Benefits of Animal Assisted Therapy in the Care of Hospitalized Children: Integrative Review

Benefícios da Terapia Assistida com Animais no Cuidado à Criança Hospitalizada: Revisão Integrativa

Beneficios de la Terapia Asistida por Animales el la Atención de Niños y Niñas Hospitalizados: Revisión Integrativa

RESUMO

Objetivo: Descrever os benefícios da Terapia Assistida por Animais no cuidado à criança hospitalizada. **Método:** Revisão integrativa nas bases de dados BVS (Lilacs, IBECS, BDEnf), MEDLINE e Scopus, entre abril e setembro de 2023, utilizando os descritores "criança hospitalizada", "terapia assistida com animais" e "hospitalização". **Resultados:** Sete artigos compuseram a amostra, destacando-se a facilitação da adaptação da criança ao ambiente hospitalar, o aumento da adesão ao tratamento e o favorecimento da recuperação clínica. A interação com os animais atuou como fonte de distração, prazer e entretenimento, contribuindo para o bem-estar e a melhora do humor, favorecendo também a comunicação, a socialização e o fortalecimento do vínculo entre criança, familiares e equipe de enfermagem. **Conclusão:** A terapia assistida com animais configura-se como uma estratégia complementar relevante no cuidado à criança hospitalizada, ao qualificar a humanização da assistência e gerar benefícios terapêuticos para a criança, seus familiares e a equipe de enfermagem.

DESCRITORES: Terapia assistida com animais; Criança hospitalizada; Terapia complementar; Hospitalização.

ABSTRACT

Objective: To describe the benefits of Animal-Assisted Therapy in the care of hospitalized children. **Method:** Integrative review of the BVS (Lilacs, IBECS, BDEnf), MEDLINE, and Scopus databases between April and September 2023, using the descriptors "hospitalized child," "animal-assisted therapy," and "hospitalization." **Results:** Seven articles comprised the sample, highlighting the facilitation of children's adaptation to the hospital environment, increased adherence to treatment, and promotion of clinical recovery. Interaction with animals acted as a source of distraction, pleasure, and entertainment, contributing to well-being and improved mood, while also promoting communication, socialization, and strengthening the bond between children, family members, and nursing staff. **Conclusion:** Animal-assisted therapy is a relevant complementary strategy in the care of hospitalized children, humanizing care and generating therapeutic benefits for the child, their family, and the nursing team.

DESCRIPTORS: Animal-assisted therapy; Hospitalized children; Complementary therapy; Hospitalization.

RESUMEN

Objetivo: Describir los beneficios de la terapia asistida con animales en el cuidado de niños hospitalizados. **Método:** Revisión integradora en las bases de datos BVS (Lilacs, IBECS, BDEnf), MEDLINE y Scopus, entre abril y septiembre de 2023, utilizando los descriptores «niño hospitalizado», «terapia asistida con animales» y «hospitalización». **Resultados:** La muestra estuvo compuesta por siete artículos, en los que se destacó la facilitación de la adaptación del niño al entorno hospitalario, el aumento de la adherencia al tratamiento y la favorecimiento de la recuperación clínica. La interacción con los animales actuó como fuente de distracción, placer y entretenimiento, contribuyendo al bienestar y la mejora del estado de ánimo, y favoreciendo también la comunicación, la socialización y el fortalecimiento del vínculo entre el niño, los familiares y el equipo de enfermería. **Conclusión:** La terapia asistida con animales se configura como una estrategia complementaria relevante en el cuidado del niño hospitalizado, al humanizar la asistencia y generar beneficios terapéuticos para el niño, sus familiares y el equipo de enfermería.

DESCRIPTORES: Terapia asistida con animales; Niños hospitalizados; Terapia complementaria; Hospitalización

Wéryda de Fátima Oka Lôbo de Almeida
Bachelor's Degree in Nursing from the Federal University of Piauí, Floriano- PI, Brazil
ORCID: https://orcid.org/0009-0004-0501-7861

Mychelangela de Assis Brito
PhD in Nursing. Nursing Professor at the Federal University of Piauí, Floriano- PI, Brazil
ORCID: https://orcid.org/0000-0002-4519-9979

Eloisa Assunção de Sousa Cunha
Nursing Student at the Federal University of Piauí, Floriano- PI, Brazil
ORCID: https://orcid.org/0000-0002-7309-4488

Gabriel de Lima Alves
Nursing Student at the Federal University of Piauí, Floriano- PI, Brazil
ORCID: https://orcid.org/0009-0006-3436-3995

Cristianne Teixeira Carneiro
PhD in Technology and Society. Nursing Professor at the Federal University of Piauí, Floriano- PI, Brazil
ORCID: https://orcid.org/0000-0002-0400-4733

Ruth Cardoso Rocha
PhD in Nursing, Nursing Professor at the Federal University of Piauí, Floriano-PI, Brazil
ORCID: https://orcid.org/0000-0001-6702-6844

José Cláudio Garcia Lira Neto
PhD in Nursing, Nursing Professor at the Federal University of Piauí, Floriano- PI, Brazil
ORCID: https://orcid.org/0000-0003-2777-1406

Maria Augusta Rocha Bezerra
PhD in Nursing, Professor of Nursing at the Federal University of Piauí, Floriano- PI, Brazil
ORCID: https://orcid.org/0000-0003-0472-1852

Received: 02/12/2026
Approved: 03/16/2026

DOI: https://doi.org/10.36489/nursing.2026v31i334p13333-13353

INTRODUCTION

Children who are hospitalized or undergoing complex treatment tend to exhibit a variety of negative psychosocial symptoms, such as anxiety, depression, sadness, difficulty communicating, loss of independence, and fear. This is further exacerbated by limited opportunities for socializing with peers, lack of space to play, or even the burden of pain associated with the ongoing pathology[1]. Furthermore, this suffering is not restricted to children, but also affects parents, caregivers, and family members[2].

To overcome these difficulties, Animal-Assisted Therapy (AAT) has been used in different contexts[3-5], revealing itself as a promising practice in the management of events such as pain, fear, and anxiety, complementing pharmacological therapy[6]. Evidence from a review on the subject showed that AAT has significant therapeutic effects, modulating the psychopathological state of children, improving their interpersonal relationships and perceived well-being[7] .

In the pediatric hospital setting, its application has stood out for providing multiple dimensions of care. In addition to contributing to the reduction of adverse effects associated with cancer[1], AAT has demonstrated a positive impact on reducing psychiatric complications[8]and improving quality of life, attenuating the state of anxiety before and after invasive interventions, as well as the frequency and intensity of pain in cases of chronic pain syndrome[9].

This evidence is compounded by the perception of family members, who often report TAA as a valuable intervention capable of reducing anxiety and supporting the emotional well-being of hospitalized children. In this process, nurses play a central role, not only in clinical management, but also in integrating AAT into family-centered care, strengthening the bond between the healthcare team, patients, and their caregivers, and promoting a more humanized and positive hospital experience for the child and their family[10].

However, despite the advances already documented, the literature still lacks studies that deepen the understanding of the benefits of AAT in pediatric hospitalization, as well as strategies for its implementation in clinical practice. Given this gap, this study aims to describe the benefits of animal-assisted therapy in the care of hospitalized children.

METHODS

This is an integrative review, conducted between April and September 2023, following the steps: a) choice and definition of the theme and establishment of a hypothesis or research question; b) sampling or literature search; c) establishment of inclusion and exclusion criteria; d) organization and summarization of information extracted from selected studies and categorization of studies; e) evaluation of studies included in the review, interpretation of results, and suggestions for future research; and f) presentation of the review/synthesis of knowledge[11]. The review followed the reporting recommendations of *the Preferred Reporting Items for Systematic Reviews and Meta-Analyses* (PRISMA) from the *Equator Network*.

The search was based on the following guiding question: What are the benefits of animal-assisted therapy in the care of hospitalized children? To structure the review, the PICo strategy was used, in which: P (population) – Children; I (intervention) – Animal-Assisted Therapy; Co (context) – Hospitalization, based on a combination of descriptors from *Medical Subject Headings* (MeSH), Emtree, CINAHL *Headings*, and Health Sciences Descriptors (DeCS), in addition to keywords on the topic, connected by the Boolean operators AND and/or OR (**Table 1**).

Table 1 - Strategy for extraction, conversion, combination, construction, and use of terms, according to the PICo strategy, 2023.

Objective/ Problem	What are the benefits of animal-assisted therapy in the care of hospitalized children?		
	P	I	Co
Extraction	Child	Animal-assisted therapy	Hospitalization
Conversion	Children	Animal-assisted therapy	Hospitalized child
Combination	Child; children; childhood; pediatric; paediatric; pediatrics; paediatrics; hospitalized child; hospitalized children; hospitalised child; hospitalised children	Animal assisted therapy; animal assisted therapies; therapy, animal assisted; animal facilitated therapy; animal facilitated therapies; facilitated therapy, animal; therapy, animal facilitated; pet therapy; pet therapies; therapy, pet; pet facilitated therapy; pet facilitated therapies; therapy, pet facilitated; pet-assisted therapy; therapy, pet-assisted; AAT; canine-assisted therapy; dog assisted therapy; equine-assisted therapy; animal intervention; animal-assisted intervention	Hospital; hospitals; hospitalization; hospitalisation; inpatient care; inpatient; pediatric hospital; paediatric hospital; hospital ward; pediatric ward; paediatric ward

DOI: https://doi.org/10.36489/nursing.2026v31i334p13333-13353

Construction	(Child OR children OR childhood OR pediatric OR paediatric OR pediatrics OR paediatrics OR "hospitalized child" OR "hospitalized children" OR "hospitalised child" OR "hospitalised children")	(Animal assisted therapy OR Animal assited therapies OR Therapy, animal assisted OR Animal facilitated therapy OR Animal facilitated therapies OR Facilitated therapy, animal OR Therapy, animal facilitated OR Pet therapy OR Pet therapies OR Therapy, pet OR Pet facilitated therapy OR Pet facilitated therapies OR Therapy, pet facilitated OR Pet-assisted therapy OR Therapy, pet-assisted OR ATT OR canine-assisted therapy OR dog assisted therapy OR equipe-assisted therapy OR animal intervention)	(Hospital OR hospitals OR hospitalization OR hospitalisation OR "inpatient care" OR inpatient OR "pediatric hospital" OR "paediatric hospital" OR "hospital ward" OR "pediatric ward" OR "paediatric ward")
Use	(child OR children OR childhood OR pediatric OR paediatric OR pediatrics OR paediatrics OR "hospitalized child" OR "hospitalized children" OR "hospitalised child" OR "hospitalised children") AND ("animal assisted therapy" OR "animal-assisted therapy" OR "animal assisted therapies" OR "animal-assisted therapies" OR "therapy, animal assisted" OR "animal facilitated therapy" OR "animal-facilitated therapy" OR "animal facilitated therapies" OR "animal-facilitated therapies" OR "therapy, animal facilitated" OR "pet therapy" OR "pet therapies" OR "therapy, pet" OR "pet facilitated therapy" OR "pet-facilitated therapy" OR "pet facilitated therapies" OR "pet-facilitated therapies" OR "therapy, pet facilitated" OR "pet-assisted therapy" OR "therapy, pet-assisted" OR "AAT" OR "canine-assisted therapy" OR "dog-assisted therapy" OR "equine-assisted therapy" OR "animal intervention" OR "animal-assisted intervention") AND (hospital OR hospitals OR hospitalization OR hospitalisation OR "inpatient care" OR inpatient OR "pediatric hospital" OR "paediatric hospital" OR "hospital ward" OR "pediatric ward" OR "paediatric ward")		

Source: prepared by the authors (2023).

The following databases or virtual libraries were used for the search: Virtual Health Library (VHL), *Medical Literature Analysis and Retrieval System Online* (MEDLINE via PubMed) and Scopus, Latin American and Caribbean Health Sciences Literature (LILACS), Nursing Database (BDENF), and Spanish Bibliographic Index in Health Sciences (IBECS).

The inclusion criteria were primary studies of a cross-sectional or longitudinal nature or clinical trials published in Portuguese, English, or Spanish, with no restriction on the publication period. Book chapters, theses, dissertations, monographs, case studies, experience reports, technical reports, editorials, and abstracts presented in event proceedings were excluded. The selection of studies was performed using Rayyan software, with independent reading by two reviewers, in order to reduce potential systematic errors or interpretation biases related to both the results and the research design. In cases of disagreement, a third reviewer was called in to ensure greater methodological rigor and reliability in the screening. Subsequently, data extraction was performed, considering the following variables: article title, authors and year of publication, language, objectives, type of study, level of evidence, main findings, and gaps or limitations identified.

In addition, an assessment of the level of evidence was also carried out, categorizing the studies into five levels: Level 1 – experimental (clinical trials and systematic reviews of RCTs); Level 2 – quasi-experimental (quasi-experimental studies and corresponding systematic reviews); Level 3 – analytical observational (cohorts and case-controlled studies); Level 4 – descriptive observational (cross-sectional, case series, and descriptive studies); and Level 5 – expert opinion and bench research (consensus and opinion studies).

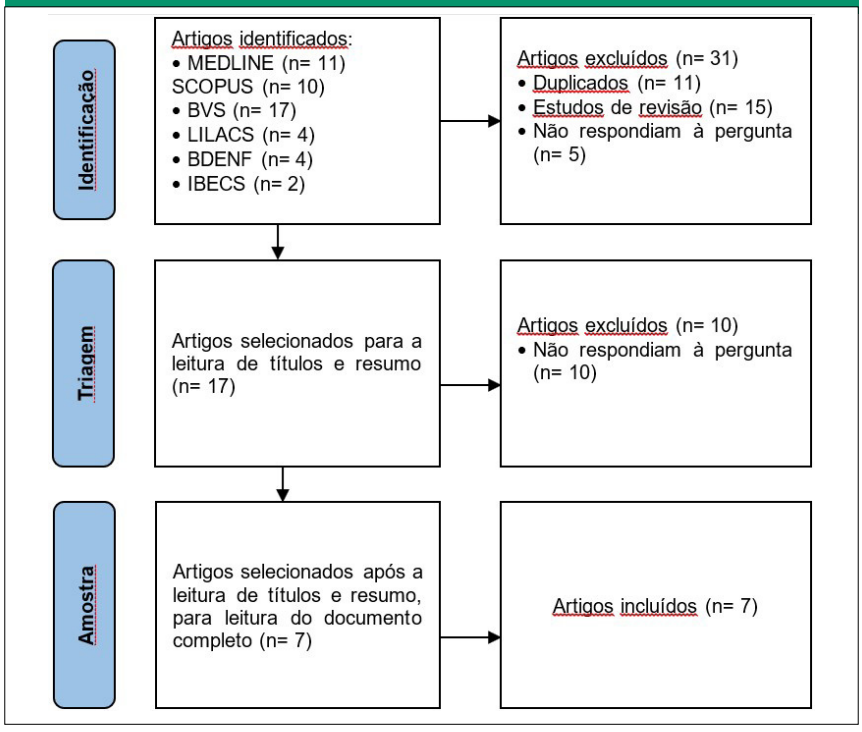
After critical and rigorous analysis of the studies, the data were analyzed and presented descriptively through figures, with the aim of making the visualization of the results clearer and more understandable. All ethical and legal aspects were ensured, guaranteeing the legitimacy of the authors, who were cited whenever the articles were mentioned.

RESULTS

After applying the search strategy to the selected databases, 48 articles were identified, 11 in MEDLINE, 10 in SCOPUS, 17 in BVS, four in LILACS, four in BDENF, and two in IBECS. After removing duplicates and applying the eligibility criteria, as well as analyzing adherence to the guiding question, seven studies fully met the established criteria and were included in the final sample for analysis (**Figure 1**).

DOI: https://doi.org/10.36489/nursing.2026v31i334p13333-13353

Figure 1 – PRISMA flowchart with selection of articles included in the review, 2023.



Source: prepared by the authors (2023)

There was a concentration of publications in 2004 and 2017, with two studies in each period, corresponding to 28.5% of the total analyzed. The MEDLINE database stood out as the main source of the articles included (n = 5; 71.4%). Regarding language, English predominated, present in five studies (71.4%), highlighting the centralization of international scientific production on the theme. Regarding the methodological design, there was a higher frequency of descriptive studies (n = 3; 42.8%), most of which presented a level of evidence 4b (n = 3; 42.8%). There was a predominance of non-randomized intervention studies and quasi-experimental designs, as well as observational and qualitative investigations, reflecting the methodological diversity employed to evaluate AAT in pediatric hospitalization contexts (Table 2).

Table 2 - Methodological characterization of the included studies and levels of evidence, 2023.

Nº	Objective	Type of study	Sample	NE
A1[13]	To design and implement a one-year animal therapy program for the pediatric oncology population that meets safety, quality, and efficiency standards	Clinical trial (no control group)	n= 27	4
A2[14]	Explore the effectiveness of canine visitation therapy in the treatment of pediatric pain in a tertiary care children's hospital	Clinical trial (pre-post)	n= 25	2
A3[15]	Evaluate the implementation of the animal therapy program "A Magical Dream," describing the relationship observed between participation in the program and the quality of care and satisfaction of participating parents and nurses	Descriptive observational study	n= 34	4
A4[16]	Verify the playful interaction between children and dogs in Animal-Assisted Activity	Descriptive observational study	n= 14	4
A5[17]	Assess the feasibility of studying animal-assisted activities in pediatric oncology and collect preliminary data on potential benefits	Quasi-experimental study	n= 19	2
A6[18]	Understand the perceptions of nursing staff and caregivers of children and adolescents with cancer regarding dog-assisted therapy	Qualitative study	n= 16	5
A7[19]	To evaluate the effect of a brief pet therapy visit and a comparison intervention on anxiety in hospitalized children	Quasi-experimental study	n= 93	2

Legend: A1= article number 1, A2= article number 2 (...); NE= level of evidence, according to the Joana Briggs Institute (2023).

Source: prepared by the authors (2023).

Regardless of the methodological design, the findings point to consistent results regarding the positive effects of interaction with dogs, especially with regard to reducing anxiety, pain, fear, and fatigue, as well as increasing well-being, relaxation, joy, motivation, and acceptance of hospitalization. Also noteworthy is the decrease in the use of analgesic medications in some studies, as well as the favorable impact on the child's experience with invasive procedures, chemotherapy, and surgery. In addition to the benefits for children, the studies also highlight positive repercussions on the hospital environment as a whole, including

DOI: https://doi.org/10.36489/nursing.2026v31i334p13333-13353

greater parental satisfaction, strengthening of the bond between children, families, and nursing staff, and improved communication and interpersonal interaction (**Table 3**).

However, recurring methodological limitations were identified, such as small samples, absence of a control group, dependence on subjective self-report measures, psychometric weaknesses of the instruments used, and logistical challenges related to the availability and handling of animals. These limitations reinforce the need for future investigations with more robust designs and greater methodological rigor, despite the consistency of findings favorable to AAT (**Table 3**).

Table 3 – Summary of interventions, main findings, benefits, and limitations of the included studies on Animal-Assisted Therapy in hospitalized children, 2023.

Nº	Study interventions	Main findings (summary)	Observed benefits	Main limitations
A1	Structured dog-assisted therapy program in pediatric oncology	Improved adaptation after chemotherapy and surgery.	Adaptation to hospitalization and improved recovery.	Risk of infection; allergies; organizational and financial impacts.
A2	Canine visitation therapy for pain management	Reduction in perceived pain and decreased use of analgesics.	Pain management; distraction; emotional well-being.	Small sample size; self-reported pain.
A3	"A Magical Dream" program, based on dog-assisted therapy	Emotional and behavioral strengthening of the child.	Acceptance of hospitalization; reduction of anxiety; improvement in socialization.	Small sample; instruments without psychometric validation.
A4	Playful interaction in dog-assisted activity	Playful interaction promoting children's mood and well-being.	Improved mood and child-family-team interaction.	Logistical limitations; small sample size.
A5	Therapy dog visits in pediatric oncology	Reduction in worry, fatigue, and negative emotions.	Relaxation; well-being of the child and parents.	No control group.
A6	Dog-assisted therapy, according to the perception of professionals and family members	Positive perception of AAT by professionals and family members	Hospital adaptation; humanized care.	Reduced number of professionals and dogs
A7	Pet therapy; although the term is broader, the study refers to dogs	Significant reduction in anxiety in children undergoing ART.	Decreased anxiety; improved parental satisfaction.	Single-center study with high sample heterogeneity.

Source: prepared by the authors (2023).

DISCUSSION

The results indicated that AAT is consolidated as a complementary intervention to pediatric treatment, with high value in the humanization of care and measurable effects on emotional, behavioral, and physiological outcomes, such as: facilitated adaptation of the child to the hospital environment, greater adherence to treatments, and improved clinical recovery[13,15,18]; decreased use of analgesics and pain medication after interaction with animals[14,17] , in addition to bringing professionals, family members, and the child closer together, improving communication and socialization[16-18] .

Furthermore, interaction with therapy dogs has also been identified as a powerful source of distraction, pleasure, happiness, and entertainment, directly contributing to improved mood, well-being, enjoyment, and positive emotional states[14,16]. The environment becomes more welcoming and relaxed, with a significant impact on both the child and their parents or guardians, promoting reduced anxiety, relaxation, decreased negative feelings, and strengthened emotional security of the child-family dyad[15,17,19] .

The literature corroborates that AAT has no curative purpose, but acts as an adjunctive therapeutic resource capable of temporarily shifting the focus from pain and suffering, restoring the child's self-esteem, joy, and confidence, and promoting socialization and collaboration with health professionals[20-21] . In addition, AAT reduces pain, fear, stress, and anxiety in hospitalized children and during medical procedures[22-23] .

This emotional effect extends to companions, who also experience a reduction in stress, fear, and loneliness associated with the hospital

DOI: https://doi.org/10.36489/nursing.2026v31i334p13333-13353

experience[23] . The interaction also enables greater social engagement, confidence in the environment, closer contact with the multidisciplinary team, and better socialization among peers[22,24-25] .

In the field of pediatric pain, there is consistent evidence that AAT contributes to the reduction of pain perception and behavioral distress, positively affecting parameters such as respiratory rate, oxygen saturation, diastolic blood pressure, heart rate, and cerebral oxygenation. Furthermore, it is safe and feasible in pediatric units, including intensive care units, and is widely accepted by caregivers, professionals, and patients. The practice is classified as an effective non-pharmacological alternative for reducing pain, fear, and anxiety in pediatric settings[5,26] .

In surgical settings, the presence of dogs has been associated with a reduced need for analgesic medication after procedures and a greater perception of well-being[6]. Pediatric patients undergoing surgery reported significant improvement in pain and a reduced need for analgesics, reinforcing the potential for incorporation into postoperative pain relief protocols[27].

In specific populations, such as children with Autism Spectrum Disorder, AAT has been associated with reduced aggressive behavior, less agoraphobia, greater engagement, enjoyment, and participation in activities, as well as improved appetite and independence[25]. Highly complex clinical contexts also reinforced significant benefits: children and adolescents with cancer experienced a significant reduction in pain, anxiety, and blood pressure, with reports of high efficacy in symptom relief[20] .

Regarding the applicability of AAT to nursing, the therapeutic use of dogs has been conceptualized as a relevant tool for the clinical and psychological recovery of hospitalized children and adolescents, being recognized as a possibility for specialized action in Pediatric Nursing. Furthermore, it is emphasized that nurses have the role of facilitating this practice by creating a safe institutional space, providing guidance to patients, family members, and staff, and incorporating it into nursing prescriptions when appropriate.

Furthermore, evidence shows that AAT strengthens communication, integration, and the formation of care bonds in the pediatric context and can be part of the conventional therapeutic process and an affective mediator in clinical care, helping to reduce depressive symptoms, stimulate self-esteem, and promote better behavioral management of children in relation to health unit procedures and routines[23].

Although there is a growing volume of international studies on AAT in pediatrics, the results also indicated persistent gaps in the Brazilian literature, especially from the perspective of nurses and the institutionalization of AAT as part of the therapeutic care plan, which limits its generalization and expanded implementation in national services[29] .

Regarding limitations, the scarcity and methodological heterogeneity of the available studies stand out, resulting in small samples and, in some cases, designs with less experimental rigor, limiting the generalization of the findings. It is also noted that all included studies used only dogs as AAT mediators, which restricts understanding of the therapeutic potential of other species and reduces the interspecific diversity of the interventions analyzed. Additionally, the predominance of subjective measures, the absence of control groups in some of the investigations, and the concentration of studies in international contexts are relevant limitations. Given this, future research should broaden the methodological and geographical scope, explore different animal species, and systematically investigate the impact of AAT on nursing staff, especially with regard to job satisfaction, coping with occupational stress, and preventing exhaustion in pediatric settings.

Despite the evidence on the benefits of AAT, there is still a gap in the literature regarding its application and effectiveness in the Brazilian context, especially from the perspective of nurses. In this sense, incorporating different perspectives and conducting multicenter studies can enrich the understanding of the factors that influence the acceptance and success of AAT in different healthcare settings.

CONCLUSION

TAA proves to be a relevant complementary intervention in pediatric hospital care, as it favors the child's adaptation to the institutional environment and qualifies nursing care through more humanized, relational, and welcoming practices, with consistent effects in reducing anxiety, stress, fear, pain, and emotional suffering, in addition to improving well-being, mood, communication between children, families, and staff, and adherence to treatment in different clinical contexts. However, there is still a need to expand national scientific production, especially through Brazilian, multicenter, and longitudinal studies that deepen the analysis of long-term outcomes, the impact of TAA on the nursing team, and the definition of care parameters that support its systematic incorporation into nursing protocols and prescriptions within the Unified Health System.

DOI: https://doi.org/10.36489/nursing.2026v31i334p13333-13353

References

1. Mahoney AB, Akard TF, Cowfer BA, Dietrich MS, Newton JL, Gilmer MJ. Impact of Animal-Assisted Interaction on Anxiety in Children With Advanced Cancer and Their Caregivers. J Palliat Med. 2024 Jan;27(1):75-82.

2. Cotoc C, Notaro S. Race, Zoonoses and Animal Assisted Interventions in Pediatric Cancer. Int J Environ Res Public Health. 2022 Jun 24;19(13):7772.

3. Kelker HP, Siddiqui HK, Beck AM, Kline JA. Therapy Dogs for Anxiety in Children in the Emergency Department: A Randomized Clinical Trial. JAMA Netw Open. 2025;8(3):e250636.

4. Punzo K, Skoglund M, Carlsson IM, Jormfeldt H. Experiences of an Equine-Assisted Therapy Intervention among Children and Adolescents with Mental Illness in Sweden - A Nursing Perspective. Issues Ment Health Nurs. 2022 Dec;43(12):1080-1092.

5. López-Fernández E, Palacios-Cuesta A, Rodríguez-Martínez A, Olmedilla-Jodar M, Fernández-Andrade R, Mediavilla-Fernández R, et al. Implementation feasibility of animal-assisted therapy in a pediatric intensive care unit: effectiveness on reduction of pain, fear, and anxiety. Eur J Pediatr. 2024 Feb;183(2):843-851.

6. Herrera V, Gutierrez-Rojas L, Alvarez-Mon MA. Compilation of animal-assisted therapy studies: A narrative review of clinical evidence. Psiquiatría Biológica. 2025 July–September;32(3):100738.

7. Fornefeld D, Zellin U, Schmidt P, Fricke O. The supporting role of dogs in the inpatient setting: a systematic review of the therapeutic effects of animal-assisted therapy with dogs for children and adolescents in an inpatient setting. Eur Child Adolesc Psychiatry. 2025 Jan;34(1):3-17.

8. Rodrigo-Claverol M, Manuel-Canals M, Lobato-Rincón LL, Rodriguez-Criado N, Roman-Casenave M, Musull-Dulcet E, et al. Human-Animal Bond Generated in a Brief Animal-Assisted Therapy Intervention in Adolescents with Mental Health Disorders. Animals (Basel). 2023 Jan 20;13(3):358.

9. Kiesewetter J, Herbach N, Landes I, Mayer J, Elgner V, Orle K, et al. Dog assisted education in children with rheumatic diseases and adolescents with chronic pain in Germany. GMS J Med Educ. 2023 Jun 15;40(4):Doc44.

10. Curcio F, Ivziku D, Pirisinu S, Bertocchi L, Gioiello G, Camoglio FS, et al. Parents' Perceptions of Pediatric Surgical Patients Regarding Animal-Assisted Therapy: A Qualitative Study. Healthcare (Basel). 2025 Sep 3;13(17):2207.

11. Mendes KDS, Silveira RCCP, Galvão CM. Revisão integrativa: método de pesquisa para a incorporação de evidências na saúde e na enfermagem. Texto contexto - enferm. 2008 Oct;17(4):758–64.

12. 17. JBI, Joanna Briggs Institute. Levels of evidence. [Internet] 2014 [cited June 1, 2023]. Available from: https://jbi.global/sites/default/files/2019-05/JBI-Levels-of-evidence_2014_0.pdf

13. Bouchard F, Landry M, Belles-Isles M, Gagnon J. A magical dream: a pilot project in animal-assisted therapy in pediatric oncology. Can Oncol Nurs J. 2004 Winter;14(1):14-7.

14. Sobo EJ, Eng B, Kassity-Krich N. Canine visitation (pet) therapy: pilot data on decreases in child pain perception. J Holist Nurs. 2006 Mar;24(1):51-7.

15. Gagnon J, Bouchard F, Landry M, Belles-Isles M, Fortier M, Fillion L. Implementing a hospital-based animal therapy program for children with cancer: a descriptive study. Can Oncol Nurs J. 2004 Fall;14(4):217-22. English, French.

16. Pereira VR, Nobre MO, Capella S, Vieira ACG. Interação lúdica na atividade assistida por cães em pediatria. Enferm Foco 2017[cited June 1, 2023];8(1):7-11. Available from: https://enfermfoco.org/wp-content/plugins/xml-to-html/include/lens/index.php?xml=2357-707X-enfoco-08-01-0007.xml&lang=p-t-br

17. Chubak J, Hawkes R, Dudzik C, Foose-Foster JM, Eaton L, Johnson RH, et al. Pilot Study of Therapy Dog Visits for Inpatient Youth With Cancer. J Pediatr Oncol Nurs. 2017 Sep/Oct;34(5):331-341.

18. Moreira RL, Gubert FA, Sabino LMM, Benevides JL, Tomé MABG, Martins MC, et al. Terapia assistida com cães em pediatria oncológica: percepção de pais e enfermeiros. Rev Bras Enferm [Internet]. 2016Nov;69(6):1188–94.

19. Hinic K, Kowalski MO, Holtzman K, Mobus K. The Effect of a Pet Therapy and Comparison Intervention on Anxiety in Hospitalized Children. J Pediatr Nurs. 2019 May-Jun;46:55-61.

20. Martins SMA, Jesus ML, Santos AA, Amorim LD, Vieira ACA, Araujo KN, et al. As produções de atividades assistidas por animais como alternativa terapêutica em pacientes oncológicos. Research, Society and Development. 2022;11(13):e68111335030.

21. Cruz TMAV, Guedes ATA, Bezerra ICS, Soares AR, Collet N, Coriolano-Marinus MWL, et al. Efeitos da terapia com cães na irritabilidade de crianças com Síndrome Congênita do Zika Vírus. Revista Neurociências. 2023;31(1):1-24.

22. Pinheiro SL, Silva C, Luiz L, Silva N, Fonseca R, Velásquez T, Grandizoli DR. Dog-assisted therapy for control of anxiety in pediatric dentistry. J Clin Pediatr Dent. 2023 Nov;47(6):38-43.

23. Brum CN, Dal Chiavon S, Berlanda JB, Lopes TN, Gaio G, Potrich T, et al. Animal assisted intervention in children's and adolescents hospitalization: an integrative literature review. Braz. J. Hea. Rev. [Internet]. 2021 Apr. 6 [cited 2025 Dec.

DOI: https://doi.org/10.36489/nursing.2026v31i334p13333-13353