situating psychological well-being: exploring the cultural roots of its theory and research. *Journal of Counseling & Development*, 77, 141-152.
- Continuing Psychological Education (2004). *Subjective Well-being (Happiness)*. Retrieved on August 30, 2004 from <http://texcpe.com/PDF/tx-happiness.pdf>
- Collins English Dictionary: complete and unabridged (6<sup>th</sup> edition)*. (2003). Great Britain: Williams Collins & Sons & Co. Ltd.
- Combrinck, I. (2004). *Die verkenning van die dinamiek rondom spirituele fiksheid en vroue met substansie-probleme in die herstelproses* [The exploration of the dynamics surrounding spiritual fitness and women in recovery from substance abuse problems]. Unpublished master's thesis, Stellenbosch University, South Africa.

- Connor, K. (2001). Animal-Assisted Therapy: An In-depth look. *Dimensions of Critical Care Nursing*, 20(3), 20-26. Retrieved March 06, 2003 from <http://www.global.ebscohost.com/>
- Corsini, R. (2002). *The Dictionary of Psychology*. Philadelphia: Brunner-Routledge.
- Cowen, E.L. (1991). In pursuit of wellness. *American Psychologist*, 46(4), 404-408.
- Cox, R.H. (1998). *Sport psychology: concepts and application* (4<sup>th</sup> ed.). Boston: McGraw-Hill Companies, Inc.
- Creswell, J.W. (1998). *Qualitative inquiry and Research Design: Choosing among five traditions*. Thousand Oaks: Sage Publications, Inc.
- Delta Society© (n.d.). *About Animal-Assisted Activities & Animal-Assisted Therapy*. Retrieved on March 02, 2003 from <http://www.deltasociety.org/aboutaaat.htm>.
- Davies, S.P. (1991). *Physical disability and psychological adjustment: a comparison of traumatically disabled, non-traumatically disabled and non-disabled groups*. Unpublished master's thesis, University of Port Elizabeth, South Africa.
- De Jager, H.C. (1988). *Die invloed van troeteldiere op die gedrag van geïntitutionaliseerde verstandelik gestremde persone* [The influence of pets on the behaviour of institutionalised mental impaired persons]. Unpublished master's thesis, Potchefstroom University, South Africa.
- Dempsey, I., & Foreman, P. (1997). Toward a clarification of empowerment as an outcome of disability service provision. *International Journal of Disability, Development and Education*, 44(4), 287-303.
- Deshen, S., & Deshen, H. (1989). On social aspects of the usage of guide-dogs and long canes. Retrieved on June 18, 2004 from the EbscoHost database.
- Devlieger, P.J. (1999). Frames of Reference in African Proverbs on Disability. *International Journal of Disability, Development and Education*, 46(4), p. 439 – 449).
- Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95(3), 542-575.
- Diener, E. (2000). Subjective well-being: the science of happiness and a proposal for a national index. *American Psychologist*, 55(1), 34-43
- Diener, E., & Diener, M. (1995). Cross-cultural correlates of life satisfaction and self-esteem. *Journal of Personality and Social Psychology*, 68(4), 653-663.
- Diener, E., Emmons, R.A., Larsen, R.J., & Griffin, S. (1985). The Satisfaction with life scale. *Journal of Personality Assessment*, 49, 71-75.
- Diener, E., & Lucas, R.E. (2000). Subjective emotional well-being. In M.Lewis & J.M. Haviland (Eds.), *Handbook of Emotions* (2<sup>nd</sup> ed.), (pp.325-337). Retrieved on

August 08, 2004 from World Wide Web:  
<http://s.psych.uiuc.edu/~ediener/hottopic/paper2.html>

- Diener, E., Sapyta, J.J., & Suh, E. (1998). Subjective well-being is essential to well-being. *Psychological Inquiry*, 9, 33-37. Retrieved on February 03, 2005 from Ebscohost on-line database on World Wide Web:  
<http://web7.epnet.com/externatframe.asp>
- Diener, E., Suh, E.M., Lucas, R.E., & Smith, H.L. (1999). Subjective well-being: three decades of progress. *Psychological Bulletin*, 125(2), 276-302.
- Dog-Play (n.d.). *Pets in prisons and rehabilitation programs*. Retrieved on April 27, 2004 from <http://www.dog-play.com/program.html>
- Duncan, S.L., & Allen, K. (2000). Service animals and their roles in enhancing independence, quality of life, and employment for people with disabilities. In A. Fine (Edit.), *Handbook on Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice* (pp.303-324). San Diego: Academic Press.
- Eddy, J., Hart, L.A., & Boltz, R.P. (1988). The effects of service dogs on social acknowledgments of people in wheelchairs. *The Journal of Psychology*, 122(1), 39-45.
- Elliot, T.R., Kurylo, M., & Rivera, P. (2002). Positive growth following acquired physical disability. In C.R. Snyder & S.J. Lopez (Eds.), *Handbook of Positive Psychology* (pp.687-699). Oxford & New York: Oxford University Press.
- Encyclopaedia Britannica (1997). *Lorenz, Konrad*. Retrieved on March 03, 2005 from [http://www.britannica.com/nobel/micro/356\\_65.html](http://www.britannica.com/nobel/micro/356_65.html).
- Feldman, R.S. (1995). *Social Psychology*. New Jersey: Prentice Hall, Inc.
- Fine, A.H. (2000). Animals and therapists: incorporating animals in outpatient psychotherapy. In A. Fine (Edit.), *Handbook on Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice* (pp.179-211). San Diego: Academic Press.
- Francescato, D. (2003). Empowerment. In R. Fernández-Ballesteros (Edit), *Encyclopedia of Psychological Assessment* (Vol.1), (pp.361-364). London: SAGE Publications Ltd.
- Frankl, V. (1959). *Man's search for meaning: from death-camp to Existentialism*. Boston: Beacon Press.
- Friedman, E. (2000). The animal-human bond: health and wellness. In A. Fine (Edit.), *Handbook on Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice* (pp.41-58). San Diego: Academic Press.

- Friedmann, E., Katcher, A.H., Lynch, J.J., & Thomas, S.A. (1980). Animal companions and one-year survival of patients after discharge from a coronary care unit. *Public Health Reports*, 95, 301-312.
- Fujita, F., Diener, E., & Sandvik, E. (1991). Gender differences in negative affect and well-being: the case for emotional intensity. *Journal of Personality and Social Psychology*, 61(3), 427-434.
- Gillies, R.M., Knight, K., & Baglioni, A.J. (1998). World of work: perceptions of people who are blind or vision impaired. *International Journal of Disability, Development and Education*, 45(4), 397-409.
- Giorgi, A.P., & Giorgi, B.M. (2003). The descriptive phenomenological psychological method. In P.M. Camic, J.E. Rhodes & L. Yardley (Eds.), *Qualitative Research in Psychology: Expanding perspectives in methodology and design* (243-273). Washington: American Psychological Association.
- Golin, M., & Walsh, T. (1994). Heal emotions with fur, feathers and love. *Prevention*, 46(12), 80-84. Retrieved on March 03, 2005 from InfoTrac OneFile database.
- Graziano, A.M., & Raulin, M.L. (2000). *Research Methods: A process of inquiry* (4<sup>th</sup> Edition). Needham Heights: Allyn & Bacon.
- Guide dogs for the Blind, Inc. (1999). *At a glance: An Educational Resource Guide*. Retrieved March 03, 2004, available from <http://www.guidedogs.com>.
- Guide dogs for the Blind, Inc. (n.d.). *Student Training & Services – Retiring a Guide Dog*. Retrieved August 31, 2005, from <http://www.guidedogs.com/serv-retiring.html>.
- Guide Dog Foundation for the Blind (2002). *Market research study sheds light on Guide dog usage*. Retrieved August 16, 2004, from <http://www.guidedog.org/media/pressrel/mrktRsch.pdf>.
- Hart, L.A. (2000) Methods, Standards, Guidelines, and Considerations in Selecting Animal for Animal-Assisted Therapy. In A. Fine (Edit.), *Handbook on Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice* (81-97). United States of America: Academic Press.
- Headey, B.W., & Wearing, A.J. (1989). Personality, life events, and subjective well-being: toward a dynamic equilibrium model. *Journal of Personality and Social Psychology*, 57, 731-739.
- Heimlich, K. (2001). Animal-assisted therapy and the severely disabled child. *The Journal of Rehabilitation*, 67(4), 48-54. Retrieved March 03, 2005 from InfoTrac OneFile database.
- Hensyl, W.R. (Ed.). (1990). *Stedman's Medical Dictionary* (25<sup>th</sup> ed.). Baltimore: Williams & Wilkins.

- Hergenhahn, B.R., & Olson, M.H. (1999). *An introduction to theories of personality* (5<sup>th</sup> ed.). New Jersey: Prentice-Hall, Inc.
- Hills, P., & Argyle, M. (2002). The Oxford Happiness Questionnaire: a compact scale for the measurement of psychological well-being. *Personality and Individual Differences*, 33, 1073-1082.
- Hodapp, R.M. (1998). *Development and disabilities: intellectual, sensory and motor impairments*. New York: Cambridge University Press.
- Honsch, J.D. (n.d.). A helping paw: guide dogs provide the blind with vision, independence, and love. Retrieved August 09, 2004 from <http://www.workingdogs.com/vcguidedog.htm>.
- Imrie, R. (1996). *Disability and the City: International Perspectives*. London: Paul Chapman Publishing Ltd.
- Integrated National Disability Strategy of the Government of National Unity. (1996). *Government Gazette*. (Vol. 369, No. 17038).
- Kafka, G.J., & Kozma, A. (2002). The construct validity of Ryff's Scales of Psychological Well-being (SPWB) and their relationship to measures of subjective well-being. *Social Indicators Research*, 57, 171-190.
- Kammann, R., & Flett, R. (1983). Affectometer 2: a scale to measure current levels of general happiness. *Australian Journal of Psychology*, 35, 259-265.
- Keyes, C.L.M., Shmotkin, D., Ryff, C.D. (2002). Optimizing well-being: the empirical encounter of two traditions. *Journal of Personality and Social Psychology*, 82(6), 1007-1022.
- King, G.A., Shultz, I.Z., Steel, K., & Gilpin, M. (1993). Self-evaluation and self-concept of adolescents with physical disabilities [Abstract], *American Journal of Occupational Therapy*, 47(2), 132-140. Retrieved January 27, 2005 from PsycINFO database.
- Kishida, Y., Kitamura, T., Gatayama, R., Matsuoka, T., Miura, S., Yamabe, K. (2004). Ryff's psychological well-being inventory: factorial structure and life history correlates among Japanese university students. [Abstract], *Psychological Report*, 94(1), 83-103. Retrieved January 27, 2005 from Pubmed database.
- Lai, J. (1998). *Literature review: Pet facilitated therapy in correctional institutions*. Canada. Correctional Service of Canada (1998). Retrieved September 13, 2004, available from <http://www.csc-scc.gc.ca/text/prgrm/fsw/pet/pet-c.shtml/#TopofPage>.
- Lane, D.R., McNicholas, J., & Collis, G.M. (1998). Dogs for the disabled: benefits to recipients and welfare of the dog. *Applied Animal Behaviour Science*, 59, 49-60. Retrieved August 30, 2004 from ScienceDirect database.

- Lindemann, J.E. (1981). *Psychological and behavioral aspects of physical disability: a manual for health practitioners*. New York: Plenum Press.
- Lindemann, J.E., & Boyd, R.D. (1981). Myelomeningocele (Spina Bifida). In J.E. Lindemann (Edit.), *Psychological and behavioral aspects of physical disability: a manual for health practitioners* (pp.243-272). New York: Plenum Press.
- Linley, P.A., & Joseph, S. (2004). Applied positive psychology: a new perspective for professional practice. In P.A. Liney & S. Joseph (Eds.), *Positive Psychology in Practice*, (pp.68-83). New Jersey: John-Wiley & Sons, Inc.
- Lopez, S.J., Prosser, E.C., Edwards, L.M., Magyar-Moe, J.L., Neufeld, J.E., & Rasmussen, H.N. (2002). Putting positive psychology in a multicultural context. In C.R. Snyder & S.J. Lopez (Eds.), *Handbook of Positive Psychology* (pp.700-714). Oxford & New York: Oxford University Press.
- Mastekaasa, A. (1995). Age variations in the suicide rates and self-reported subjective well-being of married and never married persons. *Journal of Community & Applied Social Psychology*, 5, 21-39. Retrieved March 31, 2005 from Ebscohost Research Database.
- Mader, B., Hart, L.A., Bergen, B. (1989). Social acknowledgments for children with disabilities: effects of service dogs. *Child Development*, 60, 1529-1534.
- Maddux, J.E. (2002). Self-efficacy: the power of believing you can. In C.R. Snyder & S.J. Lopez (Eds.), *Handbook of Positive Psychology* (pp.277-287). Oxford & New York: Oxford University Press.
- Mallon, G.P. (1994). Cow as co-therapist: utilization of farm animals as therapeutic aids with children in residential treatment. *Child and Adolescent Social Work Journal*, 11, 455-474.
- Maslow, A.H. (1954). *Motivation and Personality*. New York: Harper & Row.
- McClain, C.V. (2002). Governance and legislation in South Africa: a contemporary overview. *Disability World*, 12. Retrieved August 16, 2004 from [http://www.disabilityworld.org/01-03\\_02/gov/southafrica.shtml](http://www.disabilityworld.org/01-03_02/gov/southafrica.shtml)
- McGrath, J.E., & Johnson, B.A. (2003). Methodology makes meaning: how both qualitative and quantitative paradigms shape evidence and its interpretation. In P.M. Camic, J.E. Rhodes & L. Yardley (Eds.), *Qualitative Research in Psychology: Expanding perspectives in methodology and design*, (pp.31-48). Washington: American Psychological Association.
- Miller, J. & Connor, K. (2000). Going to the dogs...for help. *Nursing*, 30(11), 65-67. Retrieved March 06, 2003 from <http://www.global.ebscohost.com/>
- Moustakas, C. (1994). *Phenomenological Research Methods*. California: Sage Publications, Inc.

- Mosby's *Medical, Nursing & Allied Health Dictionary* (6<sup>th</sup> edition). (2002). Missouri: Mosby.
- Mrug, S., & Wallander, J.L. (2002). Self-concept of young people with physical disabilities: does integration play a role? *International Journal of Disability, Development and Education*, 49(3), 267-280.
- Mutrie, N. & Faulkner, G. (2004). Physical activity: positive psychology in motion. In P.A. Liney & S. Joseph (Eds.), *Positive Psychology in Practice*, (pp.68-83). New Jersey: John-Wiley & Sons, Inc.
- Myers, D.G. (2000). The funds, friends, and faith of happy people. *American Psychologist*, 55(1), 56-67.
- Nicholson, J., Kemp-Wheeler, S., & Griffiths, D. (1995). Distress arising from the end of a guide dog partnership. [Abstract]. *Anthrozoos*, 8(2), 100-110. Retrieved August 30, 2004 from PsycINFO database.
- Odendaal, J. (2002). *Pets and our Mental Health: The Why, the What and the How*. New York: Vantage Press.
- Odendaal, J. (2003). *Dog Behaviour Course*. (Available from the Ethology Consultancy, P.O.Box 17855, Pretoria North, 0116, South Africa)
- Odendaal, J. (2004). Animal-assisted therapy – magic or medicine? *Animals in Focus*, 23, 19.
- Odendaal, J. (n.d.). Animals as therapeutic facilitators – theory and neurophysiology. Retrieved May 03, 2004 from <http://www.ethology.co.za/academic.htm>
- Panzer, K., & Sheridan, L. (2000). Effects of animal-assisted therapy on depression and morale among nursing home residents (Emperical study dissertation, The State University of New Jersey). *Dissertation Abstracts International*, 61(1-B), 544.
- Parslow, R.A., Jorm, A.F., Christensen, H., Rodgers, B., & Jacomb, P. (2005). Pet ownership and health in older adults: findings from a survey of 2,551 community-based Australians aged 60-64. *Gerontology*, 51(1), 40-47.
- Pavot, W., & Diener, E. (2003). Well-being (including life satisfaction). In R. Fernández-Ballesteros (Edit), *Encyclopedia of Psychological Assessment* (Vol.1), (pp.1097-1101). London: SAGE Publications Ltd.
- Pavot, W., & Diener, E. (2004). Findings on subjective well-being: applications to public policy, clinical interventions, and education. In P.A. Lindey & S. Joseph (Eds.), *Positive Psychology in Practice*, (pp.679-688). New Jersey: John Wiley & Sons, Inc.
- Peterson, C. (2000). The future of optimism. *American Psychologist*, 55(1), 44-55.



- Philpott, S. (2004). *Budgeting for children with disabilities in South Africa*. Cape Town: Idasa.
- Potgieter, J.R. (1997). *Sportsielkunde: teorie en praktyk*. University of Stellenbosch: Institute for Sport and Movement studies.
- Pretorius-Heuchert, J.W., & Ahmed, R. (2001). Community psychology: past, present, and future. In M. Seedat (Edit.), *Community psychology – Theory, method and practice: South African and other perspectives*, (pp.17-36). Cape Town: Oxford University Press Southern Africa.
- Ramphela, M. (1997). Foreword. In Foster, D., Freeman, M., & Pillay, Y. (Eds.), *Mental Health Policy Issues for South Africa* (i – ii). Pinelands: Medical Association of South Africa Multimedia Publications.
- Reynell, J.K. (1978). Developmental patterns of visually handicapped children. *Child: Care, Health and Development*, 4, 291-303.
- Rosenbaum, M., & Jaffe, Y. (1983). Learned helplessness: the role of individual differences in learned resourcefulness. *British Journal of Social Psychology*, 22, 215-225.
- Ruini, C., Ottolini, F., Rafanelli, C., Ryff, C., & Fava, G.A. (2003). Italian validation of Psychological Well-being Scales (PWB) [Abstract]. *Rivista-di-Psichiatria*, 38(3), 117-130. Retrieved January 27, 2005 from PsycINFO database.
- Rusalem, H. (1972). *Coping With the Unseen Environment: An Introduction to the Vocational Rehabilitation of Blind Persons*. Columbia: Teachers College Press.
- Ryan, R.M., & Deci, E.L. (2000). On happiness and human potentials: a review of research on hedonic and eudaimonic well-being. *Annual Review of Psychology*, 141-164. Retrieved January 24, 2005 from InfoTrac OneFile On-line database on the World Wide Web: <http://web5.infotrac.galegroup.com/itw.infomark/>
- Ryff, C.D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57(6), 1069-1081.
- Ryff, C.D., & Keyes, C.L.M. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology*, 69(4), 719-727.
- Ryff, C.D., & Singer, B. (1996). Psychological well-being: meaning, measurement, and implications for Psychotherapy research. *Psychotherapy and Psychosomatics*, 65, 14-23.
- Ryff, C.D., & Singer, B. (2000). From social structure to biology: integrative science in pursuit of human health and well-being. In C.R. Snyder & S.J. Lopez (Eds.), *Handbook of Positive Psychology* (pp.541-554). Oxford & New York: Oxford University Press.

- Sagiv, L., Roccas, S., & Hazan, O. (2004). Value pathways to well-being: healthy values, valued goal attainment, and environmental congruence. In P.A. Liney & S. Joseph (Eds.), *Positive Psychology in Practice*, (pp.68-83). New Jersey: John-Wiley & Sons, Inc.
- Scarpati, S. (2003). Test Accommodation for Disabilities. In R. Fernandez-Ballesteros (Edit.), *Encyclopedia of Psychological Assessment, Volume 2* (957 – 960). Great Britian: SAGE Publications.
- Seligman, M.E.P. (1998). Building human strength: psychology's forgotten mission. *APA Monitor*, 29(1). Retrieved January 27, 2005 from <http://www.apa.org/montior/jan98/pres.html>
- Seligman, M.E.P. (2002). Positive psychology, positive prevention, and positive therapy. In C.R. Snyder & S.J. Lopez (Eds.), *Handbook of Positive Psychology* (pp.3-9). Oxford & New York: Oxford University Press.
- Seligman, M.E.P., & Csikszentmihalyi, M. (2000). Positive psychology: an introduction. *American Psychologist*, 55(1), 5-14.
- Serpell, J.A. (1996). *In the company of animals – a study of human-animal relationships*. Cambridge University Press: Cambridge.
- Serpell, J.A. (2000). Creatures of the unconscious: companion animal as mediators [Abstract]. In A.L. Podberscek, E.S. Paul, et al. (Eds.), *Companion animals and us: Exploring the relationships between people and pets* (pp.108-121). Retrieved March 02, 2003 from PsycINFO database.
- Serpell, J., Coppinger, R., & Fine, A.H. (2000). The welfare of assistance and therapy animals: an ethical comment. . In A. Fine (Edit.), *Handbook on Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice* (pp.415-431). San Diego: Academic Press.
- Siegel, J.M. (1993). Companion animals: in sickness and in health. *Journal of Social Issues*, 49, 157-167.
- Snyder, C.R., Harris, C., Anderson, J.R., Holleran, S.A., Irving, L.M., Sigmon, S.T., Yoshinobu, L., Gibb, J., Langelle, C., & Harney, P. (1991). The will and the ways: development and validation of an individual-differences measure of hope. *Journal of Personality and Social Psychology*, 60(4), 570-585.
- Soutar-Freeman, B.M. (2003). Animal-assisted therapy program for children identified with behavioural problems [Abstract]. *Dissertation Abstracts International*, 63(11-B), 5503.
- South African Revenue Service. (2003, September 17). SARS leads in employing the blind. *SouthAfrica.info*. Retrieved July 21, 2004, from [http://www.safrica.info/what\\_happening/news/blindtraining\\_150903.htm](http://www.safrica.info/what_happening/news/blindtraining_150903.htm)

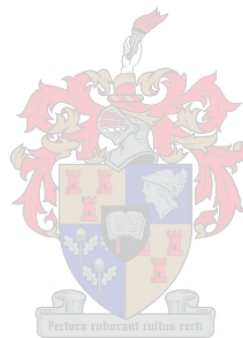
- Steffens, M.C., & Bergler, R. (1998). Blind people and their dogs: An empirical study on the changes in everyday life, in self-experience, and in communication [Abstract], In D.C. Turner & C.C. Wilson (Eds.), *Companion animals in human health* (pp.149-157). Retrieved January 27, 2005 from PsycINFO database.
- Strümpfer, D.J.W. (1990). Salutogenesis: A new paradigm. *South African Journal of Psychology*, 20(4), 265-276.
- Strümpfer, D.J.W. (1995). The origins of health and strength: from 'salutogenesis' to 'fortigenesis'. *South African Journal of Psychology*, 25(2), 81-89.
- Strümpfer, D.J.W. (2002). Psychofortology: review of a new paradigm marching on. Retrieved August 30, 2004, from <http://general.rau.ac.za/psych/Reading/PYCHOFORTOLOGY.doc>.
- Stuart, A. (1999). *An evaluation of the physical and psychological effects of a riding therapy programme for cerebral palsied children*. Unpublished master's thesis, Stellenbosch University, South Africa.
- Suh, E., Diener, E., Oishi, S., & Triandis, H.C. (1998). The shifting basis of life satisfaction judgments across cultures: emotions versus norms. *Journal of Personality and Social Psychology*, 74(2), 482-493.
- Terdal, L.G. (1981). Epilepsy. In J.E. Lindemann (Edit.), *Psychological and behavioral aspects of physical disability: a manual for health practitioners* (pp.147-178). New York: Plenum Press.
- The South African Guide-dog Association for the Blind (2003). *1953-2003: Friend in Harness*. [Brochure].
- The South African Guide-dogs Association for the blind (n.d.<sup>1</sup>). *The gift that keeps on giving: 50 years of the South African Guide-Dogs Association for the blind*. [Brochure].
- The South African Guide-dogs Association for the blind (n.d.<sup>2</sup>). *The gift that keeps on giving*. [Brochure].
- Tipton, R.M., & Worthington, E.L. (1984). The measurement of generalized self-efficacy: a study of construct validity. *Journal of Personality Assessment*, 48(5), 545-548.
- Turner, N., Barling, J., & Zacharatos, A. (2002). Positive psychology at work. . In C.R. Snyder & S.J. Lopez (Eds.), *Handbook of Positive Psychology* (pp.715-726). Oxford & New York: Oxford University Press.
- Valentine, D.P., Kiddoo, M., & LaFleur, B. (1993). Psychosocial implications of service dog ownership for people who have mobility or hearing impairments. *Social Work in Health Care*, 19(1), 109-125.

- Van Dierendonck, D. (2004). The construct validity of Ryff's Scales of Psychological Well-being and its extension with spiritual well-being [Abstract]. *Personality and Individual Differences*, 36(3), 629-643. Retrieved January 27, 2005 from PsycINFO database.
- Van Heerden, M. (2001). *Mens-dierinteraksie as selfstandige studieveld: 'n multidissiplinere uitdaging* [Human-animal interaction as independent research field: a multi-disciplinary challenge]. Unpublished doctoral dissertation, University of Pretoria, South Africa.
- Van Manen, M. (1984). *Doing phenomenological research and writing: An introduction* (Monograph 7: Curriculum Praxis monograph series). University of Alberta, Canada.
- Vella-Brodrick, D.A., & Allen, F.C.L. (1995). Development and psychometric validation of the mental, physical, and spiritual well-being scale. *Psychological Reports*, 77, 659-674.
- Wallis, C. (2005, February). The new science of happiness. *Time*, 165(6), 38-44.
- Waterman, (1993). Two conceptions of happiness: contrasts of personal expressiveness (eudaimonia) and hedonic enjoyment. *Journal of Personality and Social Psychology*, 64(8), 678-691.
- Webster, A., & Roe, J. (1998). *Children with visual impairments: social interaction, language and learning*. London: Routledge.
- Wiggett, C. (2003). *The effects of Animal-assisted Visitations on loneliness and depression in nursing home residents*. Unpublished manuscript, University of Stellenbosch, South Africa.
- Wilson, W. (1967). Correlates of avowed happiness. *Psychological Bulletin*, 67, 294-306.
- Wissing, M.P., & Van Eeden, C. (1997). *Psychological well-being: a fortigenic conceptualization and empirical clarification*. Paper presented at the 3<sup>rd</sup> Annual Congress of the Psychological Society of South Africa, Durban.
- Wissing, M.P., & Van Eeden, C. (2002). Empirical clarification of the nature of psychological well-being. *South African Journal of Psychology*, 32(1), 32-44.
- Wolffe, K.E., Roessler, R.T., & Schriener, K.F. (1992). Employment concerns of people with blindness or visual impairments. *Journal of Visual Impairment and Blindness*, 86, 185-187.
- Wood, L., Giles-Corti, B., & Bulsara, M. (2005). The pet connection: Pets as a conduit for social capital? *Social Science & Medicine*, 61(6), 1159-1173. Retrieved on June 21, 2005 from Science Direct database.

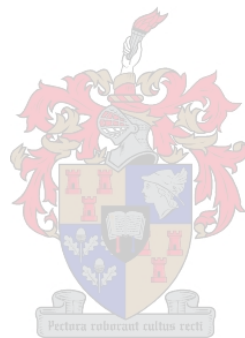
World Health Organization (1999). *Definition of Health*. Retrieved January 28, 2005 from <http://www.who.int/aboutwho/en/definition.html>.

Wright, B.A. (1960). *Physical Disability – a Psychological approach*. New York: Harper & Row, Inc.

Young, J.L. (1997). Positive experiences with dogs: an important addition to the curriculum for blind and visually impaired children. *Re-View*, 29(2), 55-61. Retrieved on June 18, 2004 from EBSCOhost database.



# Appendix A



The following set of questions deals with how you feel about yourself and your life. Please remember that there are no right or wrong answers.

Circle the number that best describes your present agreement or disagreement with each statement.	Strongly Disagree	Disagree Somewhat	Disagree Slightly	Agree Slightly	Agree Somewhat	Strongly Agree
1. Most people see me as loving and affectionate.	1	2	3	4	5	6
2. Sometimes I change the way I act or think to be more like those around me.	1	2	3	4	5	6
3. In general, I feel I am in charge of the situation in which I live.	1	2	3	4	5	6
4. I am not interested in activities that will expand my horizons.	1	2	3	4	5	6
5. I feel good when I think of what I've done in the past and what I hope to do in the future.	1	2	3	4	5	6
6. When I look at the story of my life, I am pleased with how things have turned out.	1	2	3	4	5	6
7. Maintaining close relationships has been difficult and frustrating for me.	1	2	3	4	5	6
8. I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people.	1	2	3	4	5	6
9. The demands of everyday life often get me down.	1	2	3	4	5	6
10. In general, I feel that I continue to learn more about myself as time goes by.	1	2	3	4	5	6
11. I live life one day at a time and don't really think about the future.	1	2	3	4	5	6
12. In general, I feel confident and positive about myself.	1	2	3	4	5	6
13. I often feel lonely because I have few close friends with whom to share my concerns.	1	2	3	4	5	6
14. My decisions are not usually influenced by what everyone else is doing.	1	2	3	4	5	6

Circle the number that best describes your present agreement or disagreement with each statement.	Strongly Disagree	Disagree Somewhat	Disagree Slightly	Agree Slightly	Agree Somewhat	Strongly Agree
15. I do not fit very well with the people and the community around me.	1	2	3	4	5	6
16. I am the kind of person who likes to give new things a try.	1	2	3	4	5	6
17. I tend to focus on the present, because the future nearly always brings me problems.	1	2	3	4	5	6
18. I feel like many of the people I know have gotten more out of life than I have.	1	2	3	4	5	6
19. I enjoy personal and mutual conversations with family members or friends.	1	2	3	4	5	6
20. I tend to worry about what other people think of me.	1	2	3	4	5	6
21. I am quite good at managing the many responsibilities of my daily life.	1	2	3	4	5	6
22. I don't want to try new ways of doing things - my life is fine the way it is.	1	2	3	4	5	6
23. I have a sense of direction and purpose in life.	1	2	3	4	5	6
24. Given the opportunity, there are many things about myself that I would change.	1	2	3	4	5	6
25. It is important to me to be a good listener when close friends talk to me about their problems.	1	2	3	4	5	6
26. Being happy with myself is more important to me than having others approve of me.	1	2	3	4	5	6
27. I often feel overwhelmed by my responsibilities.	1	2	3	4	5	6
28. I think it is important to have new experiences that challenge how you think about yourself and the world.	1	2	3	4	5	6
29. My daily activities often seem trivial and unimportant to me.	1	2	3	4	5	6
30. I like most aspects of my personality.	1	2	3	4	5	6
31. I don't have many people who want to listen when I need to talk.	1	2	3	4	5	6

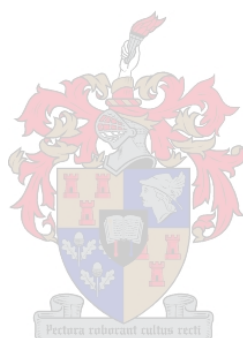


Circle the number that best describes your present agreement or disagreement with each statement.	Strongly Disagree	Disagree Somewhat	Disagree Slightly	Agree Slightly	Agree Somewhat	Strongly Agree
32. I tend to be influenced by people with strong opinions.	1	2	3	4	5	6
33. If I were unhappy with my living situation, I would take effective steps to change it.	1	2	3	4	5	6
34. When I think about it, I haven't really improved much as a person over the years.	1	2	3	4	5	6
35. I don't have a good sense of what it is I'm trying to accomplish in life.	1	2	3	4	5	6
36. I made some mistakes in the past, but I feel that all in all everything has worked out for the best.	1	2	3	4	5	6
37. I feel like I get a lot out of my friendships.	1	2	3	4	5	6
38. People rarely talk to me into doing things I don't want to do.	1	2	3	4	5	6
39. I generally do a good job of taking care of my personal finances and affairs.	1	2	3	4	5	6
40. In my view, people of every age are able to continue growing and developing.	1	2	3	4	5	6
41. I used to set goals for myself, but that now seems like a waste of time.	1	2	3	4	5	6
42. In many ways, I feel disappointed about my achievements in life.	1	2	3	4	5	6
43. It seems to me that most other people have more friends than I do.	1	2	3	4	5	6
44. It is more important to me to "fit in" with others than to stand alone on my principles.	1	2	3	4	5	6
45. I find it stressful that I can't keep up with all of the things I have to do each day.	1	2	3	4	5	6
46. With time, I have gained a lot of insight about life that has made me a stronger, more capable person.	1	2	3	4	5	6
47. I enjoy making plans for the future and working to make them a reality.	1	2	3	4	5	6
48. For the most part, I am proud of who I am and the life I lead.	1	2	3	4	5	6

Circle the number that best describes your present agreement or disagreement with each statement.	Strongly Disagree	Disagree Somewhat	Disagree Slightly	Agree Slightly	Agree Somewhat	Strongly Agree
49. People would describe me as a giving person, willing to share my time with others.	1	2	3	4	5	6
50. I have confidence in my opinions, even if they are contrary to the general consensus.	1	2	3	4	5	6
51. I am good at juggling my time so that I can fit everything in that needs to be done.	1	2	3	4	5	6
52. I have a sense that I have developed a lot as a person over time.	1	2	3	4	5	6
53. I am an active person in carrying out the plans I set for myself.	1	2	3	4	5	6
54. I envy many people for the lives they lead.	1	2	3	4	5	6
55. I have not experienced many warm and trusting relationships with others.	1	2	3	4	5	6
56. It's difficult for me to voice my own opinions on controversial matters.	1	2	3	4	5	6
57. My daily life is busy, but I derive a sense of satisfaction from keeping up with everything.	1	2	3	4	5	6
58. I do not enjoy being in new situations that require me to change my old familiar ways of doing things.	1	2	3	4	5	6
59. Some people wander aimlessly through life, but I am not one of them.	1	2	3	4	5	6
60. My attitude about myself is probably not as positive as most people feel about themselves.	1	2	3	4	5	6
61. I often feel as if I'm on the outside looking in when it comes to friendships.	1	2	3	4	5	6
62. I often change my mind about decisions if my friends or family disagree.	1	2	3	4	5	6
63. I get frustrated when trying to plan my daily activities because I never accomplish the things I set out to do.	1	2	3	4	5	6
64. For me, life has been a continuous process of learning, changing, and growth.	1	2	3	4	5	6

Circle the number that best describes your present agreement or disagreement with each statement.	Strongly Disagree	Disagree Somewhat	Disagree Slightly	Agree Slightly	Agree Somewhat	Strongly Agree
65. I sometimes feel as if I've done all there is to do in life.	1	2	3	4	5	6
66. Many days I wake up feeling discouraged about how I have lived my life.	1	2	3	4	5	6
67. I know that I can trust my friends, and they know they can trust me.	1	2	3	4	5	6
68. I am not the kind of person who gives in to social pressures to think or act in certain ways.	1	2	3	4	5	6
69. My efforts to find the kinds of activities and relationships that I need have been quite successful.	1	2	3	4	5	6
70. I enjoy seeing how my views have changed and matured over the years.	1	2	3	4	5	6
71. My aims in life have been more a source of satisfaction than frustration to me.	1	2	3	4	5	6
72. The past had its ups and downs, but in general, I wouldn't want to change it.	1	2	3	4	5	6
73. I find it difficult to really open up when I talk with others.	1	2	3	4	5	6
74. I am concerned about how other people evaluate the choices I have made in my life.	1	2	3	4	5	6
75. I have difficulty arranging my life in a way that is satisfying to me.	1	2	3	4	5	6
76. I gave up trying to make big improvements or changes in my life a long time ago.	1	2	3	4	5	6
77. I find it satisfying to think about what I have accomplished in life.	1	2	3	4	5	6
78. When I compare myself to friends and acquaintances, it makes me feel good about who I am.	1	2	3	4	5	6
79. My friends and I sympathize with each other's problems.	1	2	3	4	5	6
80. I judge myself by what I think is important, not by the values of what others think is important.	1	2	3	4	5	6

Circle the number that best describes your present agreement or disagreement with each statement.	Strongly Disagree	Disagree Somewhat	Disagree Slightly	Agree Slightly	Agree Somewhat	Strongly Agree
81. I have been able to build a home and a lifestyle for myself that is much to my liking.	1	2	3	4	5	6
82. There is truth to the saying that you can't teach an old dog new tricks.	1	2	3	4	5	6
83. In the final analysis, I'm not so sure that my life adds up to much.	1	2	3	4	5	6
84. Everyone has their weaknesses, but I seem to have more than my share.	1	2	3	4	5	6



# Appendix B



I'm currently a Master's student at the University of Stellenbosch. I'm doing research on certain psychological aspects of blindness. Your participation in this study is greatly appreciated.

Please answer the following questions before proceeding to the questionnaire on page 2. Your answers must be recorded on the same line as the question.

Age:

Gender:

Cultural background:

Province of residence:

Age of onset of blindness:

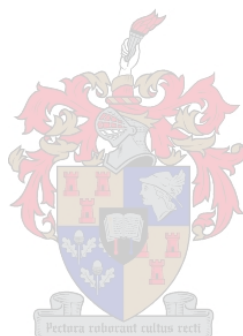
Cause of blindness:

Do you own a guide dog:

Highest level of education:

Current employment:

How many times a week do you exercise (any type of exercise longer than 20 minutes):



Thank you, you can now proceed to the questionnaire on page 2.

The following set of questions (84 in total) deals with how you feel about yourself and your life. Please remember that there are no right or wrong answers.

Read through each sentence and then put the number option that you choose (1 to 6) after the full stop of each sentence. Choose the number option that best describes your present agreement or disagreement with each statement (please choose only one option per statement).

1 = Strongly Disagree

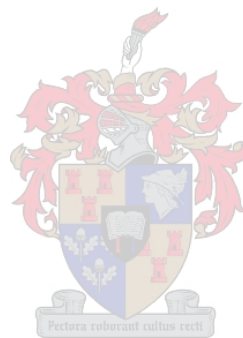
2 = Moderately Disagree

3 = Disagree Slightly

4 = Agree Slightly

5 = Moderately Agree

6 = Strongly Agree



Questionnaire begins:

1. Most people see me as loving and affectionate.
2. Sometimes I change the way I act or think to be more like those around me.
3. In general, I feel I am in charge of the situation in which I live.
4. I am not interested in activities that will expand my horizons.
5. I feel good when I think of what I've done in the past and what I hope to do in the future.
6. When I look at the story of my life, I am pleased with how things have turned out.

7. Maintaining close relationships has been difficult and frustrating for me.
8. I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people.
9. The demands of everyday life often get me down.
10. In general, I feel that I continue to learn more about myself as time goes by.
11. I live life one day at a time and don't really think about the future.
12. In general, I feel confident and positive about myself.
13. I often feel lonely because I have few close friends with whom to share my concerns.
14. My decisions are not usually influenced by what everyone else is doing.
15. I do not fit very well with the people and the community around me.
16. I am the kind of person who likes to give new things a try.
17. I tend to focus on the present, because the future nearly always brings me problems.
18. I feel like many of the people I know have gotten more out of life than I have.
19. I enjoy personal and mutual conversations with family members or friends.
20. I tend to worry about what other people think of me.
21. I am quite good at managing the many responsibilities of my daily life.
22. I don't want to try new ways of doing things - my life is fine the way it is.
23. I have a sense of direction and purpose in life.
24. Given the opportunity, there are many things about myself that I would change.
25. It is important to me to be a good listener when close friends talk to me about their problems.



26. Being happy with myself is more important to me than having others approve of me.
27. I often feel overwhelmed by my responsibilities.
28. I think it is important to have new experiences that challenge how you think about yourself and the world.
29. My daily activities often seem trivial and unimportant to me.
30. I like most aspects of my personality.
31. I don't have many people who want to listen when I need to talk.
32. I tend to be influenced by people with strong opinions.
33. If I were unhappy with my living situation, I would take effective steps to change it.
34. When I think about it, I haven't really improved much as a person over the years.
35. I don't have a good sense of what it is I'm trying to accomplish in life.
36. I made some mistakes in the past, but I feel that all in all everything has worked out for the best.
37. I feel like I get a lot out of my friendships.
38. People rarely talk to me into doing things I don't want to do.
39. I generally do a good job of taking care of my personal finances and affairs.
40. In my view, people of every age are able to continue growing and developing.
41. I used to set goals for myself, but that now seems like a waste of time.
42. In many ways, I feel disappointed about my achievements in life.
43. It seems to me that most other people have more friends than I do.
44. It is more important to me to "fit in" with others than to stand alone on my principles.

45. I find it stressful that I can't keep up with all of the things I have to do each day.
46. With time, I have gained a lot of insight about life that has made me a stronger, more capable person.
47. I enjoy making plans for the future and working to make them a reality.
48. For the most part, I am proud of who I am and the life I lead.
49. People would describe me as a giving person, willing to share my time with others.
50. I have confidence in my opinions, even if they are contrary to the general consensus.
51. I am good at juggling my time so that I can fit everything in that needs to be done.
52. I have a sense that I have developed a lot as a person over time.
53. I am an active person in carrying out the plans I set for myself.
54. I envy many people for the lives they lead.
55. I have not experienced many warm and trusting relationships with others.
56. It's difficult for me to voice my own opinions on controversial matters.
57. My daily life is busy, but I derive a sense of satisfaction from keeping up with everything.
58. I do not enjoy being in new situations that require me to change my old familiar ways of doing things.
59. Some people wander aimlessly through life, but I am not one of them.
60. My attitude about myself is probably not as positive as most people feel about themselves.
61. I often feel as if I'm on the outside looking in when it comes to friendships.

62. I often change my mind about decisions if my friends or family disagree.
63. I get frustrated when trying to plan my daily activities because I never accomplish the things I set out to do.
64. For me, life has been a continuous process of learning, changing, and growth.
65. I sometimes feel as if I've done all there is to do in life.
66. Many days I wake up feeling discouraged about how I have lived my life.
67. I know that I can trust my friends, and they know they can trust me.
68. I am not the kind of person who gives in to social pressures to think or act in certain ways.
69. My efforts to find the kinds of activities and relationships that I need have been quite successful.
70. I enjoy seeing how my views have changed and matured over the years.
71. My aims in life have been more a source of satisfaction than frustration to me.
72. The past had its ups and downs, but in general, I wouldn't want to change it.
73. I find it difficult to really open up when I talk with others.
74. I am concerned about how other people evaluate the choices I have made in my life.
75. I have difficulty arranging my life in a way that is satisfying to me.
76. I gave up trying to make big improvements or changes in my life a long time ago.
77. I find it satisfying to think about what I have accomplished in life.
78. When I compare myself to friends and acquaintances, it makes me feel good about who I am.
79. My friends and I sympathize with each other's problems.

80. I judge myself by what I think is important, not by the values of what others think is important.
81. I have been able to build a home and a lifestyle for myself that is much to my liking.
82. There is truth to the saying that you can't teach an old dog new tricks.
83. In the final analysis, I'm not so sure that my life adds up to much.
84. Everyone has their weaknesses, but I seem to have more than my share.

Questionnaire completed – Please attach your completed questionnaire in an email to me: [cindywiggett@mweb.co.za](mailto:cindywiggett@mweb.co.za). If you have any questions or comments, please feel free to contact me at (021) 887 9364. Thank you for your time!

