

Magazine

Wonder Dog

By MELISSA FAY GREENE FEB. 2, 2012

In May 1999, Donnie Kanter Winokur, 43, a writer and multimedia producer, and her husband, Rabbi Harvey Winokur, 49, beheld the son of their dreams, the child infertility denied them. Andrey, a pale dark-eyed 1-year-old in a cotton onesie, held in a standing position by a caregiver, appeared in a short videotape recorded in a Russian orphanage. If the couple liked the little boy, they could begin the legal process of adopting him. They liked the little boy very much.

Four months later, the Winokurs flew to Russia from their home in Atlanta to adopt Andrey, whom they renamed Iyal, and to adopt an unrelated little girl two days younger, whom they named Morasha. All four appear in another orphanage video: the beaming new parents on the happiest day of their lives, the toddlers passive in the arms of the strangers cradling and kissing them. In August 1999, the family arrived home to congratulations, gifts and helium balloons.

“Sometime after their 3rd birthdays, our wonderful fairy tale of adopting two Russian babies began to show cracks,” said Donnie Winokur, who is now 55. She is pert and trim, with cropped brown hair and a pursed-lips, lemony expression softened by wearying experience. Unlike bright and cheery Morasha, Iyal grew oppositional and explosive. He was a sturdy, big-hearted boy with a wide and open face, shiny black hair in a bowl cut and a winning

giggle. But, triggered by the sight of a cartoon image on a plastic cup, or an encounter with Morasha's Barbie dolls, he threw tantrums that shook the house. He stuffed himself at mealtimes with an inexplicable urgency. In a fast-moving car, he unfastened his seat belt and tried to jump out. He awoke every night in a rage. "I had panic attacks in the night when I heard him coming," she said. "I assumed everything was my fault, that I was not a good-enough mother." In preschool, Iyal plowed his tricycle into other children without remorse, or maybe without awareness. He tried to kiss strangers, or feel their toes. Friends and congregants (Harvey Winokur is the founding rabbi of Temple Kehillat Chaim in Roswell, Ga.) who had assured the Winokurs, "He's all boy!" or "Mine was the same way!" began to fall silent, out of shared concern.

The rabbi wears a carefully trimmed brown beard, wire-rim glasses and a commiserative expression. "Iyal's disabilities began to define our family's existence," he told me.

We sat in their high-ceilinged kitchen in a suburb of Atlanta on a summer Sunday morning; sliding glass doors opened onto a redwood deck filled with flowers and bird feeders. Morasha, 13, cute and sporty, packed her pool bag for an outing with friends; Iyal, 13, played a video game alone in the den but checked in frequently, anxiously, to know when his mother's crumb cake would come out of the oven. Earlier that day, Morasha played the video game with her brother. In a realm in which they searched side by side for hidden treasure, there was peace between them. "Iyal, push the green button!" she ordered. "The green button! Iyal, steer the canoe!" He obeyed. But outside this virtual kingdom, he doesn't listen to her, especially when she begs him to leave her alone or to get out of her room. It's stressful for a young teenage girl to navigate middle school with a large inept brother lumbering through the same hallways, the target of gibes and ridicule.

For more than a year after Iyal's 3rd birthday, child psychiatrists, pediatricians and specialists examined him without reaching consensus.

Finally he was seen by Alan G. Weintraub, a developmental pediatrician, who noted his small head, the small and widely spaced eye openings, the extra skin folds close to the nose and the way the middle area of his face appeared flattened. When the little boy became anxious during the exam, he began making animal noises and tried to escape. He detected scary themes in benign pictures. The doctor's conclusion was a blow the Winokurs had not seen coming: Iyal's brain and central nervous system had been severely, irreversibly damaged in utero by the teratogen of alcohol, resulting in an incurable birth defect. Though alcohol consumption by Iyal's birth mother could not be documented, the available evidence pointed to fetal alcohol syndrome, F.A.S., the most extensive form of the range of effects known as fetal alcohol spectrum disorders, or F.A.S.D.

It is well known that maternal drinking can lead to neurobehavioral and growth impairments in a fetus, as well as malformations in the face, palate, joints, kidneys, genitals, heart, brain and nervous system. There is no known safe window during pregnancy for alcohol consumption of any kind or quantity, according to Dr. Jacquelyn Bertrand of the National Center on Birth Defects and Developmental Disabilities of the Centers for Disease Control and Prevention. The U.S. surgeon general calls for total abstinence. C.D.C. estimates of the prevalence of F.A.S. in America range from 0.2 to 1.5 children per 1,000 live births, but this data may represent chiefly those children whose facial dysmorphia render them recognizable; the rest may appear physically typical while contending with hidden neurological damage.

It's possible that as many as one in 100 children are born with some exposure to fetal alcohol. A.D.H.D., learning disability or mental illness are just a few of the accompanying disorders that may be diagnosed instead. Adults who presented symptoms before the syndrome's description in the U.S. medical literature in the 1970s may never have been given an accurate diagnosis.

Iyal Winokur was intellectually impaired and at high risk for a range of

secondary disabilities, including poor judgment, impulsive behavior, social isolation, limited academic achievement, unemployment, drug and alcohol abuse, imprisonment, mental-health problems including suicidal ideation, inability to live independently and inappropriate sexual behavior. Few medications or therapies could be recommended as truly effective.

At 7, 8 and 9 years of age, Iyal often babbled a nonstop stream of senseless chatter and baby talk. He required a full-time aide at school and his mother's undivided attention in the house. Donnie put aside her production career. Harvey juggled the needs of hundreds of congregants while facing escalating mayhem at home. But if their friends wondered what their lives would have been like if they hadn't adopted Iyal, the Winokurs would have reacted with horror. "It's unbearable to imagine our child growing up without us," Donnie says. "We never considered dissolving the adoption! We fell in love with our son." Still, she admits: "Staying in love with him has been trickier. People with brain injuries aren't able to reciprocate love in the ways you expect. You're struggling with this cluster of emotions toward your child — love, but also anger, bewilderment, resentment, frustration and yearning."

As Donnie found her footing in the parallel universe of special-needs families, she discovered that a nonprofit service-dog agency in rural Ohio placed autism assistance dogs with children. Could a service dog help Iyal? "Are you kidding me?" cried her husband. "We don't need a dog!" He felt that one more howl raised under their roof, one more living creature whining for attention, one more source of strife between the children would push him beyond endurance. "No, Donnie. It's too much. I couldn't take it."

"This could be the help we need," she persisted.

"A dog?" Harvey said. "Forget about it, please. It's me or a dog."

Karen Shirk operates a dog-training school in Xenia, Ohio, a charming antebellum village flattened twice by tornadoes. Dressed in baggy jeans and a man's white T-shirt, swaying deeply as she walked, breathing through the

metal button of a tracheotomy tube, she led me into her office at the far end of a brick building that once served as the local V.F.W. Hall. We waded into a crowd of bouncing ecstatic Papillons — toy dogs whose wide, silky ears inspired the breed’s name, the French word for “butterfly.” Though she stepped away only a moment earlier, the dozen little dogs rejoiced as if they’d feared never seeing her again: some spun in excitement, others leapt onto her desk and one tap-danced along the computer keyboard. They raised their pointed little faces and emitted high-pitched yips of hallelujah. When Shirk, who is 49, reached her desk chair, they settled on the floor at her feet, folded up their ears like kites and watched her. When she laughed, they took out their ears and waved them around.

As a young woman, Shirk pursued a master’s degree in social work and held a full-time job with cognitively impaired adults. She felt, she says, “carefree,” until the day she collapsed in respiratory distress and was rushed to an emergency room. Hospitalized for months, she received the grim diagnosis, at age 24, of *myasthenia gravis*, a rare neuromuscular disease. She left the hospital only to become a respirator-dependent patient in need of constant care.

“Why don’t you get a service dog?” a new nurse asked Shirk, six years into her illness. Supine in front of the TV, Shirk seemed unaware of the hour, day or month. A dog could offer mobility assistance, the nurse said, like opening a drawer and bringing clean socks. She seemed also to suspect that a dog might jump-start the life of this sad and lonely patient.

“How could I take care of a dog?” Shirk rasped. “I can’t even take care of myself.”

“You could take care of a dog,” the nurse said.

Beginning in 1992, Shirk applied by mail to service-dog agencies around the country. Every program rejected her. “They’re not going to give a dog to a respirator-dependent individual who will never lead a productive life,” she told

the nurse. Finally she won a spot at the bottom of a waiting list. In 1994, a trainer visited to prepare for the placement of a golden retriever. Shirk began to feel strangely hopeful. But then the agency sent a letter instead of a dog: “Our guidelines prohibit the placement of service animals with people on ventilators.”

“I didn’t care if I lived or died after that,” she told me, placing a fingertip over the metal knob in her throat to enable speech, in a voice that is winningly husky. “All I could see ahead of me was a long, slow death. I started stockpiling morphine.”

“Karen,” the nurse said, “get out of this bed, and let’s go get you a puppy.”

Feebly, she dressed herself in bed and crumpled forward into a wheelchair. The nurse drove her to see a litter of black German shepherd pups, the breed of Shirk’s childhood dog, and there she found Ben. “I didn’t leap back into life with Ben so much as inch back into it,” she said. The puppy had to be taken outside, and to obedience classes. Wherever he frolicked, strangers greeted the tubed-up woman in the motorized wheelchair, as they did not when she was alone. It was a lesson Shirk wouldn’t forget.

When year-old Ben graduated from puppy classes, he was a gorgeous animal with a shiny coal-black pelt, orange-flecked brown eyes and a feathery tail. He wasn’t a complex thinker or problem-solver. But he was smart, and she loved him.

She acquired a wheelchair-adapted van and commuted to a dog-training school in Columbus, where Jeremy Dulebohn, a crew-cut man from rural Ohio, taught Ben the basics of mobility work: to open and close doors and drawers; to hand Shirk’s wallet to retailers and return it with change to her lap; to brace her for balance as she moved from bed to wheelchair and back; and to remove her shoes, socks and jeans at bedtime. “When I asked for water, Ben opened the refrigerator and brought me a bottle,” she told me. “When I asked for laundry, he pulled my clean clothes out of the dryer, put them in a

basket and dragged them over.”

Dogs evolved over at least 15,000 years to know and like humankind as well as, or better than, we know and like ourselves. Like many German shepherds, Ben was a one-person dog. He seemed to watch Shirk closely when she returned to her apartment following open-heart surgery. “I had a daytime nurse but was alone at night,” she says. “I was on a morphine pump and — though I didn’t realize it — a deadly combination of drugs. I slipped into unconsciousness.” When the phone rang, Ben waited — as he’d been trained to do — for Shirk’s command to answer it rather than to let it ring into the answering machine. But that night, with his owner failing, Ben picked up the receiver without her command, dropped it on the bed and barked and barked. It was Shirk’s father. Realizing something was wrong, her father hung up and called 911. The rescue team told Shirk she wouldn’t have lived through the night.

With Ben at her side, Shirk became manager of a day care facility for cognitively impaired adults. Gaining in strength and confidence, with new medications allowing her to come off the ventilator during the day, she wondered how many other people were being told they were “too disabled” to get a dog. “I could start my own agency,” she thought. “I could place four or five dogs a year with people rejected by the big agencies.” She mentioned the idea to co-workers and almost instantly heard from a couple seeking a mobility dog for their 12-year-old daughter, who’d been paralyzed by a spinal stroke. Their impression was that no service-dog agency worked with children.

Shirk studied the Americans With Disabilities Act governing service animals and found no legal impediment to placing a dog with a child if a parent served as co-handler. In October 1998, she assembled a board and founded 4 Paws for Ability, a nonprofit corporation. She rescued Butler, a German shepherd mix, from a shelter; hired a trainer to prepare him for mobility work with the 12-year-old; and became a pioneer among service-dog agencies. “People started calling from all over to ask, Am I too young? Am I too

old? Am I too disabled? Am I disabled enough?” she says. “I said, ‘If your life can be improved by a dog, and if you and your family can take good care of a dog, we’re going to give you a dog.’ ”

A couple with a 10-year-old son on the autism spectrum called 4 Paws. This was new ground. Placing dogs with adults with “invisible disabilities” like post-traumatic stress disorder or seizure disorder was the cutting edge of service-dog work; it hadn’t been widely tried with children. Patches, a rescue-hound mix, became one of the world’s first dogs trained for autism assistance for a child.

In 2001, Dulebohn joined 4 Paws full time as training director. Today he oversees an expanding staff of trainers, vets, groomers and dog-walkers. The dogs are a mix of shelter dogs, donated dogs and puppies bred in-house, and every one gets 500 hours of training, well beyond the 120-hour industry standard. “Any breed can become a service dog,” says Dulebohn, who is 37, “but, over time, we found that roughly 70 percent of Labradors, golden retrievers and German shepherds graduated from our program, while only about 2 percent of other breeds made the cut.” It costs \$22,000 to train a 4 Paws dog; clients are asked to contribute \$13,000 to the organization, with the difference made up through charitable donations and grants. To date, 4 Paws has placed more than 600 dogs.

For socialization, Dulebohn places foster puppies with local families, and for basic obedience training he places them with specially chosen inmates in regional prisons. “Convicted murderers cry when it’s time to give back their dogs,” Shirk says. “But we give them another one.” Since most 4 Paws dogs go to children — and children want playmates more than they want therapists and trackers — Dulebohn asks the prisoners to teach their pups tricks, including “Roll over,” “Speak,” “Gimme five” and “Play dead.”

“I learned with Ben that a dog helps you make friends,” Shirk says. “We place dogs with kids in wheelchairs, kids on ventilators, kids with autism, kids

with dwarfism, kids with seizure disorder and cognitive impairments; but if your dog does tricks, other kids want to meet you. Kids will ignore your disability if you've got a cool dog.”

One prisoner with a sense of humor returned a dog who — upon hearing the command “Play dead” — lurched, as if shot, staggered across the floor, knelt, got up, buckled, whined piteously and then dramatically collapsed.

Cool dog. Lucky kid.

In 2007, a phone call came into 4 Paws from an Atlanta mother of a boy with special needs. Iyal Winokur’s doctors had tried 20 different medications without lasting success. Iyal was 9; his I.Q. was 80 and falling; his language was primitive. He got hooked on bizarre thoughts and repeated them endlessly. He still suffered from night terrors and bed-wetting. Sometimes Iyal touched his mother’s shirt, sniffed his fingers and tried to wipe off the smell. Aware that a majority of individuals living with fetal alcohol syndrome also fight mental illness, his parents feared impending schizophrenia or psychosis.

“Do you place dogs with children who have fetal alcohol syndrome?” the mother asked Shirk.

“Never heard of it.”

Donnie Winokur, who had by then founded the Georgia affiliate of the National Organization on Fetal Alcohol Syndrome, explained with rapid and precise diction.

“Is your son likely to verbally abuse a dog?” Shirk asked.

“Well, yes,” Donnie had to admit, at a reduced speed.

“Is he likely to try to physically abuse a dog?”

“It’s not impossible,” she said, now certain of rejection.

“O.K.,” Shirk said. “We’ll need a doctor’s prescription and we’ll need video. We want to see your son every day, everywhere — getting up in the morning, eating breakfast, getting in a car, at school at bedtime. We need to hear his noises and see his tantrums.”

“You’ll give us a dog?” Donnie gasped.

That night at home, Harvey gasped, too. “Thousands of dollars for a dog?” he cried. “Instead of for a nanny, or respite care, or a private school? Does that make sense? A dog’s not going to mean anything to Iyal.”

“It might.”

“You’re talking about a dog with a vest like a seeing-eye dog? It will be embarrassing to go into public like that!”

“It’s already embarrassing to go into public with Iyal, especially for Morasha.”

“But a dog in a vest will make him seem so disabled.”

“A dog in a vest will tell people that he acts like this because he’s living with a disability.”

She wore him down. He loved her, trusted her judgment and knew she wasn’t going to give up.

In January 2008, Donnie, her father, her first cousin and her children drove to Xenia for a 10-day class with other special-needs families and their new dogs. In the parking lot at 4 Paws, parents carried, coaxed, dragged, pushed, chased and wheeled their children toward the front door. A circle of threadbare sofas, sunken love seats and canvas sports chairs surrounded a training area in the former V.F.W. social hall. In an inner room, pet crates and pens held dogs of all ages and sizes — 200 dogs are in training at all times — while dog-walkers, vets and groomers came and went through the side door.

The building smelled fragrantly of dog, with undertones of ammonia.

For children with autism or behavior disorders, dogs were trained in “behavior disruption.” For children with seizure disorder or diabetes or respiratory issues, dogs were trained to alert the parents at the onset of an episode, and there have been a few able to predict the medical incidents 6 to 24 hours in advance. (How they do this is something of a mystery.)

“The dogs are nonjudgmental,” Dulebohn tells each class. “You’ve got a kid who’s picking his nose? The dog isn’t thinking, That is gross. He’s thinking, Save one for me! Or your child has disappeared and you say: ‘Find Jeffrey.’ The dog isn’t thinking, Jeffrey’s in danger! The dog thinks: *Game on!*”

About 10 percent of 4 Paws placements fail. “Some fail because parents weren’t prepared for how much extra work a dog would be,” Shirk says. “They can barely get themselves and their special-needs child out the door; adding a dog feels overwhelming.” Others fail because it’s not a good match. A family’s video may not have reflected the severity of behavior. “A child looks gentle on his video, so we place a soft dog,” Shirk says. “Then the child’s violent meltdowns scare the dog, and he starts avoiding the child.” Dulebohn and Shirk try to discourage clients from engaging in “the Lassie syndrome”: the belief that a devoted, sensitive and brilliant dog will gallop into their lives and make everyone feel better.

And yet, sometimes, that’s what families get.

Dulebohn matched Iyal with Chancer, a big, good-humored golden retriever with “high self-esteem” who wouldn’t be hurt or insulted by the boy. Chancer was originally purchased as a puppy from Mervar Kennel in Youngstown by a family that lost interest in him; he was returned, after a year, overweight, matted, undisciplined and lonely. Knowing that 4 Paws successfully placed Mervar dogs in the past, Judy Mervar donated Chancer. Like all 4 Paws dogs, he was shown kindness and affection in the course of his training, but he was not offered a long-term close human friendship. “Once

dogs have been matched with families, we pet them and love them, but we don't give them that intense, 'I love you so much, you're my baby' kind of one-on-one attention," Shirk says. "We don't take them home with us at night. Every one of our dogs wants that closeness, is primed for that closeness; but we want them to find it with their families, not with our staff." Chancer didn't know what he was missing. But his trainers knew. "Chancer," Dulebohn says, "really needed a boy."

The dog's deeply encoded desire to attach to humans came alive when he was introduced to the Winokurs. A shaggy, tawny giant, he panted and wagged with pleasure. Something similar, on the human side, was sparked, too. Morasha dropped to her knees and embraced Chancer's big neck. Donnie felt like doing the same. "Hi, hi, hi good boy," she cooed, stroking his broad handsome head. Iyal was briefly interested but then wandered off.

They were in a hard stretch with Iyal. He was throwing tremendous rages daily, and instantly did it here. "I'm so sorry," Donnie said, mortified, unable to budge the explosive boy from the dog-training circle on the very first morning. But she was among friends; special-needs parents all, they patiently waited for Iyal's tantrum to die down. Unfortunately, on a lunch break in town, Iyal lost control again and threw a fit in the drive-through lane at Wendy's. He crossed his arms, sat down hard and bawled. The backed-up drivers looked at Donnie with less empathy than had the 4 Paws parents. Shirk says, "Iyal really needed a dog."

At the conclusion of the second day's class, the families were invited to keep their dogs overnight for the first time. At the hotel, Donnie's cousin took Chancer outside for a walk while Donnie supervised Iyal and Morasha in a hot tub in the indoor pool area. "When they came back from their walk," she says, "Chancer looked around, and then broke away! I thought: Oh, my God, he's escaping. We're going to lose him. He streaked past everybody in the solarium and took a flying leap into the hot tub. He was saving Iyal!"

Chancer had not been trained to do water rescue. Why he leapt unnecessarily into a hot tub is hard to know. Shirk thinks that after 36 hours, Chancer had bonded to Iyal. The reverse, though, may not have been true yet. Part of the havoc wreaked by alcohol on a child's brain is to scramble the emotional pathways. The routes to friendship, fun, intimacy and love are underdeveloped or buried under cognitive roadblocks. But Iyal's burst of laughter when the big yellow dog came sailing through the air and clumsily exploded into the hot tub was the greatest sound his mother had heard out of him in a long time.

The morning after Chancer's first night in the house outside Atlanta, the Winokurs woke up after a full night's sleep for almost the first time since 1999. They looked at each other in semihorror: was Iyal still alive? They found him snoozing beside the big yellow dog, the latter hogging the mattress. Since Chancer's arrival in the house, they've rarely been disturbed in the night. Iyal may still wake up, but he's evidently reassured by the dog's presence and returns to sleep.

"The moment he walked in the house with Chancer, I knew something had changed," Harvey says. "I could feel it instantly, the magnetism between Iyal and the dog. . . . Chancer was an emotional and physical anchor for a kid who was pretty lost in the world."

When Iyal is distressed, Chancer is distressed. Unlike Iyal, Chancer knows what to do about it. Iyal rages by crossing his arms, sitting down hard on the floor and screaming and kicking. Chancer unknits the crossed arms by inserting his wide muzzle through the locked arms from below, opening them up and nuzzling toward Iyal's face, licking and slobbering, until the boy's screams turn to tears of remorse or to laughter.

Chancer sometimes heads off tantrums before they start. If a tutor or a therapist has worked with Iyal in the dining room a bit too long, Chancer moves between the visitor and the boy, clearly relaying: We're done for today.

From two floors away, he will alert, flicking his ears, tuning in. Sensing that Iyal is nearing a breaking point, he gallops up or down the stairs to find him, playfully head-butts and pushes him down to the floor, gets on top of him, stretches out and relaxes with a satisfied groan. Helplessly pinned under Chancer, Iyal resists, squawks and then relaxes, too. The big dog lies on top of the boy he loves, and seals him off from the dizzying and incomprehensible world for a while.

When I ask Dulebohn about Chancer's preternatural sensitivity, he says: "We trained Chancer to disrupt tantrums. Being able to prevent tantrums is coming from subtle training within the family. He may be reading Donnie's body language or facial expressions, or he may be smelling some chemical changes in Iyal or hearing some noises from him that predict a tantrum. He feels rewarded when Iyal stabilizes."

Donnie says: "Lately, and this is the best yet: if Iyal gets distressed, he goes to find Chancer, and he curls up next to him. He picks up Chancer's big paw and gets under it." It's the closest the boy has come to mood self-regulation.

Two weeks after Chancer's arrival, Iyal startled his parents by using multisyllabic words. He was suddenly possessed of opinions, judgments and important questions, and he expressed them.

"B.C., Before Chancer," Donnie says, "which is how we refer to our life then, Iyal echoed Morasha word for word. It drove her nuts. Every morning I asked, 'Do you want to take your lunch today or eat lunch at school?' and every morning Iyal parroted whatever Morasha said. If she said, 'School,' he said, 'School.' With his frontal-lobe damage, decision-making like that was difficult for him. One morning, A.C., when I asked about lunch, Morasha said, 'School,' and Iyal said, 'I'd rather have lunch from home than a school lunch.' It was a more sophisticated expression of his thoughts than we'd ever heard.

"B.C., driving in the car with Iyal, if I turned down an unfamiliar route, he

might say, ‘What happened?’ A.C., sensing I’d taken a wrong turn, Iyal asked: ‘Were you distracted by Chancer and that’s why you made a bad turn?’ That showed an understanding of cause and effect, and a high-level word choice.

“B.C., Iyal never mentioned his disability, although we have educated him about it. A.C., he suddenly started asking things like, ‘Did Chancer’s birth mother drink alcohol?’ and ‘Does Chancer have a boo-boo on his brain?’ and ‘Why did my birth mother drink alcohol?’ ”

Before Chancer, Iyal didn’t seem to possess “theory of mind,” the insight, usually achieved by age 4, that other people have points of view different from your own. But Chancer has inspired him to think about what Chancer likes and what Chancer wants and what Chancer thinks. Only since the dog’s arrival has Iyal shown sheepishness or regret following a tantrum, signaling a new awareness that his outbursts may affect others. “Is Chancer mad at me?” he asks his parents. “Mommy, tell Chancer I love him, O.K.?”

“The sad flip side of ‘theory of mind,’ ” Donnie says, “is that Iyal is deathly afraid that if he misbehaves too much, Chancer will want to be someone else’s dog. We’ll be in a park, and he’ll tell me that Chancer is smiling at another kid and wants to be his dog.”

The science behind Iyal’s cognitive leaps is still in its infancy. Alan M. Beck, the director of the Center for the Human-Animal Bond at Purdue University’s College of Veterinary Medicine, is among those intrigued by it. “There is a real bond between children and animals,” he told me. “The younger the child, the greater the suspension of disbelief about what an animal understands or doesn’t understand.” According to Beck, more than 70 percent of children confide in their dogs, and 48 percent of adults do. “The absolutely nonjudgmental responses from animals are especially important to children,” he says. “If your child with F.A.S.D. starts to misbehave, your face may show disapproval, but the dog doesn’t show disapproval. The performance anxiety this child may feel all the time is absent when he’s with his dog. Suddenly he’s

relaxed, he's with a peer who doesn't criticize him."

The hypothesis is that the sudden drop in Iyal's anxiety level — the sudden decrease in his hypervigilance, the lowering of his cortisol level and the disarming of the fight-flight physiology — frees up cognitive energy that he can use for thought and speech. "A child with a disability feels freer not to suppress his ideas and behaviors when he's with his dog," Beck says. "There's a level of trust and confidentiality he has with no one else. And it's a good choice: the dog is his true confidant and friend."

Chancer has not cured Iyal.

"From the moment Iyal wakes up in the morning, there's tension in the house," Donnie says. "He has neurological and psychological damage Chancer's paws can't reach. But Chancer mitigates the disability. It's like we have a nanny."

Last fall the Winokur family wrestled with the likelihood that Iyal was being bullied at middle school. "Some boys told me to hump a chair," he reported to his mother and psychiatrist a few days into eighth grade.

"Hump a chair?" Donnie said. "I'm not sure what that means,"

Iyal stood to re-enact it.

"Look at Chancer," murmured the psychiatrist to Donnie. As Iyal engaged provocatively with a chair, Chancer rose, distressed. Whining, he tried to block Iyal's lunges.

On another day, a distraught Iyal told his parents that the boys said: "Go kiss that boy or we'll hang your dog."

"This is the classic setup for people with impaired judgment," Donnie says. "They're at risk of being exploited criminally and sexually. They can become both victim and perpetrator." It may not be classic bullying either.

“Iyal may have pursued those boys,” Donnie says. “He desperately wants friends. He doesn’t understand personal space or social distance. He might have been annoying them, and they reacted.”

The school principal was instantly responsive; his staff spoke to the other boys. “But Iyal keeps talking about it,” Donnie says. “It’s hard for Harvey and me to know if the bullying is still happening or if Iyal has just fixated on the trauma of it. Past, present and future get confused in his mind.”

Chancer doesn’t accompany Iyal to school because the boy can’t take the reins as Chancer’s handler. “He can’t even take Chancer for a walk around the block,” Donnie says. “He might drop the leash, and Chancer might interpret that release as permission to track a hamburger. Chancer’s an amazing service dog, but he is a dog, and he loves meat.”

If Iyal ordered Chancer to do a wrong or dangerous thing, or to join him in reckless behavior, would Chancer recognize that they were transgressing? Would Chancer disobey Iyal? “When a dog puts a vest on, it changes his persona,” Donnie says. “He knows he’s working. In the service-dog world, they call it the halo effect. Guide dogs for the blind are trained in ‘intelligent disobedience’ for dangerous situations, like traffic. But I don’t know if a dog can reason between right and wrong.”

With every passing year, the challenges to Iyal’s safety, and to the well-being of those around him, multiply. Iyal’s attempts to touch his mother inappropriately are escalating; the Winokurs fear that soon the principal’s office will be calling them, rather than vice versa. “Harvey and I feel like we’re sitting on a volcano,” Donnie says. “Iyal is a 13-year-old who functions cognitively, emotionally and socially like an 8-year-old. That gap will widen. He will never catch up to his chronological age. And few outsiders perceive the difference between ‘neurological noncompetence’ and ‘behavioral noncompliance,’ in other words, that Iyal’s doing the best he can.”

Iyal will never drive. He will never hold a regular job. He doesn’t

understand money or time. Experts say that the transition from adolescence to adulthood is particularly difficult for individuals with F.A.S.D. And Chancer won't be around forever. For as long as they live, the Winokurs hope to make sure there is a 4 Paws dog at Iyal's side; for now, they cannot conceive of a life without Chancer.

Chancer doesn't know that Iyal is cognitively impaired. What he knows is that Iyal is his boy. Chancer loves Iyal in a perfect way, with an unconditional love beyond what even the family can offer him. Chancer never feels disappointed in Iyal or embarrassed by Iyal. Beyond cognitive ability or disability, beyond predictions of a bright future or a dismal one, on a field of grass and hard-packed dirt, between the playground and the baseball diamond, you can see them sometimes, the two of them, running, laughing their heads off, sharing a moment of enormous happiness, just a boy and his dog.

Melissa Fay Greene is the author, most recently, of "No Biking in the House Without a Helmet."

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