

The Use of Animals and their Welfare and Ethical Considerations

- People have used animals to satisfy human needs for thousands of years.
- Animals have needs also.
- Conflict of interests occurs when the human use causes pain, fear, or harm or otherwise prevents the animal from satisfying its own needs.

- Serpell et al., in Fine (ed)

The Use of Animals

- The challenge in AAI is to balance the needs of people and the needs of animals.
- Is this even possible?
- Can we meet needs of both equally?
- Can we meet the needs of both completely?
- Is it acceptable to meet some of the needs of people and some of the needs of animals?

The Use of Animals

- People volunteer for AAI.
- Animals are drafted!
- What can we do to assure proper care if we are to use animals to benefit people?

The Use of Animals

- We must **plan** to meet the individual animal's needs [not necessarily it's wants].
 - Diet
 - Exercise
 - Mental stimulation (enrichment)
 - Respite and relaxation
- **We must listen to the animals with our eyes!**

The Problem of Stress

(from Serpell et al.)

- "...stress is the body's natural physiological response to environmental stressors."
- "...impossible to know precisely what levels of stress an individual is experiencing at any given moment."
- "...outward manifestations of stress [can result in] overt changes in behavior."

Signs of Stress

Signs of Stress



Signs of Stress in **Dogs**

(from Serpell et al.)

During AAI visitation:

- Sweating paws
- Salivation (a particular problem with some breeds)
- Muscle tension
- Restlessness

Signs of Stress in **Dogs**

(from Serpell et al.)

During AAI visitation:

- Body shaking
- Paw lifting (some dogs shake hands)
- Yawning

Signs of Stress in **Dogs**

(from Serpell et al.)

During AAI visitation:

- Aggression
- Hypervigilance
- Intensified startle reflex

Signs of Stress in **Cats**

(from Serpell et al.)

During AAI visitation:

- Alert inactivity
- Tense muscle tone
- Crouching position
- Pupil dilation

Signs of Stress

During AAI visitation:

- Reluctance to enter facility/room/car
- Loss of attention span
- Anxiety (can we recognize this?)
- Laying down, reluctance to move, lethargy

Signs of Stress

During AAI visitation:

- Avoiding contact with patients
- Excessive panting/postural changes
- Pulling handler away from interaction
- Uncooperative behavior, ignoring commands

Signs of Stress

Before or after a visit:

- Diarrhea or loose stool
- Urinating in inappropriate places
- Vomiting
- Lack of appetite

Signs of Stress

Before or after a visit:

- Behavior or temperament change
- Aggravation of a medical problem
- Change in sleep/activity pattern

How many of you fluently speak a different language?

How has that helped you understand the culture(s) from which that language came?

Is that understanding complete?

“Successful social work practice requires orientation to diverse social and cultural characteristics which structure the framework for our communities and families.”

- Tedeschi et al.

How many of you are oriented to the social and cultural characteristics of dogs and cats that are members of all communities and many families? Let's do an observational experiment.

Social and Cultural Interpretations

What do you see?



Social and Cultural Interpretations

What do you see?



What do you see now?



Social and Cultural Interpretations

What do you see?



H.A.B.I.T. currently has

- **128** program sites,
- **354** active volunteers, and
- **339** medically and behaviorally screened dogs, cats, and rabbits who made over
- **86,000** visits last year in
- **10** East Tennessee counties.



H.A.B.I.T. programs are in

- **37** Public and Private Schools
(**80** Classrooms)



H.A.B.I.T. programs are in

- **24** Residential Care Facilities
- **13** Treatment Centers
- **5** Hospitals
- **4** Adult Day/Transitional Care
- **2** Grief/Hospice Support Groups



H.A.B.I.T.'s success can be credited to its volunteers and the thorough evaluation process. Since H.A.B.I.T.'s founding 24 years ago, there has never been even a suggestion of a claim against our liability insurance.



Elements of a H.A.B.I.T. Program

- Medically screened and sound dogs and cats
- Behaviorally screened and appropriate dogs and cats
- Responsible volunteers
- **Monitoring**, communication and partnership with the facility

Three Steps

- Medical Evaluation
- Behavioral Profile and History
- Behavioral Evaluation



COMPONENTS OF THE MEDICAL EVALUATION

- The form is completed by the pet's veterinarian

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 - Vaccinations
 - Diseases and Conditions
 - Parasites

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- The form is completed by the pet's veterinarian
- Medical History
 - Vaccinations
 - Diseases and Conditions
 - Parasites
- Physical Examination
 - Problems are noted that could influence placement

**THE MEDICAL EVALUATION
FORM MUST BE COMPLETED
ANNUALLY**

A blank form will be mailed to active volunteers the month before the month of the pet's rabies vaccination.

**THE BEHAVIORAL PROFILE
AND HISTORY FORM**

- The form is completed by the pet's owner.
- This form is used by the person conducting the behavioral evaluation and the Placement Committee which will work with the new volunteer to find an appropriate placement.

**COMPONENTS OF THE
BEHAVIORAL EVALUATION**

- Initial observations



COMPONENTS OF THE BEHAVIORAL EVALUATION

- Initial observations
- Approach to the dog



COMPONENTS OF THE BEHAVIORAL EVALUATION

- Initial observations
- Approach to the dog
- Manners and manageability (with owner)



COMPONENTS OF THE BEHAVIORAL EVALUATION

- Initial observations
- Approach to the dog
- Manners and manageability (with owner)
- Manners and manageability (without owner)



COMPONENTS OF THE BEHAVIORAL EVALUATION

- Interacting with the dog



COMPONENTS OF THE BEHAVIORAL EVALUATION

- Interacting with the dog
- Stability



COMPONENTS OF THE BEHAVIORAL EVALUATION

- Interacting with the dog
- Stability
- Temperament profile

Only ADULT dogs and cats are used in H.A.B.I.T. Programs.



Once the animal has passed the evaluations, it receives its H.A.B.I.T. scarf and the owner is registered with the UT Office of Risk Management, which provides liability coverage.



Some other points:

Dogs should be trained **not to take any food item** except on owner's command.



Some other points:

If an animal becomes ill,
ask your veterinarian's
advice before letting it
return to "work."

Some other points:

Obedience training of dogs
is not required but those
dogs that have such training
may be more comfortable
and confident during visits.

Some other points:

If dogs have not had
obedience training, they at
least must be trained so
they do not **jump** on people
or **pull** on the leash.

Some other points:

Prong or pinch collars
are not allowed during
visits.

Some other points:

A few words about
specific breeds....

Some other points:

The owner/handler is the
animal's advocate. The
needs of the animal
must be met.

AVMA Wellness Guidelines

- To ensure the welfare of human and animal participants, a veterinarian should be actively involved in all AAA, AAT, and RA (resident animal) programs.
- The attending veterinarian should be familiar with the types of tasks that will be expected of the animal(s) and have experience with the physical and behavioral characteristics of the species to be used in the program.

AVMA Wellness Guidelines

- A mechanism should be in place to permit the veterinarian to periodically assess the physical and behavioral health and well being of the animal(s) involved.
- Wellness programs should be tailored to fit the needs of individual animals. Species, age, breed, and any risk factors that could jeopardize an animal's health and welfare should be considered.

AVMA Wellness Guidelines

- Access to veterinary care must be available as needed between scheduled appointments.
- Wellness programs should include regular vaccination; parasite prevention and control; selected screening for common diseases and conditions; **behavioral evaluation**; preventive medical, dental, nutritional, and behavioral care, including **environmental enrichment**; and an assessment of genetic health when appropriate.

AVMA Wellness Guidelines

- A decline in animal wellness may manifest itself as a physical or behavioral change. Because wellness is dynamic, wellness programs should be flexible and modified to accommodate the changing needs of animals as they age or as a result of participation in AAA, AAT, or RA programs.

AVMA Wellness Guidelines

- The RP (responsible person) must be willing to share the results of an animal's medical and behavioral evaluations (usually in summary format) with regulatory agencies that have legal oversight for the target populations of AAA, AAT, and RA programs.

AVMA Wellness Guidelines

- Daily recommendations concerning animal wellness must be readily available to all members of a household or facility so that everyone can be involved in maintaining the health and welfare of animal(s) involved in AAA, AAT, and RA programs. **However, sharing recommendations and encouraging others to promote animal wellness does not eliminate the need for, or duties of, a RP.**

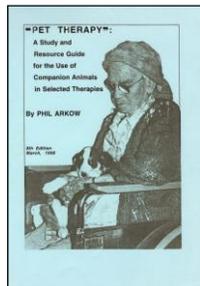
AVMA Wellness Guidelines

- **The Guidelines go into more detail for veterinarians regarding:**
 - **Selected Preventive Medical Strategies**
 - **Selected Preventive Behavioral Strategies**
(During wellness visits, the attending veterinarian should specifically and proactively address behavioral health.)
 - **Some general principles**

Recommendations and
Guidelines from *Welfare
Considerations in
Therapy and Assistance
Animals*

(Serpell et al., 2006, pages 469-472.)

Ethical Concerns from
“*Pet Therapy*”: A
*Study and Resource
Guide for the Use of
Companion Animals in
Selected Therapies*,
Arkow 1998, pages
54-55.



Let's revisit some of the initial questions.

- The challenge in AAI is to balance the needs of people and the needs of animals.
- Is this even possible?
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Thank you

Questions?

References and for Further Reading:

- American Veterinary Medical Association (2007), *Wellness Guidelines for Animals in Animal-Assisted Activity, Animal-Assisted Therapy, and Resident Animal Programs*.
www.avma.org/products/hab/wellness.pdf
- Arkow, P (1998). Ethical Concerns in "Pet Therapy": A Study and Resource Guide for the Use of Companion Animals in Selected Therapies, 37 Hillside Road, Stratford, NJ, 08084, pages 54-55.

References and for Further Reading:

- Butler, K, Chapter 7, Workforce Principles. In *Therapy Dogs Today: Their Gifts, Our Obligations*, Funpuddle Publishing, pages 49-54.
- Iannuzzi, D, and AN Rowan (1991). Ethical issues in animal-assisted therapy programs. *Anthrozoos* 4, 154-163.

References and for Further Reading:

- Serpell, JA, R Coppinger, and AH Fine, Welfare Considerations in Therapy and Assistance Animals. In AH Fine (ed) (2006). *Handbook of Animal-Assisted Therapy: Theoretical Foundations and Guidelines for Practice*. Elsevier, pages 453-474.
- Tedesche, P. et. al. (2005). Incorporation of animal-assisted interventions in social work education. *Journal of Family Social Work*. 9(4), 59-77.
