

someone to watch over me

At military and veterans' hospitals around the country, dogs are increasingly part of the cure

by CARRIE ALLAN

Sleep—like air and water—is something people rarely think about until they're unable to get any. Then, abruptly, sleep becomes a grail, its absence anguishing, affecting all elements of an insomniac's life. Lack of sleep impairs the brain's ability to learn, to grow, to process thoughts and emotions. And when those emotions are already in turmoil, a human being can experience a perfect storm of trouble.

That storm hit Christopher Hill hard. The Marine staff sergeant had a raft of reasons for the insomnia that began after his first deployment to Iraq in 2003. He'd survived two more tours, all in heavily contested Fallujah, when during his fourth tour of duty in April 2004, his camp was subjected to an insurgent attack. A rocket-propelled grenade exploded nearby, killing four people. Hill was thrown into the air and landed on his back on a concrete barrier.

After the initial shock, he thought he was fine. "I figured I was good to go, no bleeding from the ears, no broken bones. I was sore, but I'd gotten kicked up in the air like Charlie Brown, so I figured I was gonna be sore," he says. But back at Camp Pendleton in California, the longtime bodybuilder was in the gym doing bench presses one day, and when he racked the weights and tried to get off the bench, he couldn't move.

Tests revealed a spinal cord injury, and Hill, who's now retired from the service, has been living with constant back and leg pain. Diagnosed with severe post-traumatic stress disorder (PTSD), he was angry all the time and couldn't sleep—"I was doing a three-days-awake, one-day-crash sort of regimen"—and he'd holed up at home, not wanting to see anyone, lack of sleep feeding his anger and rage fueling his lack of sleep. "I was basically a walking injury."

Hill was in and out of treatment centers, but none of them seemed to help. A four-month stint at the National Center for PTSD in Palo Alto, Calif., helped for a while, but a few months after Hill left the hospital, he says, he was miserable again. The Marine Corps sent him back to the center.

Hill was not optimistic, "really not wanting to be there, you know, thinking that I've failed the first time around and so this is gonna be a waste of time," he says. But he noticed that the environment at the center seemed a little different on his second visit. And some of the men at his group sessions seemed different, too.

"When a guy has PTSD, he has this look," Hill says. But in registering each face around him, he saw some anomalies: "It's sort of scowl, scowl, scowl ... no scowl. Scowl, scowl, scowl ... no scowl. 'I'm like, OK, what's going on with the guys who really look like they don't need to be here?'"

Hill soon realized what the happier-looking patients had in common: They were the ones with dogs by their side.

A FORCE UNDER STRAIN

Since the beginning of the war in Afghanistan in 2001, the U.S. has asked a great deal of its armed services. As the later war in Iraq dragged on, recruitment rates dwindled—and lower enlistments have forced troops already serving to bear a greater burden. In 2006, a report from the National Security Advisory Group noted that nearly all of the available combat units in the Army, Army National Guard, and Marine Corps had been used in current operations; many Army combat brigades were on their second or third tours of duty.

Those who live through the war may come home wounded, physically or emotionally, and many return wired for a different kind of existence where real and terrifying danger lurks around every corner. But back in civilian life, the very tools a soldier has come to rely on to survive—aggression, hyper-vigilance, willingness to use lethal force—may become a handicap, a way of being that is no longer viable and may, in fact, be harmful to the veteran and his loved ones.

For those troubled veterans who don't get the right treatment, isolation, frustration, and anxiety can become the norm. A 2009 study found that close to 40 percent of the Iraq and Afghanistan veterans treated at American health centers during the previous six years were diagnosed with PTSD, depression, or other mental health issues. A 2010 report noted that 14 percent of Army personnel were on a prescribed painkiller like morphine or oxycodone.

Some traumatized soldiers are slow to seek help, and the consequences can be serious. A smattering of veterans returning from the wars have been charged with crimes including domestic violence and murder—tragedies that, experts have suggested, might have





The greatest benefit of Venuto's companionship "is the bond and what he does for me emotionally," says veteran Bill Smith, "because I'm able to handle things better with my family."



At a Nevada pet supply and grooming store where Christopher Hill buys treats for Verde, the service dog demonstrates his money-handling skills.

been prevented if those involved had received counseling. Suicide rates have been rising, particularly in the Army and Marine Corps; in 2009, more than 300 service members killed themselves.

The path toward mental health can be a long one. “What’s difficult about engaging men and women with PTSD for treatment is they’re inherently avoidant,” says Michael Jaffe, an independent psychiatrist who’s worked with veterans since his residency at Stanford. He now consults with Paws for Purple Hearts, the group whose dogs Hill first encountered at the Palo Alto center. “It’s very traumatic to talk about; it’s very traumatic to be around people who want to help you with it. ... How do you help something you don’t know someone has? How do you help with something they don’t want to talk about?”

Treatment of PTSD typically involves a combination of medication and psychotherapy. But some doctors and therapists are discovering that for certain kinds of pain, the best medicine isn’t morphine. It’s canine.

DOGS AS A DRUG

“It is like somebody’s on some very powerful medication,” says Rick Yount, who founded Paws for Purple Hearts as a program of Bergin University of Canine Studies and has watched dogs plow right through the social walls put up by PTSD sufferers.

Yount recalls an angry Marine at the center in Palo Alto—“I think it was 13 different IEDs he’d been hit by”—sitting in a corner

and not participating. One of the program’s golden retrievers walked up and nudged the Marine’s leg, to no avail: The man turned away. “And the dog walked around to the other side, like ‘How about this side?’ And the guy kept trying to discourage any more interactions. ... And the dog finally got up on his lap,” Yount recalls, laughing. “And this guy smiled; this Marine cracked a smile.”

Dogs may lack the faculty of speech, opposable thumbs, and an understanding of human preferences regarding toilet habits. But they often seem to exceed the capacity of humans to withhold judgment—and to forgive.

“Can you imagine if you went up to this Marine and tried to shake his hand and he kind of shook his head and didn’t acknowledge you—would you try the other hand?” Yount says. “Would you give him a peck on his cheek?”

To describe dogs as walking prescriptions may seem fanciful to some. But studies have repeatedly shown that the human-animal bond is more than sentimental whimsy. Recently much research has centered on a hormone called oxytocin, a neurotransmitter that helps female mammals give birth and nurse their young; it’s now being examined for its role in social bonding, empathy, and anxiety reduction.

Several studies have indicated that friendly contact between humans and animals elevates the flow of oxytocin—one 2008 study in Japan showed that mere eye contact between dogs and owners could inspire an increase. Those limpid “puppy dog eyes,” it seems,

don't just help a dog wheedle more treats; they actually make people feel better and more open to affection and trust.

Dogs have proven their therapeutic value even to some who aren't wild about them—"Sorry," says Lt. Col. Matthew St. Laurent, half-amused, half-defiant in his apology for not adoring the canine species. But although he doesn't idolize dogs, the assistant chief of occupational therapy at Walter Reed Army Medical Center in Washington, D.C., is a believer in the difference they can make. "I'm a therapist," he says, "and I'm open to any way to help our patients get better."

It's dogs' responsiveness, St. Laurent says, that makes them good partners in healing psychological wounds. "We have patients that are depressed, we have patients that are irritated or angry, or they may have disfigurement or other major problems. But the dog doesn't care, and the dog shows affection, and the dog listens to them."

CANINE COMRADES

Dogs are now regular visitors at military and veterans' hospitals around the country, St. Laurent says. Some are even accompanying combat stress control teams to Iraq and Afghanistan. At Walter Reed, dogs play multiple roles, sometimes visiting with soldiers and their families, sometimes accompanying a veteran who's learning to walk with a prosthetic limb. The center also hosts the second location of the Paws for Purple Hearts program, and provides a third form of canine interaction: Soldiers in the occupational therapy program can opt to study dog behavior through the Washington Humane Society's Dog Tags program, helping rambunctious shelter dogs

develop manners that will make it easier for them to find homes.

Dogs have a calming effect, says St. Laurent. Walter Reed can be a stressful place—and not just due to the grievous injuries patients have suffered. Family members and patients may be seeing each other for the first time in many months, says St. Laurent, and emotions can run high. "We have broken people, patients that are dealing with what's going on in their heads from their war experience," he says. "And then all of a sudden, you have a dog running around the formation. It kind of normalizes the environment."

Specialist Leif Meisinger, who has memory problems due to the traumatic brain injury he suffered from an IED blast in Iraq, came back to the States attuned to people's movements, alert to any facial expressions that might indicate hostile intent. In public spaces, he was jumpy, watching strangers' hands for weapons and studying rooftops for the presence of snipers. He started staying at home, drinking too much, avoiding the outside world.

That began to change when he visited the booth of Pets for Vets at a Veterans Day function. Founded by Clarissa Black, the organization places shelter animals in homes with veterans.

Meisinger was interested, but he had a special request stemming from his PTSD-related anxieties. "He really wanted a dog, but he was afraid that having the hair around the house was going to exacerbate his issues," says Black.

That might have stopped the conversation, but Black combed area shelters and eventually found Spyder, a Mexican hairless. The dog has become a major part of Meisinger's life, forcing him out of the house and into a healthier routine. And the dog seems to sense when Meisinger is feeling low. "He comes running up and he's just playing and pushing on me ..." Meisinger says. "You can't do anything but start playing. ... I don't even realize it till I'm already out of it; it's like I forgot I was in that bad place."

Like other vets, Meisinger has noticed that having an animal has helped him relate to his family, especially his 8-year-old son. When he returned from combat, the boy found him a little scary. "I was very irritated and very militant," he says. The dog has given them something to bond over; they play together with Spyder, and Meisinger's learning to be softer. "He's brought me and my son together, which to me is probably the greatest thing that's happened."

BEYOND THE BOND

For some veterans, though, the mere presence of a dog is only the beginning.

"Companionship is not enough," says Tamar Geller, a dog trainer and former Israeli Army special forces officer whose Operation Heroes & Hounds program pairs wounded veterans with shelter dogs in need of training. "If we don't get them out of their own selves and make them do things with the dogs, they're just going to be in bed all day."

Geller says that training dogs using positive, humane methods teaches veterans skills that will be helpful in civilian life. Like many people, dogs don't respond well to macho, military-style communication, so if trainers try to use that approach, Geller says, "the dog is like, 'Talk to the paw.' ... When they do it my way, when they're playful and softer, the dog is like, 'Oh, I want to listen to you.'"



Through Washington Humane Society's Dog Tags program, director of animal behavior and training Kevin Simpson helps veterans train shelter dogs for new homes.

"We have millions of shelter dogs dying to be in service," says dog trainer Tamar Geller, whose Operation Heroes & Hounds teaches wounded and traumatized vets the skills to act as trainers for homeless dogs.



Learning to be soft and to *sound* soft is a challenge. Affecting an emotionally cheery tone is not something that comes naturally to anyone suffering from PTSD—and Strategic Use of a Baby Voice is not a lesson covered in boot camp.

The irony was not lost on Christopher Hill, who chuckles at the recollection of his initial work as a trainer with Paws for Purple Hearts. “You have a guy who’s been in the Marine Corps 20 years, who’s barking orders at guys for 20 years, and all of a sudden I have to sound like Richard Simmons to get this dog to do the simplest things,” says Hill.

Luckily, the dogs train the trainers on what works best. “I’m coming across with this bass voice, and the dog’s like, ‘OK, he’s not really happy with me,’ so he won’t respond. But you come with the joy and the little squeaky voice, and he loves it,” says Hill. “So being a Marine, you do what you have to do to make it work, so—Richard Simmons, here we come.”

Many veterans struggle to strike the right tone. “The only way I can get a Marine who’s emotionally numb with PTSD to sound like that is to tell them they have to do it to help a fellow Marine,”

says Yount.

That incentive was deeply meaningful to Hill. “I can’t fight on the front lines anymore ...” he says. “So what can I do to stay in the fight? I can actually help guys who are coming back.”

The dogs who complete the training are placed as service animals, becoming companions to struggling veterans. Bill Smith—who served in a forward army surveillance unit in Korea in the late ’70s and has been in a wheelchair since 1995 due to a misdiagnosed spinal injury—calls himself “dog-blessed.” His service dog Venuto, a “24-karat golden retriever” trained by Paws for Purple Hearts, can pick up a quarter or a credit card; turn a light on and off; and open a door for Smith or tow him along in his wheelchair if his arms and shoulders grow too tired. But Smith, who also has PTSD, is most grateful for the dog’s emotional help.

Recently at a Best Buy, he started experiencing a panic attack in the checkout line. “It feels like everything just sort of stands still and you separate from everything around you,” says Smith. “... And Venuto, he just comes right up and pushes really close into me. And I just put my arm around him and start petting him, and I knead his skin with my thumb and my index fingers. ... And I get a grip, and I come back down from wherever that was.”

Helping train dogs to provide that relief can itself be a therapeutic distraction for PTSD sufferers. “It gives them a sense of purpose to get outside themselves, and a calling that’s greater than their disease,” says Jaffe.

Analysts often use exposure therapy, in which a patient faces the object or condition he fears, learning that it can be survived. For those suffering from PTSD, crowded public spaces can be a nightmare, a potential trigger for their worst memories from their time in combat. But service dog training includes acclimating the animals to crowds and noise, so sometimes veterans have to take the dogs to a ballgame or a grocery store, where people are bound to speak to the person at the end of the leash. To the dogs, it’s an introduction to the human sphere; to the trainers, it’s a re-introduction to the noisy, chaotic, normal world—one done in the name of helping the dog, a mission that diverts their focus from their own anxiety.

“The dogs need to learn the world’s a fun place, a nice place, a nonthreatening place. And that way they don’t get defensive and attack someone in a supermarket or something,” Jaffe says. “The guys need to learn that too.”

A WAY TO STAY IN THE FIGHT

Seeing the dogs learn helps instill a sense of self-worth in the trainers, many of whom are struggling to cope with new limitations, with disfigurement or scarring—with a sense that they're different from the people they once were. Geller recalls a veteran who had survived a sniper bullet in the face telling her that he was “a useless, broken piece of machinery.”

It's that kind of anguish that she wants to help fix. For all its potential peril, Geller says, life in the military provides things often missing in the civilian world: camaraderie and a focus on specific goals. Training dogs supplies these positive elements, making reintegration easier.

Retired specialist Brian Moody says he's seen the mentality of fellow veterans change as they work with dogs in the Washington Humane Society's Dog Tags program. Soldiers who've had amputations, for example, learn they can still be successful at the work. And no matter how bad Moody himself feels, the chance to bring a timid dog out of her shell or teach her something new provides a sense of accomplishment.

Yount, Geller, and others would like to see the canine assistance programs for veterans expanded. Dogs' capacity to help has not been fully explored, and Yount regularly encounters the catch-22 of scientific evidence: “It's hard to get funding for a program that doesn't have a lot of scientific research behind it, but it's hard to get research without having a program where it can be conducted.”

Canine programs may soon get more scientific support: In May, the House passed H.R. 3885, a bill directing the U.S. Department of Veterans Affairs to conduct a pilot program that would examine the effectiveness of treating veterans suffering from PTSD by letting them help train service dogs for their disabled comrades. (Currently, the bill contains language that would exclude dogs who are not specifically bred for the work—including shelter dogs—and The HSUS's Government Affairs staff is working with Tamar Geller to get that element changed.) More information may come from a study underway at Brooke Army Medical Center in Texas, where researchers in the occupational therapy program are examining the effects of animal-assisted therapy on soldiers' moods and transitions to civilian life. Results are expected within the next few months.

But nobody needs to show Christopher Hill the data; he has his own.

“The pharmaceutical companies don't want to hear from me,” says Hill, who—like many of the service members who've worked with animals—has been able to reduce his medications and wean

himself off several of them after working as a trainer and then getting his own service dog, Verde. “They would be out of business if these programs were expanded.”

For Hill, participating in the dog training program marked a fundamental shift in his long recovery process.

Even at the National Center for PTSD—a place where sleep disorders are a dime a dozen—Hill's ongoing insomnia was legendary at the nurses' station. Every morning brought the same accounting as they recorded the sleep habits of their patients: *Patient X slept through the night. Patient Y slept through the night. Patient Z slept through the night. Christopher did not sleep.*

In combat, Hill says, “having somebody by your side with a weapon who's watching your back in a really stressful situation is a great comfort. Well, when you leave that environment, that person is no longer there. You're on your own. . . . It's like you can't sleep because you [feel like you] have to be up standing your post. And you can't sleep on your post; that's endangering everybody's lives.”

It's a state of mind, he says, that would likely have taken him years to gradually ease away from. But the first night he had Verde in his room, when a nurse checked to see if Hill was sleeping, the dog let out a tiny growl. To

Verde, Hill says, the nurse's stealthy approach seemed sneaky, and he was letting her know it wasn't a good idea to sneak up on his buddy.

It wasn't even conscious, Hill says, but “once he did that, I was like, ‘Hey!’ I just mentally picked up that somebody's watching my back.”

The result was immediate and dramatic. Within the next few days, four doctors had gathered outside of Hill's room, all puzzling over the new development, wondering what magical medicine could have caused this astonishing notation in the nurses' log: *Chris slept.* ■

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