



OLDER ADULTS AND ANIMAL PROGRAMMING

A Handbook for Senior Centers

MAY 2018

INTRODUCTION

The Human Animal Bond Research Institute (HABRI) and the National Council on Aging's National Institute of Senior Centers (NCOA/NISC) have a shared goal of promoting healthy aging. The two organizations collaborated to explore animal programs held in senior centers and to develop guidelines to ensure that the positive benefits of the human-animal bond can be widely and safely enjoyed in senior centers across America.

In the fall of 2017, NISC surveyed its member senior centers to gather information on current animal programming. The results, along with relevant research and promising animal practices, have been compiled into this handbook. These programs and practices can be replicated by senior centers and other community-based organizations nationwide to assist in providing animal programming for older adults to improve their health and well-being. In this handbook, you will learn about:

- Scientifically documented health benefits of human-animal interaction
- Different classifications of animals
- What senior centers are doing now
- Examples of animal policies and best practices



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BACKGROUND



About the Human Animal Bond Research Institute

The Human Animal Bond Research Institute (HABRI) is a not-for-profit organization that maintains the world's largest online library of human-animal bond research and information; funds innovative research projects to scientifically document the health benefits of companion animals; and informs the public about human-animal bond research and the beneficial role of companion animals in society.

HABRI's vision is for the human-animal bond to be universally embraced as an essential element of human wellness. The biggest issue HABRI faces is that the human-animal bond is not yet culturally integrated in our society, hindering the beneficial presence of animals in our lives. To address this, HABRI funds scientific research and uses that knowledge to inspire action that improves the lives of pets, people, and communities.

Each year, HABRI issues a request for research proposals to investigate the health outcomes of pet ownership and/or animal-assisted activity or therapy, both for the people and animals involved. HABRI's three main areas of focus include **child health and development**, **mental health and wellness**, and **healthy aging**. Learn more at habri.org.



About the National Council on Aging

The National Council on Aging (NCOA) is a respected national leader and trusted partner to help people aged 60+ meet the challenges of aging. Our mission is to improve the lives of millions of older adults, especially those who are struggling. Through innovative community programs and services, online help, and advocacy, NCOA is partnering with nonprofit organizations, government, and business to improve the health and economic security of 10 million older adults by 2020. Learn more at ncoa.org and [@NCOAging](https://twitter.com/NCOAging).



About the National Institute of Senior Centers

NCOA's National Institute of Senior Centers (NISC) supports a national network of over 3,000 senior center professionals dedicated to helping older adults remain active, engaged, and independent in their communities. NISC is setting the standard for the future of senior centers by promoting research, promising practices, professional development, and advocacy. NISC also offers the nation's only National Senior Center Accreditation Program. Learn more at ncoa.org/NISC.



RESEARCH ON THE HUMAN-ANIMAL BOND

Pet Ownership and Health

Research demonstrates that pet owners—who make up 80 million American households or 65% of the American population—are less likely to be obese, more likely to meet physical activity guidelines, have a reduced risk of heart disease, are more likely to be socially connected, and are happier than non-pet owners. A HABRI survey of 1,000 family doctors found that they overwhelmingly believe there are health benefits to owning pets. In fact, 60% of doctors surveyed had already recommended getting a pet to at least one of their patients. Further, 75% of physicians said they saw their patients' overall health improve, and 87% said their patients' mood or outlook improved due to pet ownership.

The human-animal bond, or the Pet Effect, is defined as the mutually beneficial and dynamic relationship between people and animals that is influenced by behaviors that are essential to the health and well-being of both. Positive human-animal interaction (HAI) appears to be related to changes in physiological variables both in humans and animals, particularly dogs. HAI has been shown to influence levels of blood pressure, heart rate, hormones correlated with well-being including cortisol, oxytocin, b-endorphin, prolactin, phenylacetic acid, and dopamine. Studies investigating the health impacts of human-animal interaction have focused on a wide range of conditions and diseases, from Autism Spectrum Disorder to child development, and Post-Traumatic Stress Disorder (PTSD), stress, and managing mental health, to cardiovascular disease and obesity prevention.

While the Pet Effect has been scientifically documented to improve the health and well-being of people, research also has supported the Pet Effect for improved welfare of animals. In fact, a HABRI survey of pet owners found that knowledge of research showing the positive health benefits of pets motivates pet owners to take better care of their pets, including regular visits to the veterinarian.



Benefits of Pets for Healthy Aging

Scientific research has demonstrated the link between human-animal interaction and healthy aging. The human-animal bond positively impacts the health and well-being of older adults in significant ways. Below is a summary of research findings, which focus on how human-animal interaction can alleviate or help protect against certain diseases and conditions that are found to adversely affect older adults.

Mental Health and Wellness

Loneliness is prevalent among older adults, and research has shown that loneliness or social isolation can adversely impact physical health. Health risks associated with social isolation have been compared in magnitude to the dangers of smoking cigarettes and obesity.ⁱ Loneliness is also associated with depression, cardiovascular disease, cognitive decline, declines in mobility and daily function, and increased risk of early death.ⁱⁱ

But there's good news for older adults—the human-animal bond can help combat loneliness, social isolation, and other mental health conditions.

*A **2009 study** found that animal-assisted activity can make a difference in the depression levels of residents in long-term care facilities.ⁱⁱⁱ*

*A review of literature on the impacts of **animal-assisted activities (AAA) and animal-assisted therapy (AAT)** on depression found that both are associated with fewer depressive symptoms.^{iv}*

*A **study published in 2011** found that pet owners are happier and that pets provide meaningful social support and improve pet owners' lives.^v*

*In a study of the impact of a **therapy animal program** on cognitively unimpaired institutionalized elderly, those who received a pet canary reported significant improvements in perception of quality of life and psychological well-being.^{vi}*

THE ROLE OF PETS IN SOCIETY

Classification of Animals

For years, animals have been assisting people in need through companionship, comfort, and the completion of tasks. Different classifications of animals dictate where an animal is allowed, and it's important to understand these classifications to create a more pet-friendly society.



Companion animals

Companion animals, or pets, are domesticated or domestic-bred animals whose physical, emotional, behavioral, and social needs can be readily met as companions in the home, or in close daily relationship with humans.



Therapy animals

Therapy animals provide affection and comfort to various members of the public, typically in a facility setting such as hospitals, assisted living facilities, and schools. These pets have a special aptitude for interacting with members of the public and enjoy doing so. Therapy animals have no special rights to access, except in those facilities where they are welcomed. They may not enter any businesses with "no pets" policies or accompany their handler in the cabin of an airplane regardless of their therapy animal designation. For more information, visit: <https://petpartners.org/learn/terminology/>



Service animals

Defined by Title II and Title III of the Americans with Disabilities Act (ADA), a service animal is any dog that is individually trained to do work to perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability. Tasks performed can include, among other things, pulling a wheelchair, retrieving dropped items, alerting a person to a sound, reminding a person to take a medication, or pressing an elevator button. Service animals are working animals, not pets. The work or task a dog has been trained to provide must be directly related to the person's disability. Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the ADA. For more information, visit: https://www.ada.gov/service_animals_2010.htm



Ways Society Can Be Pet-Friendly

Society can become more pet-friendly to benefit people of all ages, backgrounds, and health conditions. There is a growing body of peer-reviewed scientific research that demonstrates the health benefits of human-animal interaction. A more pet-friendly society—meaning a society that allows pets in classrooms, apartment buildings, and public spaces and enables therapy animal visits for patients in hospitals, nursing homes, and more—will be a healthier, more interconnected and improved society for all.



Pets at work

Research shows the positive role pets can play in the workplace, from increasing productivity to enhancing collaboration and improving workplace morale. Pets in the workplace are most likely to be perceived to reduce stress, facilitate social interaction, serve as an organizational symbol, and serve as a self-expressive function.^{vii} Pets provide stress-relieving support, and they make the work environment more comfortable, provide a pleasant diversion from work, and provide companionship. Customers are more relaxed and interactive, as pets provide entertainment and diversion.^{viii}



Pets in the classroom

Pets in the classroom have shown to enhance empathy in children and increase social integration.^x



Pets in housing

Science has shown that pet ownership provides potential opportunities for interaction between neighbors, creating more interconnected communities.^x As the body of research exploring the health benefits of pets in our daily lives grows and as members of the Millennial generation—who are more likely to rent than buy a home—have surpassed Baby Boomers as the largest pet-owning generation, more apartments are becoming pet-friendly to accommodate the rising demand of pet-friendly housing options.

Therapy animal programs in hospitals, nursing homes, and other facilities

Therapy animal programs are becoming increasingly popular in hospitals, nursing homes, schools, and more. Animal-assisted therapy has been shown to help reduce anxiety and stress in patients and their families.^{xi} Elderly persons living in nursing homes benefit from therapy animal programs, as visits from a therapy dog can help enhance quality of life and social interaction.^{xii}

SENIOR CENTER SURVEY RESULTS



In partnership with HABRI, NCOA/NISC conducted a survey of senior centers to identify ways they implement programming with animals and how it contributes to the health and well-being of older adult participants. The survey was conducted over two months in the fall of 2017 and was disseminated via email to NISC's member list of 1,500 individuals. The survey received a 75% response rate.

Senior Center Characteristics

The survey featured a diverse group of respondents, as indicated by their organizational structures, size, and geographic locations. There was an even split between government-run and nonprofit centers, and one for-profit center. Nearly half (48%) of centers defined themselves as suburban, followed by 32% rural and 15% urban. Twenty percent indicated that they are Nationally Accredited senior centers. Respondents ranged in size, with an average of 1,858 unduplicated attendees per year.

Current Animal Programming

The most common structured animal program was a therapy animal program, reported by 22% of respondents. One senior center works with **Caring Canines**, an all-volunteer, nonprofit canine therapy animal program serving the Boston area. Respondents often reported more than one approach to including animals in their programming.

Types of Animal Programming Reported in Senior Centers

22%	Has a therapy animal visit the center	11%	Has a fish tank
15%	Allows participants to bring in their pets	6%	Has a resident pet
12%	Allows staff to bring their pets, is a pet-friendly workspace	4%	Has an organized therapy animal group that visits the center

At three centers, participants find Gus, Rosco, EZ, and Bear—trained therapy and companion dogs that visit regularly. Participants get “joy from seeing Gus the therapy dog and getting to pet the dog because many don't have dogs at home anymore,” said one senior center director. Another center has a staff person with a registered therapy dog. “She is a wonderful addition; when she sees regulars coming through the window, she will greet them at the door. The seniors love her.” Other sites mentioned visits from trained therapy dogs and their owners, and one center offers therapy animal training classes.



Of the centers that had a therapy animal animal visit, only one had an animal other than a dog, which was a cat. Just over 28% of respondents indicated that they hosted a therapy animal program. Of these centers, 34% reported that the animal visited once a month and 13% indicated the animals visited their center every day.

Other Programming

Other examples of programs involving animals included collaborations with a local Humane Society animal shelter to host a "Pet Day". A retired state trooper brought his dog to put on a training exhibit and there were dog training classes, visits from zoos, Pet Fairs, a class on "Why Pets are Beneficial," and a fun competition called "Love My Mutt Contest" where dogs and owners received prizes. Staff participated in a "Bring Your Pet to Work Day."

Just over 10% of those surveyed had a fish tank, and 6% had resident pets, which are animals that come to the center daily. This included cats and dogs. Over half of respondents did not have any animal programming, although two offered access to animals by allowing their staff and participants to bring in pets.

Service Animals

Many respondents noted that service animals are welcome at their senior center. One site said their center was primarily for seniors with blindness and vision loss and that many bring their guide dogs to the center. More than one-third of sites reported that their staff was trained on ADA service animal policies.

Pet-Friendly Offices and Centers

A total of 16% of senior centers allowed participants to bring their pets. One site has a long-standing policy that allows small dogs on a leash. Another allows them for a short time, not all day, and not in the dining area. One site

*Those who hosted therapy animal programs unanimously said it improved the lives of their participants. **Nearly half said it improved mental health, 71% said it improved social interaction, and 35% said it increased physical activity.** One site added that therapy animal provided the benefit of "compassionate touch for people who are not often touched."*

allows pets if they are housetrained, behaved, under the owner's control, and do not disturb others. Some centers have special occasions where participants can bring in their pet whether individually or as a group for a "Bring Your Pet to the Center Day."

More than 11% of respondents had a pet-friendly workplace where staff could bring their pets to work. "Our case manager brings her small dog about once a week," said one respondent.

Some sites have experienced challenges related to pets. One site that had previously allowed staff to bring pets had to discontinue this practice because of a staff person who is allergic to animals. One center does not allow animals since it is housed with a school and must adhere to their policies related to animals.

"We also have a few of our seniors who bring their dogs with them. So far that has worked out well, and the animals have been friendly when they have encountered another dog. Many of our seniors really enjoy the presence of the dogs, and we have not received any complaints."

Potential for Expansion of Animal Programming

Most respondents (65%) indicated they would be open to adding animal programming in the future. Just under 40% were very interested in adding animal programming, and 26% were somewhat interested. In contrast, 7% were not very interested, and 6% were not interested at all.

Reported Interest in Animal Programming



Pet Policies

Most respondents (56%) had no pet policies in place, while 32% did and 12% were unsure. A total of 40% said model policies from NISC would encourage them to offer animal programs, and 28% said a model would probably encourage them to offer these programs. Nine percent said that a model would not help at all, and 22% were unsure.

40% of respondents said model policies from NISC would encourage animal programming in their senior center

Overall, the survey showed that animal programming has been integrated into some senior centers, with animal-assisted therapy the most consistent type. Many centers offer occasional animal programming, and there is a desire to know more about promising animal programming.

Given the low number of senior centers that responded to having staff trained in ADA service animal policies, this is an area where additional information provided to senior center staff could be useful. It also would be beneficial for more senior centers to have animal policies in place. These policies help to minimize issues while maximizing the potential for human-animal interaction.



PET POLICY EXAMPLES

Wallingford Community Senior Center, CT

Animal Policy

Participants' animals are allowed on WCSC premises as described below. If the presence, behavior, or actions of any animal constitutes an immediate risk or danger to people or property, the participant can be asked to immediately remove the animal and 911 (emergency assistance) may be contacted.

The owner of any permitted animal must immediately clean up after the animal and properly disposing of the animal's waste or other debris. The owner is responsible for any damage or injury caused by the animal.

Service and Therapy Animals

A service animal is an animal that is trained to do work or perform tasks for an individual with a disability, including physical, sensory, mental, psychological, intellectual, or other mental disabilities. A therapy animal is trained and certified to provide emotional support or passive comfort that alleviates one or more of the identified symptoms or effects of a disability.

WCSC complies with all federal, state, and local laws to provide reasonable accommodations for people with disabilities. WCSC does not restrict the type of animal that can serve as a service or therapy animal, as long as the animal is allowed under law, and is trained to do work or perform tasks for a participant with a disability. All service and therapy animals must be kept under

their direct control at all times, such as by a harness, leash, or other tether; however, if the use of a harness, leash, or other tether interferes with the animal's safe, effective performance of work or tasks, or if the participant's disability prevents the use of such devices, then the animal must be under the owner's control through voice control, signals, or other effective means.

A service or therapy animal may be restricted from specific areas when consistent with other WCSC policies, state, and/or federal laws or regulations. Examples of these areas include food preparation areas and areas where medically-sensitive participants are served.

Companion Animals

For the purposes of this policy, companion animals, or pets, are animals that are not service or therapy animals. In accordance with the policy set by Historic Seattle for the Good Shepherd Center, companion animals are permitted provided they are with their owners at all times and safely secured by harness, leash, or cage. Harnesses and leashes cannot present a tripping hazard to other participants. Pets are never permitted in the kitchen and are not allowed in the multipurpose room while lunch is being served. Avoid excessive noise. If a pet presents a hazard, is disruptive to programs, or offensive to participants, WCSC management may require the owner to remove the pet from the premises.

Guidelines for Canine Visitors

The Redmond Senior Center (RSC) enjoys maintaining a dog-friendly environment. We offer the following guidelines to help insure that canine visits are pleasant and enjoyable for everyone.

All canine visitors should:

- Be on a leash or physically confined at all times.
- Be groomed and/or bathed to maintain no, or very little, odor.
- Be free of fleas and parasites.
- Maintain all appropriate vaccinations including a rabies vaccination.

Inappropriate behavior (incident reports will be written and filed on all inappropriate behavior):

- Dogs are not allowed on the furniture. Small dogs (less than 20 pounds) can sit in a chair if a towel or blanket is put down to cover the furniture. It is the handler/owner's responsibility to bring the covering.
- The dog must not disrupt the program/ activity or be a distraction (e.g. barking, whining, chewing). Disruptive behavior will require that the dog not come to the facility until further training has taken place and the handler/owner can prove that the dog can behave appropriately.
- The dog must not bite, growl, or in any manner threaten, anyone. Aggressive behavior will result in immediate removal from the facility. Aggressive behavior will require that the dog not come to the facility until further training has taken place and the handler/owner can prove that the dog will not behave aggressively.
- The dog must not urinate or defecate in the building. Should an accident occur it is the handler/ owner's responsibility to clean up under the direction of Facility Maintenance. More than one accident is grounds for the dog being banned from the facility.

- The dog must not be left in the care of others. The handler/owner must be responsible for the dog the entire time it is in the building
- Items that belong to the dog (e.g. toys, water bowls, etc.) or items used to care for the dog (e.g. bedding, kennels, etc.) must be kept clean and orderly, and may not be left at the center.
- When the dog is walked outdoors to take care of bathroom needs, the handler/owner must clean up after the dog and dispose of waste properly.
- The handler/owner will be held responsible for any damage the dog may cause.

Risk considerations

Dogs can be a tripping hazard. It is the handler/owner's responsibility to control their animal; making sure that they do not get under foot. Care should be taken to make sure the leash is kept short and out of the way.

Other considerations:

Individuals with a fear of dogs or allergies: These individuals are asked to make their concerns/condition known to staff. If necessary the handler/owner will be asked to remove the dog from the facility.

Service Dogs: While service dogs must follow all animal control laws, some of the above guidelines may not apply to service dogs. Individuals with service animals are asked to check in at the front desk so any other dogs and handlers/owners in the building can be made aware of the presence of the service dog and the animals will be kept away from each other.

Non-Service Animals in Schools and Elsewhere on District Property

Animals permitted in schools and elsewhere on District property shall be limited to those necessary to support specific curriculum-related projects and activities, those that provide assistance to a student or staff member due to a disability (e.g., seizure disorder), those

that provide a reasonable accommodation to a student in accordance with a Section 504 Plan, or those that serve as service animals as required by Federal and State law.

Taking into consideration that some animals can cause or exacerbate allergic reactions, spread bacterial infections, or cause damage and create a hazard if they escape from confinement, the Principal may permit non-service animals to be present in classrooms to support curriculum-related projects and activities only under the following conditions:

- A. the staff member seeking approval to have a non-service animal in his/her classroom shall:
 - 1. provide a current satisfactory health certificate or report of examination from a veterinarian for the animal;
 - 2. take precautions deemed necessary to protect the health and safety of students and other staff;

- 3. ensure that the animal is treated humanely, keeping it in a healthy condition and in appropriate housing (e.g., a cage or tank) that is properly cleaned and maintained; and,
 - 4. keep the surrounding areas in a clean and sanitary condition at all times;
- B. other staff members and parents of students in areas potentially affected by animals have been notified in writing and adjustments have been made to accommodate verified health-related or other concerns.

Except where required by law, the presence of a non-service animal shall be disallowed if documented health concerns of a student or staff member cannot be accommodated.



Winona Friendship Center, MN

City of Winona

During the 2013 legislative session, the Minnesota Legislature amended the Minnesota Human Rights Act (MHRA) to broaden the rights of individuals who use service animals in **public establishments** under the MHRA and to ensure that the MHRA was consistent with federal law, the Americans with Disabilities Act (ADA). The law went into effect August 1, 2013.



Businesses that serve the public must allow people with disabilities to enter with their service animal and to proceed into any area of the facility where customers are normally allowed to go. The law applies to all businesses open to the public (including restaurants, hotels, taxis, buses, grocery and department stores, hospitals and medical offices, theaters, health clubs, parks and zoos).

Businesses may ask if an animal is a service animal or ask what tasks the animal has been trained to perform. However, businesses may not ask:

- About the person's disability or require documentation of the disability,
- That special identification cards for the service animal be produced,
- That the dog demonstrate its ability to perform work,
- About the training that the service animal received, or
- Require individuals with a service animal to use a specific entrance.

Service animals are defined as dogs that are individually trained to do work or perform tasks for people with disabilities that are directly related to the person's disability. Service animals are working animals, not pets (examples of such work or tasks include guiding people who are blind, alerting people who are deaf, pulling a wheelchair, alerting or protecting a person who is having a seizure, reminding a person with mental illness to take prescribed medications, calming a person with Post Traumatic Stress Disorder (PTSD) during an anxiety attack, or performing other duties).

A dog whose sole function is to provide comfort or emotional support does not qualify as a service animal.

McMinnville Parks and Recreation Service Animal Policy-McMinnville Senior Center, OR

Service Animals:

An animal that is individually trained for tasks that are designed to help people with disabilities. These tasks include guiding the visually impaired, alerting the hearing impaired to sounds, alerting people to a possible seizure and/or protecting them from a seizure, and providing physical support to the person with a disability.

- The tasks performed by such animals must be directly related to the person's disability.
- Emotional support, comfort, therapy, and/or companion animals are NOT service animals.
- A dog or other animal that is not trained is not considered a service animal.

Procedures for Identifying Service Animals:

- When an individual arrives with an animal, you MAY ask the following:
 - "Is the ___ a service animal required because of a disability?"
 - If yes to above, "What tasks or services has the animal been trained for?"
- You should not ask the nature of the individual's disability.
- No questions should be asked if the nature of the animals training is obvious, i.e. Seeing Eye dog, providing assistance to someone physically impaired, pulling a wheelchair, etc.

- Staff CANNOT:
 - Ask for the animal's health records or a permit proving that the animal is needed for a type of disability service.
 - Insist that the service animal wear a form of identification, such as a vest, ID tag, or collar stating it is a service animal.
 - Exclude a service animal because of its breed or species (such as a miniature horse).

General Owner Guideline

- The handler or owner must have full control over the service animal at all times. Service animal MUST be leashed at all times.
- No permit or registration is required for a service animal, but the owner may have to answer how the animal provides services for their disability.
- Disruptive, aggressive, unkempt or ill animals are not permitted and may be asked to leave the premises.
- Service animal owners are to be held responsible for any damages caused by their service animal.

If a service animal is asked to leave the building or grounds, the staff of that location will make reasonable accommodations to help the guest continue to use the facilities provided. These accommodations do not include providing kenneling for the service animal. Water will be provided if the owner so requests, but will not be provided in the everyday course of operations. Food or veterinary service will not be provided at any point.

*Animals may be allowed for certain special programming by the McMinnville Parks and Recreation. Signed by the Parks and Recreation Director with date adopted, 10.24.2017.

THERAPY ANIMAL PROGRAMMING RESOURCES

Choosing a Therapy Animal Program

We encourage that you choose a therapy animal program whose volunteers meet a certain set of standards. Here are some important things to consider and ask:

Has the handler been trained?

- While well-behaved animals that are reliable in a variety of situations are critical, handlers need a working knowledge of best practices, from infection prevention to working with the needs of specific populations.
- Handlers should be able to interpret body language and proactively manage interactions to keep everyone safe.

Does the therapy animal team get evaluated regularly?

- Recurring, individual, in-person evaluations ensure that therapy animals remain suitable as animals age.

Is the animal's welfare prioritized?

- Animals should enjoy, not simply tolerate, therapy work.
- Animals should have regular veterinary care.

Are there procedures for protecting against illness and injury to clients?

- To limit the risk of zoonotic transmission, comprehensive infection prevention protocols must exist and include hand hygiene, animal grooming standards, vaccination and other health requirements.



Standards and Key Resources

- **Hospital Settings:** The Society for Healthcare Epidemiology of America (SHEA) Animals in Healthcare Facilities: Recommendations to Minimize Potential Risks available at www.shea-online.org.
- **Pet Partners:** Therapy Animal Program Standards and Policies and Procedures available at www.petpartners.org.
- The American Journal of Infection Control published *Animal-Assisted Interventions: A national survey of health and safety policies in hospitals, eldercare facilities, and therapy animal organizations* in 2017. Available at [https://www.ajicjournal.org/article/S0196-6553\(17\)30633-8/references](https://www.ajicjournal.org/article/S0196-6553(17)30633-8/references)
- The AVMA maintains *Animal-Assisted Interventions: Guidelines*, a policy standard to which members voluntarily adhere regarding their practice of veterinary medicine. Available at <https://www.avma.org/KB/Policies/Pages/Animal-Assisted-Interventions-Guidelines.aspx>

Source: *Standards of Practice in Animal-Assisted Interventions, Pet Partners*. E-book available at <https://www.books2read.com/standards>

Service Animal Regulations from ADA.gov:

The Department of Justice published revised final regulations implementing the Americans with Disabilities Act (ADA) for title II (State and local government services) and title III (public accommodations and commercial facilities) on September 15, 2010, in the Federal Register. These requirements, or rules, clarify and refine issues that have arisen over the past 20 years and contain new, and updated, requirements, including the 2010 Standards for Accessible Design (2010 Standards).

Overview

This publication provides guidance on the term "service animal" and the service animal provisions in the Department's new regulations.

- Beginning on March 15, 2011, only dogs are recognized as service animals under titles II and III of the ADA.
- A service animal is a dog that is individually trained to do work or perform tasks for a person with a disability.
- Generally, title II and title III entities must permit service animals to accompany people with disabilities in all areas where members of the public are allowed to go.

How "Service Animal" is Defined

Service animals are defined as dogs that are individually trained to do work or perform tasks for people with disabilities. Examples of such work or tasks include guiding people who are blind, alerting people who are deaf, pulling a wheelchair, alerting and protecting a person who is having a seizure, reminding a person with mental illness to take prescribed medications, calming a person with Post Traumatic Stress Disorder (PTSD) during an anxiety attack, or performing other duties. Service animals are working animals, not pets. The work or task a dog has been trained to provide must be directly related to the person's disability. Dogs whose sole function is to provide comfort or emotional support do not qualify as service animals under the ADA.

This definition does not affect or limit the broader definition of "assistance animal" under the Fair Housing Act or the broader definition of "service animal" under the Air Carrier Access Act.

Some State and local laws also define service animal more broadly than the ADA does. Information about such laws can be obtained from the State attorney general's office.

Where Service Animals Are Allowed

Under the ADA, State and local governments, businesses, and nonprofit organizations that serve the public generally must allow service animals to accompany people with disabilities in all areas of the facility where the public is normally allowed to go. For example, in a hospital it would be inappropriate to exclude a service animal from areas such as patient rooms, clinics, cafeterias, or examination rooms. However, it may be appropriate to exclude a service animal from operating rooms or burn units where the animal's presence may compromise a sterile environment.

Service Animals Must Be Under Control

Under the ADA, service animals must be harnessed, leashed, or tethered, unless these devices interfere with the service animal's work or the individual's disability prevents using these devices. In that case, the individual must maintain control of the animal through voice, signal, or other effective controls.

Inquiries, Exclusions, Charges, and Other Specific Rules Related to Service Animals

When it is not obvious what service an animal provides, only limited inquiries are allowed. Staff may ask two questions: (1) is the dog a service animal required because of a disability, and (2) what work or task has the dog been trained to perform. Staff cannot ask about the person's disability, require medical documentation, require a special identification card or training documentation for the dog, or ask that the dog demonstrate its ability to perform the work or task.

- Allergies and fear of dogs are not valid reasons for denying access or refusing service to people using service animals. When a person who is allergic to dog dander and a person who uses a service animal must spend time in the same room or facility, for example, in a school classroom or at a homeless shelter, they both should be accommodated by assigning them, if possible, to different locations within the room or different rooms in the facility.
- A person with a disability cannot be asked to remove his service animal from the premises unless: (1) the dog is out of control and the handler does not take effective action to control it or (2) the dog is not housebroken. When there is a legitimate reason to ask that a service animal be removed, staff must offer the person with the disability the opportunity to obtain goods or services without the animal's presence.
- Establishments that sell or prepare food must allow service animals in public areas even if state or local health codes prohibit animals on the premises.
- People with disabilities who use service animals cannot be isolated from other patrons, treated less favorably than other patrons, or charged fees that are not charged to other patrons without animals. In addition, if a business requires a deposit or fee to be paid by patrons with pets, it must waive the charge for service animals.
- If a business such as a hotel normally charges guests for damage that they cause, a customer with a disability may also be charged for damage caused by himself or his service animal.
- Staff are not required to provide care or food for a service animal.

Miniature Horses

In addition to the provisions about service dogs, the Department's revised ADA regulations have a new, separate provision about miniature horses that have been individually trained to do work or perform tasks for people with disabilities. Entities covered by the ADA must modify their policies to permit miniature horses where reasonable. The regulations set out four assessment factors to assist entities in determining whether miniature horses can be accommodated in their facility. The assessment factors are (1) whether the miniature horse is housebroken; (2) whether the miniature horse is under the owner's control; (3) whether the facility can accommodate the miniature horse's type, size, and weight; and (4) whether the miniature horse's presence will not compromise legitimate safety requirements necessary for safe operation of the facility.

For more information about the ADA, please visit the ADA website or call their toll-free number. 800-514-0301 (Voice) and 800-514-0383 (TTY) or visit www.ADA.gov.

ADA FAQ Page: https://www.ada.gov/regs2010/service_animal_qa.html

ADA Requirements – Service Animals: https://www.ada.gov/service_animals_2010.htm

ADA Business BRIEF: Service Animals: ADA.gov homepage <https://www.ada.gov/svcabrpt.pdf>

Commonly Asked Questions about Service Animals in Places of Business:
<https://www.ada.gov/archive/qasrvc.htm>



GETTING STARTED WITH ANIMAL PROGRAMMING

- **Establish** clear and measurable goals for your senior center
- **Develop policies**, protocols, and training programs for staff, volunteers, and animals
- **Gain acceptance** of your program and ensure participant awareness of policies and programming, including the benefits
- **Assess risk** and develop appropriate procedures to mitigate risk
- **Measure successes** and failures of your programs through record keeping, questionnaires, and other research

Key Components for Policies and Procedures

In developing your center's policies and procedures, be sure to consider the following components:

- **Therapy animal programming**
 - Who, what, when, and where animals and animal programming are permitted
 - Personnel requirements
 - Scheduling guidelines
 - Training and ethics for animals and their human handlers (e.g., animal handlers must be trained on the animals' needs, such as detecting signs of stress, and on animal behavior in general)
- **Senior center staff**
 - Orientation and training for senior center staff regarding animal programming
- **Senior center participants**
 - Protocol related to the well-being of participants and their interest in participating in animal programming
 - Risk reduction for participants, including knowledge of specific allergies or health conditions
 - Supervision of participants during animal programming
- **Pets in the workplace**
 - Guidelines for allowing staff to bring their pets to work

Research on the Health Benefits of the Human-Animal Bond for Healthy Aging



Cardiovascular Disease

Heart disease is the leading cause of death for people of most racial/ethnic groups in the United States. According to the CDC, about 610,000 people die of heart disease in the U.S. every year, accounting for 1 in every 4 deaths. High blood pressure puts people at greater risk for heart disease and stroke. About 75 million American adults (32%) have high blood pressure, or 1 in every 3 adults.

Human-animal interaction has been scientifically demonstrated to decrease blood pressure and improve heart health. A study published in the American Journal of Cardiology found that high social support and owning a pet tend to predict one-year survival from coronary artery disease. Dog owners are significantly less likely to die within one year than those who did not own dogs. The data confirms and extends previous findings relating to pet ownership and social support to survival among patients with coronary artery disease.^{xv} A 2013 statement from the American Heart Association concluded that owning a pet can reduce the risk of heart disease.^{xvi}



Obesity

More than one-third of older adults aged 65 and older were obese in 2007-2010, representing over 8 million adults aged 65-74, and almost 5 million adults aged 75 and over.^{xvii}

Walking for physical activity is widely promoted as it is readily accessible and improves cardiac risk factors such as cholesterol, blood pressure, diabetes, obesity, vascular stiffness, inflammation, and mental stress.^{xvi}

Pet owners have significantly lower systolic blood pressure than non-pet owners. Pet owners are also more physically active than non-pet owners.^{xvii}

Dog owners engage in more physical activity and walking and are more likely to achieve recommended physical activity than non-dog owners.^{xviii}



Alzheimer's Disease and Dementia

According to the Alzheimer's Association, 1 in 10 people age 65 and older has Alzheimer's dementia. As Americans age, the population of older adults is expected to nearly double from 48 million to 88 million by 2050, and the number of people in this age group with Alzheimer's dementia may nearly triple.^{xx}

Research has demonstrated that animal-assisted interventions can reduce aggression and agitation in those with dementia.^{xxi}

One study of elderly patients with Alzheimer's Disease found that the introduction of an aquarium resulted in higher food intake and weight gain, and a reduced requirement of nutritional supplementation.^{xxii}



Longevity

In the largest investigation of associations of dog ownership with human health reported to date, dog ownership was found to be associated with lower risk of cardiovascular disease in single households and with a reduced risk of cardiovascular and all-cause death in the general population.

Conducted in Sweden, researchers at Uppsala University analyzed 12 years of government-collected data on over 3.4 million Swedish individuals between aged 40-80, and found an association between pet ownership and a reduced risk for cardiovascular disease and death.

Main findings of the study, published in [Scientific Reports](#),^{xxiii} include:

- Ownership of hunting dog breeds was associated with a decreased risk of CVD
- Ownership of all purebred breeds were associated with a lower risk of all-cause mortality
- Additional adjustment for detailed lifestyle and socioeconomic factors only marginally altered estimates

These findings contribute to an existing body of research on the positive impact of pet ownership and healthy aging, particularly as it relates to factors that contribute to a decline in health and leading causes of death.

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