**Tuesdays with Worry: Appreciating nature with a dog at the end of life**

By: Justin Harmon


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**Abstract:**

Dogs have been called ‘social lubricants’ for their uncanny ability to help people with serious illnesses and trauma find brief moments of catharsis, create meaningful relationships when there are none and connect with healthcare providers and other support team members for those with serious illnesses. In this paper, the therapeutic qualities of human–dog interactions will be demonstrated by focusing on one woman’s terminal cancer diagnosis while in end-of-life care through her shared leisure experiences with a dog in a natural environment. This auto/ethnography sought to exhibit the simple importance of a dog to the meaning-making process for someone coming to terms with their mortality. Complementary therapies and support are essential to those receiving medicalised care, but for those beyond the treatment stage, the important and necessary support is to be found in the relationships and activities that are of the most significance. As is demonstrated, dogs can provide this necessary kind of therapeutic support that may not be found elsewhere.

**Keywords:** Dogs | nature | cancer | palliative care | leisure

**Article:**

*Diane* didn’t say much while I was speaking to the Stage IV cancer support group. In fact, the only sound I heard from her was the low rumble from her oxygen supply. She listened intently, though, and when I mentioned that my dog (Worry) came out on all the hikes with me, her eyebrows raised and she became more attentive; it was about then that she shut off the valve to her air supply so she could listen better. I gave everyone in attendance a flier for the hiking program, but I didn’t expect many to be able to participate. As I was getting ready to leave the building, I heard a faint beeping sound slowly coming towards me. It was Diane’s oxygen concentrator making the noise, and when I turned around she said to me, ‘I sure wish I could go on a hike with you, but I haven’t got the energy anymore. But I really like being in nature and I love dogs. If you’d ever be interested in going to a park sometime with Worry, I would be delighted.’ – From the author’s journal
Introduction

Canines have been faithful human companions for an estimated 15,000 years (Yong, 2015), and their connection to humans has only grown more intimate, with many referring to their beloved dog as a member of their family (Carr, 2014). And while dogs have been employed in numerous working capacities over their long history, it is only in the last half century that dogs have become increasingly embraced for their therapeutic potential in helping people with a wide array of health needs (Johnson, Meadows, Haubner, & Sevedge, 2008).

Dogs have been called ‘social lubricants’ (Moody, Maps, & O’Rourke, 2002) for their uncanny ability to help people with serious illnesses and trauma find brief moments of catharsis (Browder, 2009), create meaningful relationships when there are none (Fox & Gee, 2017) and connect with healthcare providers (White et al., 2015). In this paper, the therapeutic qualities of human-dog interactions in natural environments will be demonstrated by focusing on one woman’s terminal cancer diagnosis while in end-of-life care (Engleman, 2013).

Kleiber, Hutchinson, and Williams (2002) highlighted the potential of leisure to be used as a coping mechanism for those with serious and terminal illnesses because it can help buffer against the negative emotions that often accompany traumas. Janke and Jones (2016) concurred, suggesting that leisure can help people transcend the loss of another person. Here it will be displayed that leisure, in the form of meaningful time spent with a dog in nature, can be of great significance to the person who is navigating the meaning-making process while coming to terms with their mortality. As will be displayed, what started out as me volunteering to help someone with terminal cancer get out into nature turned into a new friendship—between the patient and my dog.

Literature review

Cancer and the end-of-life

It is common for people near the end of their life to surrender roles and reduce or eliminate their participation in once enjoyable activities and relationships (Warne & Hoppes, 2009). Once a cancer diagnosis becomes terminal, the patient may feel as if they are a burden to loved ones and lose a sense of dignity about themselves (Chochinov et al., 2005). Because of this, the main purpose of palliative care is to aid in maintaining the highest quality of life (QOL) possible for the patient during their remaining time, typically defined by the patient’s preferences (Fegg et al., 2010). Often these QOL markers are related to meaningful leisure activities that have held significance over the course of one’s life (Hendricks, 2012).

Leisure has been demonstrated as a coping mechanism for traumatic life events and is believed to be most effective when it is personally relevant (Hutchinson, Loy, Kleiber, & Dattilo, 2003; Kleiber et al., 2002). The opportunity to participate in meaningful leisure, especially near the end of life, can help the patient find meaning in the face of their illness (Krause, 2009). If patients are still able to find purpose when they are dying through some form of leisure, it can improve coping mechanisms as well as alleviate aspects of physical symptoms (Tomás-Sábado et
al., 2015). Often this new meaning involves letting go of the ‘unattained’ goals and focusing on new ones that are more realistic based on the limitations brought on by their health status (Martin & Kleiber, 2005). This requires a shift in focus and a positive reorientation to make the most of what is within reach; this can often be a highly distressing process (Chochinov et al., 2009). However, the creation of a holistic approach to care can ease that sense of distress greatly (Chochinov et al., 2005). For those who found meaning through the outdoors pre-diagnosis of cancer, there still remains significant benefit for them to find with continued exposure to natural environments post-diagnosis of cancer (Song, Ikei, & Miyazaki, 2016).

Fegg et al. (2010) found that people in palliative care find high levels of personal meaning through exposure to nature and interactions with animals, though people in this stage often have less opportunity or ability to fulfil those pleasures. It has been documented that immersion in nature is closely associated with meaning making for those nearing the end of life (Nakau et al., 2013), suggesting that exposure to natural environments can be a necessary form of therapeutic support for some. Related, people who have experienced a ‘close brush with death,’ such as a terminal diagnosis of cancer, report high levels of appreciation for being in nature to reorient and find some semblance of peace in their life (Martin & Kleiber, 2005). Those who receive benefit from exposure to natural environments, and are also comforted by the company of dogs, may find the synthesis of therapeutic natural landscapes with a dog to be of significant value to their state of being, regardless of their health prognosis (White et al., 2015).

Human-dog bonds

Numerous studies support the claim that spending time with a dog leads to a sense of positive wellbeing in one’s life (Charles, 2014, 2016; Duvall Antonacopoulos & Pychyl, 2014; Haraway, 2003; Smith, Treharne, & Tumility, 2017). Charles (2016) and Haraway (2003) have established the need to explore the dynamic of the dog-human bond more intimately, suggesting that we live in a post-humanist society and should embrace the reality that for many people, the dog(s) in their lives are as loved and essential to their happiness as any human could be. Haraway (2003) put forth the notion that, in our ever-evolving relationship with our beloved dog companions, we need to recognise them as adults, albeit of another species, who are capable of having a real relationship with us, and not simply reduce them through infantilising or overtly anthropomorphising behaviours or interactions. Because dogs are capable of reciprocating the feelings and mood of their guardians, their companionship and presence in our lives can be of paramount importance (Charles, 2014). With dogs’ innate ability to sense human emotion and improve mood, they can also be important members of a support team in the face of harrowing life circumstances like serious illness (Crossman, Kazdin, & Knudson, 2015).

The therapeutic properties of dogs

Evidence suggests that dogs have ‘agency’ (Carter & Charles, 2018; Irvine, 2004), thus indicating their potential to make real, lasting connections with humans when feelings of affection are reciprocated (Fox & Gee, 2017). Because of this innate ability to connect with people, dogs often make for ideal ‘therapists’ in helping people cope with illnesses and traumas (Creagan, Bauer, Thomley, & Borg, 2015; Marcus, 2012; Moody et al., 2002; White et al., 2015). Specifically for people with advanced stage cancer, dogs have been shown to provide
comfort and lower stress for those receiving chemotherapy (Chubak et al., 2017; Urbanski & Lazenby, 2012). Equally notable, it has been shown that pain severity decreases after dog visits to outpatient clinics as well (Marcus et al., 2012). All of this evidence suggests that the benefits of human-canine interactions are significant. While the preceding studies are indicative of animal-assisted therapies (AAT), goal-directed interventions where a dog is part of the treatment process (Horowitz, 2010), dogs can be beneficial in less structured and non-medicalised environments as well.

Animal-assisted activities (AAA) include casual activities that involve dog visits, but are not focused on the treatment process (Horowitz, 2010), though may still have significant benefit to the patient or client. For those who have difficulty in speaking about their illness or fragility, dogs can serve as mediators for facilitating the expression of emotions and concerns (White et al., 2015). Dogs can be a ‘catalyst’ to start conversations that are difficult to have for people with cancer (Browder, 2009), thus improving the relationship between care provider and patient (Johnson et al., 2008). Not all health needs are attended to exclusively in medicalised settings or venues, therefore there remains a need for coping resources outside of hospitals and clinics, too, especially in the places where patients engage in a preferred leisure activity (Harmon, 2018).

Building on the unique relationships that are often established between humans and dogs (Kulick, 2017), this manuscript seeks to illustrate how one person with terminal cancer built a friendship with a dog while spending time in nature.

Methods

Background of study

I started a hiking programme in late 2016 for those affected by cancer. The hiking programme is not intended to focus on the illness experience, but instead the ‘normalisation’ process of life with cancer or life after cancer. The group hikes year-round, every Wednesday and Saturday. Midweek hikes are shorter in duration and are designed to be at a slower pace. These hikes are geared towards those who may have stamina, balance or lower levels of physical ability, as well as those whom are no longer working. Saturday hikes are longer and at a faster pace and are accessible to those with higher levels of physical ability. The majority of participants are referred by oncologists and clinical social workers from the nearby cancer centre. Additionally, I also speak at numerous events at the cancer centre, whether it be type-of-cancer specific groups (i.e., breast, prostate), or the post-treatment programmes whose intent is to promote active and healthy lifestyles either after diagnosis or after patients have gone into remission. Therefore, other participants come from these forums as well.

Auto/ethnographic approach

Autoethnography draws heavily from the personalised accounts of one’s phenomenological experience in order to craft an understanding of what has taken place (Denzin, 2006). Often autoethnography has deeply personal and emotional components involving introspection that turn the narrative into the method (Ellis, 2004). However, because this essay was crafted on the story of Diane’s interactions with my dog, there are elements of duoethnography here as well (Breault, 2016). Duoethnography is traditionally understood as two researchers working together.
to build a narrative. In this instance, however, my auto/ethnographic understanding of what took place was a reflection of Diane and Worry’s ‘conversations’ to construct the story I tell here (Taylor, 2007). Norris and Sawyer (2012) said that in duoethnography, ‘the journey is mutual and reciprocal’ (p. 13), so in that sense, Diane’s story of her illness and mortality, as told to my dog, indicates a cooperative sharing of the meaning and embodiment between myself and Diane, and certainly between she and Worry as well (Charles, 2016). This was further substantiated in the conversations between Diane and me on the numerous car rides home. This is also where member checking took place and trustworthiness was established (Tracy, 2013), as I would delicately ask for clarifications about what I heard and how I interpreted it, but also get Diane’s teasing of me for tiptoeing around the issues related to her health and mortality. Because of this, the manuscript is in many ways co-constructed (Ellis, 1998).

Perhaps more accurately though, this is neither autoethnography or duoethnography, but auto/ethnography, a hybrid or derivative of narrative ethnography (Gubrium & Holstein, 2008). Gubrium and Holstein said of narrative ethnography that it is the ‘social dimensions of narratives… that take us outside of stories and their veridical relationships to storytellers and experience’ (p. 250). I initially did not approach these outings with Diane and Worry as ‘research’—that is until I saw the relationship and its healing properties that unfolded. And even as I started to think about my roles as chaperone and voyeur for these two friends, I wondered just what sort of worthwhile scholarship might come from it. Ellis (2004) stated that anyone undertaking a form of autoethnographic research was ‘going into the woods without a compass’ and would need to take time to find their bearings and get ‘the lay of the land’ (p. 120). This was true metaphorically, and in some ways, literally as well.

The rationale, then, for embracing the auto/ethnographic approach is an attempt to bridge my perspective and understanding of what transpired as a researcher with Diane’s perspective of coming to terms with her mortality. However, there is clearly another very important individual involved in this story: my dog, Worry. Hamilton and Taylor (2017) warned against overvaluing the human in human-animal interactions, and this is something I have tried to respect in the representation to follow. Worry and Diane are the central figures in this essay, and it goes without saying that their story could not be told without both as they are central figures in what transpired.

Other autoethnographic forays into interactions with those near death have chronicled the conflicting accounts of making sense of someone else’s mortality (cf. Warne & Hoppes, 2009). As an auto/ethnographer, it is my duty to provide enough detail to enable the readers to determine the transferability of the phenomena to their lives (Ellis, 1998). Therefore, this is not an attempt to tell Diane’s story, but to chronicle the importance of how someone facing the end of their life derived great benefit from exposure to natural environments and time spent with a friendly dog while coming to terms with mortality.

**Tuesdays with Worry**

*I picked up Diane the following Tuesday to go out to the marina and sit at a picnic table that looks over the water and a forested area popular for its trails. We started to get acquainted on the ride over and much of our first discussions involved the basic ‘getting to know you’ back-
and-forth common to those newly acquainted. I could tell she was very interested in Worry, and while my pup is very friendly, sometimes she can be more interested in what’s going on outdoors than other people. Usually when we come to the marina it is for a hike; I think Worry was a little bummed we weren’t off in the woods this Tuesday. While Diane slowly and softly petted her, Worry looked off into the forest, though she seemed content with the attention. – From the author’s journal

Meeting a friend

I picked up Diane on most Tuesdays for about six months. The first time I spoke with her, in the hallway after the Stage IV cancer meeting, she mentioned that she had recently been given ‘a year of good living left’ as she put it. A few months after that statement, I was curious if that diagnosis held true, or if it had been updated—for better or worse. Diane (71 years old) was on her second cancer diagnosis. The first was breast cancer in her early 50s; the second was lung cancer that metastasised to her bones at 68 years old.

When I picked her up the very first time, I asked her about her past experiences ‘outdoors’ and her love of dogs. She was brought up in rural North Carolina as a ‘tomboy,’ always playing outside with her brothers and cousins on the family farm. She credits her upbringing, and the outdoors, for making her aware of the importance of taking care of the environment, though as she put it, sometimes she did not always practice what she preached. She felt the older she got the more she respected wildlife and wildlands, and felt especially strongly about society’s responsibility to take care of its natural resources. While she had not spent much time immersed in the wilderness in years, she felt it always ‘called’ to her. Diane found it to have a calming influence and that was something she hoped to get out of our outings.

Dogs, though, were very important to her. They had been part of her family ever since she was a child, and like nature, the older she got, the more she appreciated them. Her last dog had died shortly after her second cancer diagnosis, and that made the illness even more difficult for her. Diane’s family had encouraged her to get another dog; they thought it would help her cope with her new diagnosis, but she was concerned the dog would outlive her—or worse, that she simply would not be able to take care of it. She did not want to build a bond with another dog only to have to leave it to someone else. Because of this, she said her biggest inspiration to come out was to get to hang out with a dog on a regular basis and not feel obligated to take care of it if she were ever unable to. I imagine she did not foresee such a close bond coming from their interactions.

Down by the water

*After a few Tuesdays in a row (we always went out on Tuesdays), I noticed that Diane was building an endearing rapport with Worry. I consciously started to remove myself from the dialog and let them interact more, with me slowly scooting to the other side of the picnic table as I looked out over the lake. Worry had also grown less ‘worried’ about not being off in the woods on a hike; she seemed to enjoy this special regularly scheduled attention from Diane. And while Diane and I hadn’t talked too much to one another about her illness and fate to that point, she*
We settled on visits to the marina for a few reasons, but mostly because it had a clear view of the water and abutting forest, as well as decent shade and seating. Diane did not like sitting on the hardwood planks of the picnic table, they put pressure on her bones and joints and made her ache, so on our second visit she brought a blanket with her, though that did not appear to offer much comfort. By the third visit I had dug out an old collapsible nylon camping chair that set low to the ground. She found that to be the most comfortable, but it also made it harder for her to get up. Because of this I had to learn a gentle way of helping her up, something akin to picking a drunk up off their butt. It was awkward at first, but after several weeks it became second nature. She no longer grunted because I was no longer unintentionally, and often somewhat carelessly, hip-checking her as I tried to get leverage. Worry always appeared to find this act amusing. A half-cocked head and a slowly wagging tail indicated that she assumed I did not know what I was doing. She was correct.

In the early weeks I sat next to Diane on the uncomfortable picnic bench, likely just as uncomfortable as she had been because of my boney butt, though I tried not to let on this was so. My goal was for her to be as comfortable as possible, and I wanted each experience to be enjoyable. At the beginning, though, I had no clue what would be enjoyable to her and what would not. I am not typically one to sit idly at a park, nor is Worry, so we both had to learn to find comfort in our new activity. This was a well-needed lesson in patience for both of us.

It did not take long for the routine to become comfortable for us, and since we were never there for more than 30 minutes, and rarely ever that long, I adjusted easily to the new weekly routine. Worry had also accepted that Tuesdays were for relaxing, and with her comfy dog bed laid next to Diane’s camping chair, they both appeared quite content. It was me who was the last to acquiesce. This was in part due to physical discomfort, and in part due to my fidgety nature, but more than anything it was because I always felt as if I had to talk to Diane. She was too polite to tell me there was no need for my constant chatter; eventually I learned that she simply wanted to look over the water to the forest beyond it and pet my dog. And as the Tuesdays rolled by, for those short 20 minutes or so, I had to wonder if Worry was mine or hers during those moments. Worry apparently did not feel the need for my constant chatter or attention either.

Confiding in Worry

After a couple of Tuesdays in a row where inclement weather and Diane’s health prevented us from going out, she got in my car far our next outing and Worry almost jumped into her lap. This was, of course, after she had started whining at the sight of Diane slowly ambling down her walkway with oxygen tank and cane in tow. I took this as a good sign. Diane, barely acknowledging me said, ‘There’s my sweet girl! Oh, how I’ve missed you!’ Worry laid down in the back and Diane chitchatted with me on our drive to the marina. She confided in me that these brief outings were the premier highlight of her week, and she really missed not being able to get out the two weeks prior. She even indicated that she felt worse for having not had our routine. Diane said, ‘You know, weather and grogginess be damned. I don’t want to miss another Tuesday with my girl!’ – From the author’s journal
Eventually I took the hint—as loving as it was—that Diane was there at the marina solely to be with Worry. She and I talked on the car ride to and from, and enjoyed one another’s company, but I finally deduced that she had created a sacred space where only one other being was needed—my dog. And that was fine. More than fine. By the fourth or fifth week Diane started having playful conversations with Worry, and I found them endearing, though at first none were very introspective or impactful, just the typical ‘Who’s a good girl?’ talk we all have with our pups. Eventually, though, she started to confide in Worry about her memories, fears, and the things she wished she could do but never would. I do not believe these revelations were meant for my ears, even though I was mere feet away; there was never a glance my way nor did Diane ever directly address me during these moments. Many times the things she would say to Worry were very heartfelt and emotional; I constantly found myself with blurry eyes, barely capable of holding back the tears. I never saw Diane cry, though; by this point she had accepted her fate, even if she did not know exactly how much longer she had.

The first ‘conversation’ she had with Worry really stuck in mind, likely because the statement was so powerful and I had not expected it. Diane said, ‘Worry, I’m not ready to die, but I guess it’s not my choice, is it?’ At that moment I felt like I should say something, but knew that was not what Diane would have intended for me to do, nor would I be able to offer anything that could assuage those concerns of hers. The only response she was looking for was a comforting glance from Worry, which she received, and then Worry closed her eyes and let out a deep sigh of comfort.

The reversal of seasons

By late in the fourth month of Tuesdays with Worry, just as the winter nip was starting to retreat from the air, and the buds began to peak their heads out of tree limbs everywhere, Diane finally started to show a downtick in her health. She had always been frail, and to look at her from day one you would have known she was dealt a heavy hand, but now her colour was dissipating and her movements, while always slow, were now quite measured and burdensome. It was as if she felt one wrong move would be her last. This may have been so since the cancer had penetrated much of her skeletal structure in her hips and lower back—she had become the china shop and the world the bull. She also had graduated from cane to walker, though she had not lost her sense of humour: in place of the traditional tennis ball on each leg she had indecipherable animal tails. I never asked, but I assumed they were dog tails.

Nevertheless, she was just as adamant about going to our spot (or more accurately, their spot) every Tuesday. While her health had gotten worse, her constitution seemed stronger: if I was available, she was going out. No discussion to be had. She stuck to her guns about her earlier claim from a few months earlier, there would be no Tuesdays missed on her account.

And now that the weather was changing for the better, and spring was coming into full bloom, her connection to the environment became that much more apparent. Her connection to Worry had always been there, but it was not until roughly four months in that her love of the outdoors was visually reawakened, almost as if it also came out of hibernation. She began to bring a few books with her, stuffed in an old, worn-out, reusable cloth grocery bag, one about birds of the
region and the other about trees in the area. They looked well-worn, dog-eared and highlighted, creased with broken spines. And as her health grew worse, her interactions with me grew more prevalent and intentional; at least in the car. The marina still involved little interaction between she and I, except for the seemingly programmed, ‘Okay, I think we should go now’ every time we would depart.

She would quiz me on birds and trees, and I never did very well. I had worked in forestry for a little while and my grandma was a birder, and because Diane knew these facts, she always acted playfully disappointed at my poor performance. Nonetheless, I was a quick study and began to retain some of the knowledge she imparted on me. I also started to figure out that she has an awfully dry sense of humour, something near and dear to me. All those hard times she had been giving me came from a loving place. Once I figured this out I would tease her, too; I think it helped her feel young and healthy, even if only for a moment. But once we arrived at the marina, and I pulled up next to the picnic area, she waited patiently for me to help her out and over to the picnic table. She no longer could sit in the low-slung camping chair, and a fluffy pillow had made its way into use instead. Worry still laid on her dog bed from the car, and Diane never truly settled in until that was in place next to her and Worry had laid down on it. The dog could no longer put her head on Diane’s lap, so now it usually rested near Diane’s leg, almost always touching it.

On a Tuesday in late March, almost five months after our first outing, Diane’s conversations with Worry returned to the tone of her first ominous comment that caught me off guard a while back. Diane and I had discussed her plans for the upcoming summer; she was going to spend a couple of months with her family on the beach. This knowledge must have been the impetus behind this statement: ‘Worry, I may not see you again. I’ll be gone for a while and I don’t know if I’ll come back.’ Worry was laying on her side, eyes closed, with a gentle breeze blowing off the water lightly ruffling her coat. At Diane’s mention of her name, though, she looked up, blinked, and closed her eyes again. It obviously probably did not ‘mean’ anything, but I wanted it to mean, ‘No, we will. It’s okay.’ In reality, though, I just was not sure. After all these months together, I had gotten comfortable in our routine, and I knew I would miss it once it was over. I was certain Worry would too.

Summer breeze

Diane missed her first Tuesday in months at the end of April (well, the first of her doing). I had to cancel some for work obligations from time to time, which she always ribbed me about, but this particular Tuesday she was not up to it. In fact, while we rarely talked by phone unless one of us was running late, I got a call from one of her caretakers saying that she would not be able to leave the house that day. It was instantly saddening, but the caretaker assured me that she would be back the following week. She even told me that, ‘Worry can stop by if she’s free though.’ I am not certain if this is true, but I could have sworn I heard Diane chuckle in the background when this was said. We stopped by that day, briefly. Worry got a lot of love, and gave some back; it was pretty clear they both enjoyed the visit.

The following Tuesday, the first in May, the caretaker called again to say that Diane was under the weather still. I asked, ‘Should Worry stop by?’ The caretaker replied, ‘No, I don’t think it
will be a good idea today. If something changes, I’ll let you know.’ That typically reserved hour for driving and time spent at the marina was especially restless that day. It would be safe to say I was ‘out-of sorts.’ Worry seemed restless too.

The next day Diane called to say that she was moving up her plans to go stay with her son’s family on the beach. She did not need to say more, I could hear it in her inflection; she was not doing well. I told her to write me some letters and we could be pen pals for the summer until she came back. There was a pregnant pause that was thickened by reality settling in. ‘I’ll see what I can do about that,’ said Diane. I responded, ‘Okay. Well, Worry would like a picture of the ocean. Take one if you get the chance.’ I am not sure why I said that, but I think I was trying to maintain a positive tone, and only something corny would save my voice from cracking. She responded, ‘Who’s got time for that? Not us dyin’ folk!’ I laughed. She asked me to stop by with Worry one more time, and I did, the next day. Upon arrival, the pup displayed her usual excitement at seeing Diane: an endearing whine, a helicopter-ing tail that batted everything in its way, and of course, bright eyes that signalled the sight of her ‘long-lost’ friend. Their exchange was sweet and playful, as much as Diane could muster, and her parting goodbye to Worry was strong and confident. It was almost like she was protecting Worry from the obvious: they likely would not see each other again. Worry, ever ready for the next adventure, trotted through the door on our way out, but she stopped to look over her shoulder; I think she could feel the warm rays of Diane’s smile on her fur. I was unable to look back, but because I had seen that exchange before, I could feel it in the air as my arm hairs bristled.

A few days later, a Tuesday, Diane’s son picked her up and drove her back to his place at the beach. Several more days past when I realised everything had been moved out of her apartment. She had not mentioned it, but upon reflection it was obvious that her time in this city was through. She would live out her days on the beach with her family, soaking in the warm rays and summer breeze off the ocean, the way she had done with Worry at the marina.

**Discussion**

Diane’s upbringing and a majority of her healthy life were spent in nature and with dogs as faithful companions, thus suggesting a clear importance of both to her life course development (Hendricks, 2012). Forests and other natural environments have been documented as ‘therapeutic landscapes’ by many (cf. Morita et al., 2007), and this can also be especially true for those diagnosed with cancer (Cimprich & Ronis, 2003). Equally so, as evidenced by the story of Diane, dogs can provide extraordinary levels of comfort for people coming to terms with serious illnesses (Moody et al., 2002). Diane’s ‘conversations’ and time spent with Worry allowed her to externalise her fears and thoughts related to her mortality, thus creating a feeling of catharsis in the process (Marcus, 2012).

For Diane, the synthesis of two meaningful leisure activities, time spent in nature and the company of Worry, granted her coping mechanisms (Hutchinson et al., 2003) that were otherwise not readily available. Since she had not been active in the outdoors in quite some time, and lost her last dog roughly three years earlier, two very important aspects of her identity had been absent from her life. That these significant aspects would resurface late in her life is both
humbling and saddening. I have often wondered how both could have been beneficial to her earlier on in the diagnosis.

Diane seemed to find peace out at the marina with Worry; she became comfortable with where she was in life by sharing her introspections with her (Martin & Kleiber, 2005). By having a say in how she found healing through leisure highlights the importance of the holistic care practice for those with serious and terminal illnesses (Hutchinson et al., 2003). And while Diane may not have been looking to have conversations about her illness with me directly, the mere comforting presence of Worry stimulated her ability to release the difficult emotions that were stuck inside (White et al., 2015). Complementary therapies and support are essential to those receiving medicalised care (Docherty, 2004; Marcus, 2012), but for those beyond the treatment stage, the important and necessary support is to be found in the relationships and activities that are of the most significance (Fegg et al., 2010). For Diane, and many others, dogs provide a kind of support that is not found elsewhere (Carr, 2014; Fox & Gee, 2017).

**Conclusion**

On the fourth consecutive Tuesday that the three of us did not go to the marina together, Worry and I went there without Diane. I tried to sit at the picnic table but it was difficult; it was too different. I never liked doing it before meeting Diane, and I guess with her now several hundred miles away I came around to not liking sitting at the marina again. Instead we went for a hike. Worry seemed happy about that. I was torn. I do not think Worry had forgotten about Diane already, but in some way I interpreted her excitement in bounding through the forest as an extension of her friendship with Diane; I guess it is what Diane would have wanted for her dear friend.

Diane told me before she left that while her health had gotten worse, she did not think she would die anytime soon. She did not indicate whether that was a good thing or not. The most meaningful thing she did tell me was how much she loved my dog and appreciated my willingness to share Worry with her. Her parting words were that I should ‘keep taking care of that dog like she is the most important thing in the world.’ I agreed to do just that.

Worry clearly provided Diane a lot of comfort, as evidenced by their six months together, and coupled with the natural beauty of the marina, I think we both helped Diane find a little peace with her station in life. While I have seen Worry bond with other humans, there was something special about her interactions with Diane. Worry has an observant and curious personality, but she is often quite reserved around most people. However, from the very beginning it was clear that Worry took to Diane—and vice versa—quite quickly. It was almost as if each of them were kindred spirits who happened to be in need of some extra companionship in their lives. Charles (2016) posited that animals can be surrogates for significant human-human relationships, something that Diane was clearly in need of. Just the same, Diane treated Worry like a close confidant, or an old friend (Evans-Wilday, Hall, Hogue, & Mills, 2018). She confided in Worry, acknowledging her as an important ‘person’ at a pivotal moment in her life (Taylor, 2007).

As Worry is also getting older, I think maybe there was some psychic connection between the ‘two aging ladies’ as Diane once referred to herself and her friend. Haraway (2003) stated that
the relationships between a dog and their humans are co-constructed, and that these friendships are dependent on the forming of a language that is unique to the establishment and evolution of that bond. As was evidenced, the connection was not a ‘given,’ but ‘created,’ between Diane and Worry. Charles (2014) remarked that dogs can provide a sense of ‘ontological security’ that leads to a reciprocal feeling of kinship between canine and human that is rooted in ‘connectedness and belonging’ (p. 726). The personal cues that Diane showed and shared with Worry invited the unique traits of her dog-ness to attend to the very specific needs Diane sought: a non-judgmental and open friend to simply spend time with (Evans-Wilday et al., 2018; Sanford, Burt, & Meyers-Manor, 2018)

And now that Diane is not a regular part of our lives any longer, I find myself even more in tune with this dog, something I never thought possible. We have always had wonderful chemistry—I love her like a kid—but now I look at her as the next aging friend I have to make sure has a rewarding last few years of life. She has not started to slow down, yet, but I have become ever more aware that I need to really embrace my time with her as much as possible. In some ways, this obvious point was shown to me indirectly by Diane: nature and close companionship, even between species, are two imperative components of happy lives for many people. I always knew this, but now that I have been reminded of it by someone who came into our lives almost as quickly as she exited, the beauty of these connections between humans and animals has never been more apparent.

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No potential conflict of interest was reported by the author.

Notes
1. A pseudonym.

Notes on contributor
Justin Harmon, PhD, is an assistant professor in the Department of Community and Therapeutic Recreation at the University of North Carolina Greensboro. His two primary research foci are the use of music for life course development and recreation interventions post-diagnosis of cancer. When not in the classroom he is typically found in the forest with his dog or at a concert.

References


