A Focus Group Discussion on Using Guide Dogs

Janice K.F. Lloyd, R. Claire Budge, Kevin J. Stafford, and Steven J. La Grow

The success of the partnership between a guide dog handler (or owner) and a guide dog depends upon both the suitability of the dog and the skill of the handler in maintaining the relationship. This qualitative study explored the use of guide dogs from the perspective of those who use them as a prelude to a larger scale, quantitative project assessing the matching process and the outcome of the partnership. The data were collected from a focus group discussion from which eight themes emerged. These included: mobility; adjustment to vision loss; advantages and disadvantages of using a guide dog; the matching process; training with the dog; social function, feelings of friends and family; and the outcome of the relationship. In this article, these themes are described and exemplified with extracts from the focus group discussion. The study fulfilled its purpose as an information gathering exercise to further investigate the relationship between guide dog handlers and their dogs, and has added to a small but growing body of literature on the topic.

The day-to-day experience of using a guide dog has received some attention in the professional and non-professional literature, but much of the information available is anecdotal or based on individual accounts. Psychosocial benefits of using a guide dog have been reported (Gitlin, Mount, Lucas, Weirich, & Gramberg, 1997; Lambert, 1990; Muldoon, 2000; Refson, Jackson, Dusoir, & Archer, 1999; Sanders, 2000; Steffans & Bergler, 1998; Zee, 1983) and reasons why some people with vision impairments chose not to use a dog (Refson et al., 1999; Refson, Jackson, Plant, et al., 2000). In addition to their working role, like pets, guide dogs and other trained service dogs, a category which include hearing dogs for the deaf, mobility assistance dogs, and seizure-alert dogs, benefit people with disabilities by providing

friendship and companionship (Hart, Zasloff, & Benfatto, 1995), acting as social facilitators (Eddy, Hart, & Boltz, 1988; Hart, Hart, & Bergin, 1987), and enhancing self-perceived health (Lane, M°Nicholas, & Collis, 1998). Miner (2001) conducted personal interviews with eight guide dog handlers and found they experienced increased confidence and independence, more interactions with the public and additional responsibilities inconveniences such as the need to care for and exercise the dog. However, aside from one short review (Robson, 1985), no research on the process of matching handlers and guide dogs could be found in peer-reviewed publications. The current study, of which preliminary findings were published by Lloyd, Budge, La Grow, and Stafford (2000), adds to existing knowledge

by exploring the experience of guide dog use by way of a focus group discussion and identifying factors that affect the match.

A focus group is a group discussion centring on a specific topic of interest to a researcher, and consists of a group that has the focus of interest in common (Hawe, Degeling, & Hall, 1990). The goal of the methodology, which was developed by Merton, Fiske, and Kendall (1956), is not to represent the group's views statistically, but to provide insight into attitudes that underlie behaviour by collecting a range of information on personal experiences, understandings and beliefs (Carey, 1995). Data obtained from focus group interviews are different from information that would be elicited from an individual interview, as the group data reflect the collective notions shared and discussed by the group, while the latter reflect the non-synergistic views and opinions of an individual (Berg, 1995).

The present study was conducted in New Zealand prior to constructing a survey instrument to assess the outcome of matching a new guide dog to its handler. By combining qualitative and quantitative techniques, the validity of the research was increased as the study took a methodological triangulation approach to data collection, as recommended by Mays and Pope (1995). The focus group method was chosen as, in addition to achieving a desirable 'group effect', focus group interviews are an established means of identifying areas for further development via structured surveys (Morgan, 1996), and are a relatively simple and accessible way of collecting this information from a target group (Fowler, 1993). In addition, as guide dog use is relatively under-researched, it was thought appropriate to identify and investigate issues raised by the participants themselves.

Method

Participants were recruited by invitation. Inclusion criteria were that participants be members of the Royal New Zealand Foundation of the Blind (RNZFB) and reside within a short travelling distance of the interview venue. The RNZFB database revealed a potential sample size of 14, and to preserve the members' privacy, a RNZFB staff member sent the 'Invitation to Participate' packages to those eligible on behalf of the researcher (first author). The invitation package consisted of a participant information document (supplied in the person's preferred format of Braille, audiotape, e-mail, or regular or large print), a consent form and a pre-paid, addressed envelope. Agreement to participate was implied by the return of the signed consent form to the researcher. This method of contact enabled confidentiality and anonymity. Ethical approval to conduct the study was granted by the National Ethics Advisory Committee of New Zealand, and Massey University Human Ethics Committee.

PARTICIPANTS

Seven people, inclusive of one person's sighted partner, took part in the discussion. Three participants were currently using a guide dog, one, who had previously used a dog, was temporarily using a long cane while waiting for a replacement dog, and two had chosen not to use guide dogs. Of these two, one's preferred form of mobility was a long cane and the other did not use any mobility aids. The participating partner lived with a guide dog handler. The participant group included both sexes ranging in

age from 26 to 56 years, with a mean age of 32.9 years. Experience with guide dogs varied. A total of six dogs were used from 1 to 14 years of use, which included successful and unsuccessful matches. All but one of the participants with vision impairment had been trained to use a long cane. Visual status was diverse in onset and severity.

Focus groups are reportedly most successful when they employ between 6 and 10 people (Krueger, 1994; Morgan, 1988). Therefore, all participants were included in a single group and it was hoped that the differences between those who used guide dogs and those who did not would stimulate discussion (Kitzinger, 1995). During the discussion, the researcher acted as moderator and facilitator, and the second author as co-facilitator and note- taker of non-verbal behaviour and other dynamics not recordable on audiotape.

PROCEDURE

On arrival at the venue, participants and their guide dogs were welcomed and introduced. They were then seated around a circular table and refreshments were served. An audiotape recorder was placed at two peripheries of the table to record the entire discussion and the co-facilitator drew a map of where people sat to aid with recall on transcription of the tapes. An overview of the research design and issues of confidentiality and anonymity were discussed. Participants were given the opportunity to ask questions of the moderator at this time and were informed that questions could be asked at any time throughout the discussion.

The moderator's role during the exchange was to help focus the discussion and probe unclear comments or issues (Asbury, 1995). Thus, a list of topics based on a review of

the literature and consultation with guide dog professionals was prepared in case discussion did not flow. The participants were encouraged to discuss the factors they considered important for achieving and maintaining a successful match with a guide dog. However, as Carey (1994) held that 'wandering' from the subject matter may be an important concern for the target population, participants were also reassured that any area was worthy of discussion and that the goal of the activity was not consensus (Kitzinger, 1994).

To initiate all into the discussion, participants were asked, "What are your experiences with guide dogs and other mobility aids?" The discussion flowed spontaneously until participants had raised the issues they wished to - a process that took a little over one and a half hours. Input from the moderator was minimal and a relatively unguided approach was taken as all the topics on the list were covered. The tape recorders were then switched off and the participants were given another opportunity to ask questions.

Tapes were transcribed by the researcher shortly after the meeting concluded, while impressions were fresh. Pseudonyms were used in the transcript to maintain confidentiality and anonymity outside the focus group, and such phrases as [my dog] and [the instructor] were substituted for real names. The tape was transcribed in the manner suggested by Hawe et al. (1990), i.e., that qualitative data be verifiably analysed via a 4-step, systematic procedure. Therefore, the data were organised in a workable order, shaped into categories of patterns and themes, summarised and explained.

Results

Eight themes emerged that identified the factors considered important for achieving and maintaining a successful match. These themes, which will be described in the following sections, were (a) factors concerning mobility, (b) adjustment to vision loss, (c) advantages and disadvantages of using a guide dog, (d) the matching process, (e) training with the dog, (f) social function, (g) feelings of family and friends and (h) the outcome of the relationship.

(a) Mobility: to use or not to use a guide dog

As there were guide dog handlers and non-handlers participating, the issue of why some people chose not to use a dog was raised. One non-handler felt that although he had contemplated getting a dog he travelled quickly with his long cane and, despite colliding with objects, thought that a dog would slow him down. He also believed that independent travel was a matter of confidence. The other non-handler stated that although he was "blind enough" to qualify for a dog, he did not need one as he had a lot of central vision useful for mobility and could see relatively well. However, if his vision worsened he would want one, albeit mainly for companionship. A handler commented that he believed he had too much vision when he applied for his first guide dog, and therefore would not be considered an appropriate candidate, but he was eligible and found that his vision worsened considerably during the years spent working with the dog. In this group, people who chose to use dogs initially did so primarily to improve their mobility and become more independent. One handler commented to another:

You were good at [long cane] mobility, so you only wanted a dog like mine [specific breed]... Once you got your dog, you realised that you were not so good at mobility after all! [laughter]

In response, the handler who had chosen to use a dog despite being a skilled long cane traveller maintained that travelling with a dog was faster and much less stressful, and that one arrived at destinations feeling energised, as the dog did all the hard work. This was backed up by other such comments as "I go into a daydream with [my dog]".

The issue of why only about 2% of New Zealand's vision impaired population (N = approximately 12,000) at the time of this study chose to use a dog, when a third of the population were eligible, was discussed. It was speculated that so few people chose to use dogs because only one in eight RNZFB members were "truly blind" and because most members were elderly; the rationale of the group being that elderly people may not want a dog or that they would not benefit due to the kind of eye condition they probably had. This concept will be further discussed in a 'Note on the text' at the end of this article.

(b) Adjustment to vision loss

The issue of adjusting to vision loss was raised. This issue was probed by the moderator asking whether or not guide dogs might help people adjust? The response was that it depended on such individual circumstances as the type and duration of the vision impairment. Guide dogs were considered beneficial for mobility only if the handlers had significant functional deficits; otherwise, the dogs were considered to be just pets. Dogs were thought to be less likely to help people

adjust if the handler had been blind a long time and thus were "good at being blind".

The question of whether or not dogs help people adjust to vision loss is a complicated one. Other factors leading to adjustment were discussed and these included: learning orientation and mobility (O&M) skills, social support, and learning adaptive technology such as specialised computer software packages and daily living skills. One handler, whose vision had been lost suddenly, stated:

I would not be where I am today if I did not have the dog. It changed my life completely; made me move on and gave me the confidence and the independence to do it.

(c) Advantages and disadvantages of guide dog use

In addition to more enhanced mobility and independence, other advantages of guide dog use that were raised included: increased self-esteem, and companionship causing feelings of loneliness to abate - especially when travelling, and getting lost was deemed less likely, provided the dog was a "problem solver". Another advantage mentioned was that when travelling with a human companion, the use of a dog enabled a more relaxed conversation than when travelling using the person as a guide. The latter enforces proximity.

Disadvantages raised included poor social behaviour such as scavenging, and having to consider the dog's welfare. One handler said that, despite loving her dog, if she had enough sight to get by she would not have one, the care of which she likened to the responsibility of having a small child around. Those who had used dogs nearing retirement age found the dogs' age-related reduction in mobility very frustrating. However, all who

had used guide dogs indicated they would continue to do so.

(d) The matching process

Matching is the process by which a handler is matched with the most appropriate, available guide dog. While some people were satisfied with the input they had into their match, others requested more to do with "the black box that is the mystery of matching". This included more consideration for lifestyle changes; in particular, for younger people who may be more likely to move location. A comment was made that if a dog was well-trained lifestyle changes should not be a problem, which was countered by another's opinion that not all dogs are adaptable or robust enough to cope with all environments.

There was agreement that matching the dog's walking speed to that of the handler was of paramount importance, but the dog's personality also had to 'gel' with that of the handler. One handler was concerned about the way speed was gauged:

How fast you walk can depend on how familiar you are with the environment... I was sight guided by [an instructor], who's good at sight guiding, to gauge my speed, but I didn't necessarily want a dog to work so fast; I'd die on arrival! [laughter]

The issue was raised that family members were not sufficiently involved in the matching process. However, the partner present said that although he had not been included in the pre-matching discussions with the guide dog instructor he had not expected to be. Others believed that 'significant others' should be consulted on the ways a dog is likely to change their lives, and that their opinions be taken into account. More

attention concerning existing family pets was also wanted. One handler had come close to returning his guide dog, as it was aggressive to his pet cat. In this case, the situation was resolved with the cat eventually dominating the dog. However, another handler's cat dealt with the trauma of being continually chased by a new guide dog by moving in with the next-door neighbour, much to the handler's partner's distress, and thus highlighting a situation where other household members can be affected by the addition of a dog. It was conceded that if the instructor knew the handler well, there was less need for questions regarding lifestyle. This part of the conversation concluded with a story about someone who had received a German Shepherd Dog (a breed believed to be particularly sensitive to changes within the hierarchy) being jokingly told by the instructor "not to go changing partners as the dog was very fussy about who was in its pack".

The length of time people spent waiting for dogs was discussed, and there was concern that the waiting list was growing longer. It was thought that waiting was more difficult if one was used to guide dog-assisted mobility, and that the lack of independence might force some people into accepting a less favourable breed that was more readily available. It was suggested that people should not set their hearts on a particular breed, in order to avoid disappointment and limit the waiting time, but that their preferences should be taken seriously.

Several handlers wanted their next dog to be a different breed than the current one, despite having a good relationship with the current dog, as they worried about comparing the two. The partner present also did not want his partner to have the same breed again due to the "social liability" factor of having a very greedy dog. This led to some amusing stories including one person's dog who licked the pearls hanging round a solicitor's neck, another's who "washed" the ice-cream off the faces of babies who were being pushed past in prams, and the dog who "goosed" people from behind at the supermarket. It was also mentioned that the general public often made insensitive comments if, for example, the handler expressed a preference for a particular colour of dog: "Who cares about the colour... you can't see it anyway".

(e) Training with the dog

Issues concerning training with the guide dog and guide dog instructor (team training) occupied a large part of the conversation. Some participants felt that being trained to use the dog was stressful, the stress exacerbated if O&M skills were limited and/or by lack of empathy from the instructors. One handler had a negative training experience with the first dog, and believed that training had been "a psychological process designed to reduce a blind person to a gibbering jelly":

What should have been the biggest adventure of my life [getting a guide dog] turned into a terrible nightmare... black despair really. The dog played up, and the instructor shouted at me in public. I shouted back, [which was] not good for public relations. It didn't have to be like that.

Conversely, other handlers had different training experiences:

My experience was fine; I didn't get humiliated. It took three weeks, but I felt I was ready after two, as I knew the area really well.

I was taken from someone with no dog experience to a competent handler of a difficult dog in just three weeks: an amazing transformation.

It was believed that a lot of time was wasted sitting in a vehicle while undergoing residential training (with others away from home) versus domiciliary training (one-onone training from home). The overall opinion was that there had been many positive changes over the years regarding training, including the option of home training. Advantages of this were the availability of social support from being in the family environment, little disruption to routine and that one could train in familiar routes. An advantage regarding residential training that was not possible with domiciliary training was the opportunity to assess how well the dog worked with no unwitting input from the handler, which may happen if the handler is familiar with the territory. For example, the handler slowing when approaching a known down-kerb before the dog had made the decision to do so.

The "golden rule of training" seemed to be that "the dog is never wrong, always the user". It was wished that the instructors would account for the fact that handlers most often did not know that their dogs had done anything wrong until it had happened, simply because they could not see. This is exemplified by the following comment:

The dog did something crazy, and I got bawled out for holding the harness the wrong way!

That's nothing. I was walked into a lamppost and the instructor laughed!

Much was made of the fact that people liked the current instructor:

That's our instructor... we all really like [the instructor] you know. Especially the dogs. Because of [the instructor], we can take almost anything.

It was conceded that training was more difficult and frightening if the handler had poor or no O&M skills, and that the instructors should consider this and not rush individuals who were less confident. It took a while to get used to the feel of the harness handle and therefore what the dog was doing, and that having some experience with pet dogs before obtaining a guide dog was helpful. The more experienced handlers believed that training with subsequent dogs was easier and a one to two-week refresher course from home was adequate.

(f) Social function

Although it was generally agreed that guide dogs improved social function by encouraging social interactions the minute the dog was used, the initial exchange was usually with the dog and not the handler, and the dog was often touched without permission. There was dissent on how much contact the dog could comfortably attract from the public; for example, children exciting the dog versus welcome attention. One person believed that if people asked if they might touch the dog then it was the handler's duty to enhance public relations for the RNZFB's Guide Dog Services and permit as much fraternising with the dog as time and mood allowed. Another preferred people to keep their hands off the dog altogether. All agreed that interference without first asking for permission and while working in harness was objectionable. However, the media were criticised for leading some people to think that they must never approach a handlerguide dog team, even when not working.

This was illustrated by one participant's experience with a shopkeeper who reprimanded an employee for attempting to pat the dog after requesting and being granted permission from the handler.

The following quote depicts how inappropriate notice from the public can lead to problems with the dog's work:

My dog was very popular when I attended [university] classes. People would clap their hands on [the dog's] head whenever they walked by because his head was just at the right height. One day I found myself in a French class by mistake... the dog had just followed someone who paid him attention.

Once it was realised that the dog was going to pay such notice to other people, the handler dealt with the situation by encouraging as many people as possible to fuss over the dog until the dog stopped paying attention. This behavioural modification technique, called 'flooding', was used when the dog was standing stationary in-harness, but not walking.

One of the handlers, who had an active social life, believed the dog's presence and needs hindered her enjoyment in such crowded places as pubs and sometimes wished that she could "hang up the dog like a long cane", but agreed that the situation may be different when she got older and had a different lifestyle. Another handler said that using a dog improved his social life, as he now frequented cafés due to the ability to smoothly negotiate tables; something he never had the confidence to do with a long cane since he had felt awkward and clumsy.

The following quotes, although told as amusing anecdotes, illustrate that inappropriate social behaviour of the dog is not only embarrassing to the handler, but can restrict social interactions:

I was at a barbecue where they were serving meat and it wasn't until I got home and couldn't get the harness off over the dog's head that I realised it had a big steak hanging out of its mouth. [laughter] Nobody had said anything... I mean I walked home with the dog like that. I considered not taking the dog to social functions after that.

I was forbidden to take [my dog] to social functions at work due to the 'Niagara of saliva' dangling from her mouth whenever we were about the food.

(g) Family and friends

Participants' family and friends had mixed reactions towards guide dog use, from positive and supporting, to feeling rejected and undervalued. Some people in the group had been encouraged by family members to get a dog in order to be more independent, while others' family and friends believed the dog to be competition and preferred to be the mobility aid when travelling together with the dog. Some friends, who had served as sighted (human) guides for years, were infuriated, as they perceived the acquisition of a guide dog to be a rejection of their goodwill and skills to keep their friend safe, and did not believe that a dog could do a better job. The dog was eventually accepted and liked. Another's friends loved the dog from the outset and no importance was given to whether or not the handler was walking with them using the dog as an aid by way of the harness handle or by human guide (with the handle dropped). However, some dogs did not work well when there were others walking alongside as illustrated by the partner's comment:

If I am walking with [my partner] and [my partner] is using the dog, the dog will stop and look at me and then at [my partner] as if to say, "why should I work, let him sight-guide you".

The group speculated that this was due to the dog 'knowing' it was not really needed and/or confusion about its role in making decisions.

(h) The outcome of the relationship

It was observed by the participants who chose not to use dogs that some handler-dog teams seemed to "click", while other teams did not, even if the dog seemed to be doing what was required of it. The handlers suggested that this might be due to a lack of trust on their part that the dog would keep them safe. It was noted that good relationships with dogs might take six months or more to achieve, but that perseverance usually paid off:

I kept a diary. It took six months to get a good working relationship going with [my dog], then it was wonderful; same for [my previous dog]. It was worth it, but frightful while it lasted.

In this group, despite the problems with pet cats, only one of the six dogs used was deemed mismatched. This dog, the handler's second, was returned after a relatively short period mainly for inconsistent speed. It was also too small, and while this did not negatively affect the handler's balance, its short stride-length rendered it incapable of walking in front of the handler who felt constricted on the footpath. The dog was also described as "a nonentity of a dog, with no character whatsoever". As it was apparent to the handler that his and the dog's personalities were incompatible, he speculated that the dog was over-conscientious and/or

worried, which may have led to its hesitant guiding. The group proposed that dogs could be rejected for many reasons, with social behaviour deemed as important as compatibility of physical attributes such as the dog's walking speed. With the exception of the mismatched dog, handlers developed strong emotional bonds with their dogs. In some cases, the dogs also became attached to others, which some handlers found upsetting.

Two of the four handlers had experienced the end of a partnership. One "didn't enjoy it" and the other, who had been mismatched and returned his dog relatively quickly, felt "relieved". Another handler, whose dog was nearing retirement, was looking forward to a young, sprightly dog of an exotic breed despite dreading parting with her old dog, and the remaining handler, who had received his first dog fairly recently found the scenario difficult to contemplate. Concerning the issue of being asked how they might feel about receiving a subsequent dog, responses were divided on whether it was preferable to have a break between the dogs or to obtain the new one immediately.

Discussion

The focus group discussion identified eight themes concerning seven people's experiences with guide dogs and other mobility aids. These themes (mobility, adjustment, advantages and disadvantages, the matching process, training with the dog, social function, family and friends and the outcome of the relationship) provide some understanding of the factors important for achieving and maintaining a successful match, and exemplify why people use dogs as mobility aids, what their experiences are and what changes the dogs make to their lives.

Handlers indicated that overall they were fundamentally happy with their dogs, as they experienced more independence, better mobility, increased self-esteem and confidence, companionship and enhanced social interactions than previously. Disadvantages of using guide dogs, such as the requirement for constant attention to the dog's welfare, were outweighed by these advantages.

Similarities between these results and those found by others have been described by Lloyd, La Grow, Stafford, and Budge (2008a,b). In particular, the findings of Refson et al. (1999), Miner (2001) and Lloyd et al. (2008b) suggest that there are core issues associated with the experience of using a guide dog. These four studies all found that quality of life in general was improved through better mobility, and increased confidence, independence and self-esteem, but that there were negative as well as positive aspects. For example, the responsibility of caring for a dog and the inconvenience of dealing with a dog in some social settings were noted.

Novel issues that were raised in the present study included factors concerning the match; training with the dog; how friends and family felt about the dog; and how the reduction in mobility as dogs aged affected handlers. A number of work and non-work related suggestions that might influence the match were proposed. These included the importance of the dog's walking speed; compatibility of the person's and the dog's personality; more consideration for lifestyle and lifestyle changes, breed preferences, family dynamics and other pets in the household; and that training be as stress-free as possible. Rather surprisingly, participants also proposed that although dogs could be rejected for many reasons, the dog's social behaviour was just as important as mobility.

Other comparisons that parallel those in the limited amount of available literature include the reasons why people chose not to use a dog or thought they might be ineligible to use a dog, and feelings at the end of the partnership. As in the present study, Refson et al. (1999), Refson, Jackson, Plant, et al. (2000) and Lloyd et al. (2008a) found that people chose not to use a dog because they thought that their mobility was not sufficiently impaired or because they felt like a "fraud" for having too much vision. The focus group did not address the issues that arise at the end of a partnership with a guide dog in detail, as only two participants had experience of this. However, the viewpoints that emerged (i.e., an unpleasant experience and an easement) support conclusions of Nicholson, Kemp-Wheeler, and Griffiths (1995), who found the end of the partnership upsetting even if there had been problems in the relationship. Although the exception to this was if a mis-match had ended after a relatively short period with no real bonding, as was the case in the present study.

The focus group method is distinctive for its procedure of interaction of the participants with each other as well as with the researcher rather than its mode of analysis (Wilkinson, 1998). Thus, the goal of this study was not to present the discussion in a statistical sense, but to learn about a range of perceptions and opinions (Kitzinger, 1994). It appeared that the participants were uninhibited by the moderator and co-facilitator whose presence did not seem to bias responses, although the conversation was dominated by those in the group with guide dog experience. While focus groups are not intended to be educational or supportive in an emotional sense (Carey,

1995), all of the participants stated that they found the discussion to be enjoyable, and the opportunity to contribute was described as cathartic for some.

Although this small sample from one geographic region cannot be considered representative of all members of the RNZFB. results gelled with the findings of a review of the literature, including Sanders' (1999) perspective of guide dog trainers and the researcher's own understanding from discussions with the RNZFB's Guide Dog Services' instructors and dog trainers. To the researcher's knowledge, the present study is the only study that has used the focus group methodology to evaluate the use of guide dogs by the consumer. The method was effective as a research tool, as evidenced by a spontaneous, flowing discussion, which generated ideas and identified novel areas for further study. The present study fulfilled its purpose as an information gathering exercise and the findings helped to formulate a survey questionnaire that explored the match between handlers and guide dogs and identified factors associated with matching success.

Author Notes

Thanks are extended to the participants for sharing their experiences, and to Ian Cox and the staff of the RNZFB's Guide Dog Services for their help and support. The research was conducted as part of a PhD degree, and the first author is grateful to Douglas Pharmaceuticals Ltd. for providing a scholarship, and to Massey University and the Palmerston North Medical Research Foundation for their assistance towards research costs.

Note on the text - regarding the comments made by the participants in theme (a)

Mobility: to use or not to use a guide dog that elderly people may not benefit from a guide dog due to the kind of eye condition they probably had: Historically, unlike people with the visual condition retinitis pigmentosa, which results in a loss of peripheral vision, those with age related macular degeneration (ARMD), which is the most common cause of vision loss after age 60 (Cassin & Solomon, 1997), have not been eligible to apply for a guide dog due to the belief that as peripheral vision remains intact this would preclude the handler from effectively working with a dog. Refson, Jackson, Dusoir, and Archer (2000) believe this is an important finding, as, with an ageing population, the pool of eligible guide dog applicants (i.e., those without ARMD) will form a lesser proportion of the sight impaired population, thus requiring service providers to adjust policies in line with changing mobility needs. While this may be, the RN-ZFB's Guide Dog Services have successfully matched either a first or a replacement dog to several elderly people with ARMD, and this trend is becoming apparent in several training schools around the world. This development is supported by Long, Boyette, and Griffin-Shirley (1996) who believe that although older sight impaired persons may have physical limitations that preclude the use of guide dogs, an applicant should not be excluded on the basis of age but looked at on his or her own merit as, for example, he or she may be matched with a dog with a suitably slow walking speed.

References

Asbury, J. E. (1995). Overview of focus group research. *Qualitative Health Research*, 5, 414-420.

- Berg, B. (1995). *Qualitative Research Methods for the Social Sciences* (2nd edition). Boston: Allyn and Bacon.
- Carey, M. A. (1994). The group effect in focus groups: Planning, implementing, and interpreting focus group research. In J. M. Morse (Ed.), Critical issues in qualitative research methods (pp. 225-241). Thousand Oaks, CA: Sage.
- Carey, M. A. (1995). Editorial introduction. *Qualitative Health Research*, 5, 414-420.
- Cassin, B., & Solomon, S. A. B. (1997). Dictionary of eye terminology (3rd edition). Gainesville, FL: Triad Publishing.
- Eddy, J., Hart, L. A., & Boltz, R. P. (1988). The effects of service dogs on social acknowledgements of people in wheel-chairs. *The Journal of Psychology*, 122(1), 39-45.
- Fowler, F. J. (1993). Survey research methods (2nd edition). Newbury Park, CA: Sage.
- Gitlin, L. N., Mount, J., Lucas, W., Weirich, L. C., & Gramberg, L. (1997). The physical costs and psychosocial benefits of travel aids for persons who are visually impaired or blind. *Journal of Visual Impairment & Blindness*, 91(4), 347-359.
- Hart, L. A., Hart, B. L., & Bergin, B. (1987). Socializing effects of service dogs for people with disabilities. *Anthrozoös*, *I*(1), 41-44.
- Hart, L. A., Zasloff, R. L., & Benfatto, A. M. (1995). The pleasures and problems of hearing dog ownership. *Psychological Reports*, 77, 969-970.
- Hawe, P., Degeling, D., & Hall, J. (1990). Evaluating Health Promotion. Sydney: MacLennan and Petty.
- Kitzinger, J. (1994). The methodology of focus groups: The importance of interaction

- between participants. Sociology of Health and Illness, 16, 103-121.
- Kitzinger, J. (1995). Qualitative research: Introducing focus groups. *British Medical Journal*, 311, 299-302.
- Krueger, R. A. (1994). Focus groups: A practical guide for applied research (2nd edition). Thousand Oaks, CA: Sage.
- Lambert, R. M. (1990). Some thoughts about acquiring and learning to use a dog guide. *RE:view, 22*, 151-158.
- 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(1-3), 49-60.
- Lloyd, J. K. F., Budge, R. C., La Grow, S. J., & Stafford, K. J. (2000). A focus group exploration of guide dog and user partnerships. [CD-ROM]. *Proceedings of the 10th International Mobility Conference*, Coventry, England, 233-236.
- Lloyd, J. K. F., La Grow, S. J., Stafford, K. J., & Budge, R. C. (2008a). The guide dog as a mobility aid part1: Perceived effectiveness on travel performance. *International Journal of Orientation & Mobility*, 1(1), 17-33.
- Lloyd, J. K. F., La Grow, S. J., Stafford, K. J., & Budge, R. C. (2008b). The guide dog as a mobility aid part2: Perceived changes to travel habits. *International Journal of Orientation & Mobility*, 1(1), 34-45.
- Long, R. G., Boyette, L. W., & Griffin-Shirley, N. (1996). Older persons and community travel: The effect of visual impairment. *Journal of Visual Impairment & Blindness*, 90(4), 302-313.
- Mays, N., & Pope, C. (1995). Qualitative research: Observational methods in health

- care settings. British Medical Journal, 311, 182-184.
- Merton, R. K., Fiske, M., & Kendall, P. L. (1956). The focused interview: A manual of problems and procedures. NY: Free Press.
- Miner, R. J-T. (2001). The experience of living with and using a dog guide. *RE:view,* 32(4), 183-190.
- Morgan D. L. (1988). Focus groups as qualitative research. Newbury Park, CA: Sage.
- Morgan, D. L. (1996). Focus groups. Annual Review of Sociology, 22, 129-156.
- Muldoon, C. (2000). Does the presence of a guide dog enhance feelings of social acceptance in guide dog users? [CD-ROM]. Proceedings of the 10th International Mobility Conference, Coventry, England, 258-261.
- Nicholson, J., Kemp-Wheeler, S., & Griffiths, D. (1995). Distress arising from the end of a guide dog partnership. *Anthrozoos*, 8, 100-110.
- Refson, K., Jackson, A. J., Dusoir, A. E., & Archer, D. B. (1999). The health and social status of guide dog owners and other visually impaired adults in Scotland. *Visual Impairment Research*, 1, 95-109.
- Refson, K., Jackson, A. J., Dusoir, A. E., & Archer, D. B. (2000). Guide dog ownership in the United Kingdom: Analysis of ophthalmic and visual functions. [CD-ROM]. Proceedings of the 10th International Mobility Conference, Coventry, England, 315-318.
- Refson, K., Jackson, A. J., Plant, C., Parker, E., Dusoir, A. E., & Archer, D. B. (2000). Visual status and mobility of persons with retinitis pigmentosa: Guide dog owners and non-guide dog owners. *Optometry in Practice*, 1, 43-48

- Robson, H. (1985). Dog guide and blind person: The matching process. *Journal of Visual Impairment & Blindness*, 79(8), 356.
- Sanders, C. R. (1999). Understanding dogs: Living and working with canine companions. Philadelphia: Temple University Press.
- Sanders, C. R. (2000). The impact of guide dogs on the identity of people with visual impairments. *Anthrozoös*, 13, 131-139.
- Steffans, M. C., & Bergler, R. (1998). Blind people and their dogs. In C. C. Wilson & D. C. Turner (Eds.), Companion animals in human health (pp. 149-157). Thousand Oaks, CA: Sage.
- Wilkinson, S. (1998). Focus groups in health research: Exploring the meanings of health and illness. *Journal of Health Psychology*, 3, 329-348.
- Zee, A. (1983). Guide dogs and their owners: Assistance and friendship. In A. H. Katcher & A. M. Beck (Eds.), New perspectives on our lives with companion animals (pp. 472-483). Philadelphia: University of Pennsylvania Press.

Janice K.F. Lloyd, BSc., (Hons), DCR, EMT, CVT, Ph.D., Lecturer in Animal Behaviour & Welfare, School of Veterinary and Biomedical Sciences, James Cook University, Townsville, Queensland, Australia; e-mail: <janice.lloyd@jcu.edu.au>. R. Claire Budge, B.A., M.A., Ph.D., Research Officer, School of Health and Social Sciences, Massey University, Palmerston North, New Zealand; e-mail: <icx@inspire.net.nz>. Kevin J. Stafford, MVB, M.Sc., Ph.D., FRCVS, MACVSc., Professor Veterinary Ethology, Animal Welfare Science and Biomedical Sciences, Massey University, Palmerston North, New Zealand; e-mail: <K.J.Stafford@massey.ac.nz>. Steven La Grow, B.S. M.A, Ed.D., Professor of Rehabilitation/Director of Health, Disability & Rehabilitation, School of Health and Social Services, Massey University, Palmerston North, New Zealand; e-mail: <S.J.LaGrow@massey. ac.nz>.