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Medical Response and Medical Alert Dog Training

by Veronica Morris, PhD*

One common question people have when training a psychiatric service dog is "How do I train my dog to alert or respond to my anxiety?" (or mood swings, or flashbacks, or seizures, etc). I'll break down my method for doing this, so you can do it, too! Just like with all training, I recommend you consult with a professional trainer along the way to make sure things are going right.

If you were training an alert or response to a condition like diabetes, with body changes that are known and can be isolated and preserved for training, you'd have access to a certain targeted way of training. Many people have disabilities that don't provide that luxury! The great thing about my more holistic association method for training responses or alerts is that you can use it for pretty much any change in your body your dog can detect. I'll just use anxiety attacks as my example for this training. Before we get to the how-to and helpful stories, we'll run through some background that gives us a clearer view of the landscape.

Background

Here we'll figure out the basic distinction between a response and an alert, plus their different strengths, so it'll be easier to figure out your training plan! Like the <u>work vs. tasks distinction</u>, these are jargon terms in the service dog community, so don't worry too much if they don't match up exactly with outside definitions. There's also no legal difference involved.

In both medical alerts and medical responses, the dog recognizes and responds to a change in your body, like a change in your posture or a certain smell on your breath. The key difference between a response and an alert isn't in what the dog does, but it's all about your awareness at the time (a gray area!).

If you're already generally aware you're having an issue when your dog starts the work, it's a *response* rather than an alert. A simple *alert* on its own is just the dog bringing the incident to your attention when you didn't know about it.

Both alerts and responses can be extremely valuable. Alerts can let you know you might have an issue in time for you to do something to completely head off a problem. Many dogs that alert are also trained to continue responding during an attack, and so they're both medical alert and medical response dogs for a disability.

Alerts on their own can be great, but sometimes an alert isn't possible or doesn't allow you to head off or even lessen the problem. This is why responses are wonderful, and can even be more valuable in a situation!

If you *only* get an alert, you've only gotten information about a problem and then you'd better be able to fix the problem on your own. With responses, you're getting an action that can itself decrease the problem. Whether I'd recommend training an alert, response, or both depends on your dog's abilities and what would be best for you.

Bradlev W. Morris, MA

^{*} Revised with major input from Bradley W. Morris.

Now let's take a look at how the training works!

The how-to

The method for teaching a medical response starts out the same as training a medical alert. Be sure to keep it all safe for you and your dog!

The first thing to do is to make your episodes enjoyable for your dog—or at least not frightening, if that's where you need to start! So when you have a panic attack, start showering your dog with treats and affection. Have a big party with your dog. If you are unable to handle your dog during an attack, you may need to enlist the help of a friend or family member to put treats on you (it is important that the treats come from you). You may also wish to fake having an episode for this training, but some dogs do see through the faking.

You should notice after a while of doing this that when you start to have an episode, your dog runs over to you to get their treats and praise. This is the dog *recognizing* that you are having an issue. Next to you need to train the dog to *respond* to your issue.

Figure out what you want to train your dog to do. Do you want your dog to lick you? Touch your hand or leg with their nose? Paw at you? Jump up on your lap? Lie still on your lap for grounding work? Press their body into yours for deep pressure therapy? Reliably train this first outside of the medical alert or response framework. Put whatever thing you want your dog to do on command.

Next, when you have an attack and your dog comes running over to get treats, ask for the behavior you want your dog to do, and then reward lavishly. Keep repeating this as your episode continues on. Keep on asking for that behavior and rewarding a lot.

Over time, your dog will start to anticipate you asking for the behavior, and will start offering that behavior on their own. This is the response that you want. REWARD this big time! Have a huge party with your dog for doing this.

Keep it up and you will have a dog that will reliably and helpfully respond to your disabling medical condition: a *medical response dog*.

Some, but not all dogs are able to transition this into an alert, letting you know before you become aware of an impending issue. It also may be that your particular illness doesn't allow an alert to develop because it is triggered so quickly.

To transition the dog to an alert, keep up the response training, rewarding your dog for recognizing and responding to your episode. Gradually start rewarding big-time only the first response, and phase out any big rewards for the later responses. Your goal is to make that first bit of coming over and recognizing what is going on seem really important to your dog.

Some dogs are able to generalize an association between rewards and some early change in your body to take action before an attack happens (or at least before you know it's happening). It may be a change in your breath, your heart rate, your breathing, your sweat, a scent your skin gives off, anything really. Unlike with the long-distance alert/response training some programs do with collected saliva samples, what they are noticing is not especially important for this association method of training—just that they are noticing it. Each dog might even pick up on something slightly different.

When the dog starts coming over to you when you are not having the attack and does the response behavior, reward and be sure to include this in your training log. When you have your next attack, log that, too. This way over time (as in multiple months, not days), you will be able to refine a clear connection between your dog coming and doing the behavior and you having an attack. This will really solidify for you that your dog is alerting you and not just wanting to have fun and get some treats. Your dog recognizing something is going on with you, and letting you know before you would otherwise know is an alert. When this is reliably trained, you have a *medical alert dog*.

Helpful stories

My first service dog, Sabrina, was a natural at medical response and alert. She started showing response behavior to my anxiety and mood swings before she was even my dog—when she was in the shelter and I was a volunteer. So I didn't have to train her in this at all, she just did it naturally. I did make sure to reward it once I realized what she was doing so that she had impetus to keep doing it, and so that this way she was trained to do it. She was able to give me about a 15-minute warning for panic attacks.

My second service dog, Ollie, started off with this method. He picked up on it fairly well from just me rewarding him when I was having an attack. He started then doing his own idea of a response behavior which was to bark. This did NOT work for me at all. So I had to not reward the bark, and instead ask for a nose bump, then reward.

Over time as I did not reward the barking but did reward the nose bump, he figured it out and learned that I preferred the nose bump. If I didn't listen, though, later on in life he would revert to a bark or two at me if I didn't listen and get away from the stressful situation that was causing my increase in anxiety.

He was able to work up to warning me a few minutes before a full-blown panic attack. Not as good as Sabrina, but enough for my needs. With those few minutes of warning I could take a rescue med like Ativan, I could leave the stressful situation or leave class so I wouldn't embarrass myself, I could go find a quiet spot, etc. Doing these things will head off a panic attack for me most of the time, so I am able to recover more quickly and rejoin society more quickly.

My third dog, Hestia, is still a service dog in training. I started the technique just like I did with Ollie. Pretty quickly she learned that my attacks meant great things, and she started offering her own behavior which was intense licking. This was OK to me, so I just let her keep that behavior. Even though she is only a year old, she is able to give me a few minutes of alert time, which is very unusual for this early stage of training. I am hopeful that as our partnership grows, she will learn to give me more time as an alert.

Putting it all together

One last thing is that this alert training is for getting your dog to tell you that something is going wrong. I personally don't just want alerting licks when I am having an attack; I want a response that will lessen the attack. For example, I want my dog to press her body into mine and give me deep pressure therapy, and for her to allow me to fondle her ears and tail to ground myself.

To teach your dog to do these things, first teach them to do the behaviors you want without any combination with your attacks. Then once you have a good alert behavior down, reward only for the first time the dog does the alert. Then ask for this other behavior, like leaning in, or an extended stay over your body (like over your arm or leg, or in your lap). Reward when they perform it. Eventually they will start first doing the alert behavior, and then they will naturally go into the response behavior that helps you as they learn this as a sequence of things to do. If you and your dog can meet these training challenges together, you'll have a medical alert and response dog!