

IAHAIO WHITE PAPER 2014, updated for 2018

THE IAHAIO DEFINITIONS FOR ANIMAL ASSISTED INTERVENTION AND GUIDELINES FOR WELLNESS OF ANIMALS INVOLVED IN AAI

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UPDATES FOR 2018

The 2018 updates to the White Paper 2014 include the definition of animal assisted coaching/counselling and the definition of the One Health and One Welfare approach in AAI.

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INTERNATIONAL ASSOCIATION OF HUMAN-ANIMAL INTERACTION ORGANIZATIONS: MISSION AND VISION

The International Association of Human-Animal Interaction Organizations (IAHAIO) is the leading global association of organizations concerned with advancing the field of human-animal interaction (HAI). This is accomplished through research, education and collaboration among its members, policy makers, clinical practitioners, other human animal interaction organizations and the general public.

Many of its member organizations are involved in animal assisted activity, animal assisted therapy, animal assisted education, and/or service animal training. IAHAIO aims to promote respectful and responsible human and animal treatment during interventions and interactions with animals.

IAHAIO has over 90 multi-disciplinary member organizations and professional associations globally such as the AVMA, AAHA, FECAVA, FVE, JAHA, KAHA, WAP, and AAH-ABV in the veterinary medical field, the HABRI Foundation, ISAZ, and a wide range of academic centers, and AAI practice organizations. The very large cadre of member organizations strongly positions IAHAIO to lead the field of HAI in important directions.

IAHAIO holds international conferences and workshops which provide a wide range of vital information and unique networking opportunities for those in the field of HAI aimed at fostering dialogue, information exchange and planning strategies to move the field of HAI forward as well as addressing vital issues in the field.

THE TASK FORCE FOR THE IAHAIO DEFINITIONS FOR ANIMAL ASSISTED INTERVENTION AND GUIDELINES FOR WELLBEING ANIMALS INVOLVED IN AAI

The Task Force for the IAHAIO Definitions for Animal Assisted Intervention and Guidelines for Wellness of Animals Involved was established in March 2013. Those appointed to serve on the Task Force were academics, veterinary medicine professionals, and practitioners from different countries with a background in, or special knowledge in different dimensions in the field of Human-Animal Interaction (HAI).

Challenges facing the field of HAI at an international level are numerous. For example the plentiful and various terminologies of Animal Assisted Intervention (AAI) result in confusion. There is also a dearth of guidelines regarding those involved, especially concerning the animals. Recognizing the urgency to address the issues above, a Task Force was established and charged with the responsibility of clarifying and making recommendations on AAI terminologies and definitions and outlining ethical practices for the wellbeing of animals involved.

The recommendations of the 2014 Task Force provided in the White Paper were the result of a year of thorough, thoughtful and candid discussions about the gravity of the confusion and lack of guidelines confronting the field of HAI, respectful and proactive sharing of information and different points of view and careful review of pertinent materials. The IAHAIO board reviewed all suggested revisions made by the majority of members at the 2014 AGM in Amsterdam and those that were unanimously supported by the board have been included.

The White Paper is intended for medical, allied health, public health and care and veterinary professionals involved in animal assisted interventions.

The Task Force encourages IAHAIO members to have these definitions and guidelines adopted and implemented in theory, research and practice as they stand in their own programs and those of others working within the geographic range of the member's organization. The Task Force also recommends IAHAIO members to promote these definitions and guidelines in their respective countries.

DEFINITIONS

Animal Assisted Intervention (AAI): an Animal Assisted Intervention is a goal oriented and structured intervention that intentionally includes or incorporates animals in health, education and human services (e.g., social work) for the purpose of therapeutic gains in humans. It involves people with knowledge of the people and animals involved. Animal assisted interventions incorporate human-animal teams in human services such as Animal Assisted Therapy (AAT), Animal Assisted Education (AAE) or Animal Assisted Activity (AAA). They also include Animal Assisted Coaching (AAC). Such interventions should be developed and implemented using an interdisciplinary approach.

Animal Assisted Therapy (AAT): Animal Assisted Therapy is a goal oriented, planned and structured therapeutic intervention directed and/or delivered by health, education or human service professionals, including e.g. psychologists and social workers. Intervention progress is measured and included in professional documentation. AAT is delivered and/or directed by a formally trained (with active licensure, degree or equivalent) professional with expertise within the scope of the professionals' practice. AAT focuses on enhancing physical, cognitive, behavioral and/or socio-emotional functioning of the particular human recipient either in the group or individual setting. The professional delivering AAT (or the person handling the animal under the supervision of the human service professional) must have adequate knowledge about the behavior, needs, health and indicators and regulation of stress of the animals involved.

Animal Assisted Education (or Animal Assisted Pedagogy): Animal Assisted Education (AAE) is a goal oriented, planned and structured intervention directed and/or delivered by educational and related service professionals. AAE is conducted by qualified (with degree) general and special education teachers either in the group or individual setting. An example of AAE delivered by a regular education teacher is an educational visit that promotes responsible pet ownership. AAE, when done by special (remedial) education teachers is also considered therapeutic and a goal oriented intervention. The focus of the activities is on academic goals, pro-social skills and cognitive functioning. The student's progress is measured and documented. The professional delivering AAE, including regular school teachers (or the person handling the animal under the supervision of the education professional) must have adequate knowledge about the behavior, needs, health and indicators and regulation of stress of the animals involved.

Animal Assisted Activity (AAA): AAA is a planned and goal oriented informal interaction and visitation conducted by the human-animal team for motivational, educational and recreational purposes. Human-animal teams must have received at least introductory training, preparation and assessment to participate in informal visitations. Human-animal teams who provide AAA may also work formally and directly with a healthcare, educator and/or human service provider on specific documentable goals. In this case they are participating in AAT or AAE that is conducted by a specialist in his/her profession. Examples of AAA include animal assisted crisis response that focuses on providing comfort and support for trauma, crisis and disaster survivors, and visiting companion animals for "meet and greet" activities with residents in nursing homes. The person delivering AAA must have adequate knowledge about the behavior, needs, health and indicators of stress of the animals involved.

Animal Assisted Coaching/Counselling (AAC): Animal Assisted Coaching/Counselling is a goal oriented, planned and structured animal assisted intervention directed and/or delivered by professionals licensed as coaches or counsellors. Intervention progress is measured and included in professional documentation. AAC is delivered and/or directed by a formally trained (with active licensure, degree or equivalent) professional coach or counsellor with expertise within the scope of the professionals' practice. AAC focuses on enhancing personal growth of the recipient, on insight and enhancement of groups processes, or on social skills and/or socio-emotional functioning of the coachee(s) or client(s). The coach/counsellor delivering AAC (or the person handling the animal under the supervision of the coach/counsellor) must have adequate training about the behavior, needs, health and indicators and regulation of stress of the animals involved.

ONE HEALTH AND ONE WELFARE

One Health is not a new concept. It dates back to the 1800s when scientists determined many similarities in disease processes of humans and animals. More recently, its applications involve veterinary and other scientists collaborating to protect public health. One Health recognizes that the "health of the people is connected to the health of animals and the environment" and the "goal is to attain optimal health outcomes recognizing the interconnectedness between people, animals, plants and their shared environment." (Center for Disease Control, USA). The Center for Disease Control has adopted the World Health Organization's definition for health namely "a state of complete physical, mental and social well-being" (WHO, 1946).

More recently the interdisciplinary approach has been extended to One Welfare which recognizes the interrelationship between animal welfare, human well-being and the environment. (Pinillos, 2016) The interdisciplinary collaborative nature of both these approaches provides unique opportunities for professionals from several disciplines and stakeholders to collaborate locally, nationally and globally to achieve optimal health for people, animals and the environment. The World Health Organization's reference to emotional and social states can also be found in One Welfare (Fraser, 2008) which emphasizes the strong link between animal welfare and human health.

One Health and One Welfare are relevant to Animal Assisted Interventions, the goals of which are similar; the improvement of human health, wellness and functioning. Veterinarians can utilize their knowledge of human-animal interactions and of animal health and behavior to address public health issues within a One Health One Welfare framework. Companion animal veterinarians are beginning to adopt such a mode of practice to support the welfare and quality of life of clients whilst delivering high standards of veterinary care in an approach termed bond-centered veterinary practice (Ormerod, 2008)

Jordan and Lem (2014) eloquently explain that "where there are poor states of human welfare there commonly exist poor states of animal welfare (...) Similarly, animals often act as indicators of human health and welfare as can be seen in the link between animal abuse and family violence" (p. 1203). It would be unethical to initiate an AAI with a goal of improving a

patient's welfare through a program that compromises the well-being of the animal or other individuals. In designing effective AAI's, facilities and handlers must ensure that adequate provisions and protocols are in place to continually monitor and safeguard the health and well-being of all patients, staff, handlers, visitors and animals involved. A One Health One Welfare interdisciplinary approach will enable this objective.

GUIDELINES FOR HUMAN AND ANIMAL WELLBEING IN AAI

A One Health One Welfare interdisciplinary approach should be employed from the initial planning stages and throughout the life of each program to help ensure that proper safeguarding protocols are in place to protect the health of both human and animal participants.

Human Wellbeing

- Safety measures for clients must be in place. Professionals must reduce risk for clients involved in AAI. They must ensure that clients do not have species or breed specific allergies, be aware of high risk in some population and of exclusion criteria depending on the risk (e.g., infection in immunosuppressed patients, and diseases which can be spread from client to client via the animal. In some situations, for example, working with immunosuppressed patients, public health specialists may require screening tests for animals to ensure they are not carrying particular infections.
- Animal handlers need to understand the needs of the recipients involved. They should have received training in the human context in which the AAI will occur.
- Recipients may have different views about specific animals included in interventions. When the recipients' beliefs – religious, cultural, or otherwise – run counter to recommended AAI, it is advisable that professionals discuss alternatives with recipients or their families, if incapacitated.

Animal Wellbeing

AAI should only be performed with the assistance of animals that are in good health, both physically and emotionally and that enjoy this type of activity. It is mandatory that handlers must be familiar with the individual animals taking part in an intervention. Professionals are held accountable for the well-being of the animals they are working with. In all AAI, professionals need to consider the safety and welfare of all participants. Professionals must understand that the participating animal, independent of the species, is not simply a tool, but a living being. Below are descriptions of best practices for animals involved in AAI and AAA, including assistance and service dogs.

Only domesticated animals can be involved in interventions and activities.
 Domesticated animals (e.g., dogs, cats, horses, farm animals, guinea pigs, rats, fish,

birds) are those animals that have been adapted for social interactions with humans. However, it is important to note that although many species of fish are kept as pets in institutions, few are adapted for social interactions. (Birds and fish should not be wild caught, but captive bred). Domesticated animals must be well socialized with humans and trained with humane techniques, such as positive reinforcement. Domesticated animals (dogs, cats, equines) should be registered with one of the national/international organization as meeting certain criteria.

- Wild and exotic species (e.g., dolphins, elephants, capuchin monkeys, prairie dogs, arthropods, reptiles), even tame ones, cannot be involved in interactions. The reasons are many and include high risks to clients from zoonoses and animal welfare issues. The Whale and Dolphin Conservation Society's statement on Dolphin assisted therapy is that it unlikely meets the psychological or physical welfare needs of either human participants or dolphins (Brakes & Williamson, 2007, p.18). However, observation and contemplation about wild animals in the natural world and in wild life sanctuaries that meet national/international animal welfare standards may be involved as opposed to direct contact with wild animals provided it is done in a way not to cause the animals any stress or damage to their habitat.
- Not all animals, including many that would be considered "good pets" by their owners, are good candidates for AAI. Animals considered for participation in AAI or AAA should be carefully evaluated for behavior and temperament by an expert in animal behavior such as veterinarians and animal behaviorists. Only those with the proper disposition and training should be selected for AAI. Regular evaluations should be performed to ensure that the animals continue to show proper disposition. A veterinarian should also examine animals considered for AAI before their involvement with recipients assessing them for health, and ensuring that all appropriate preventive medicine protocols are in place, and for resident animals ensuring that the environment and recipient group would suit their needs.
- Handlers and professionals working with animals should have received training and knowledge of the animals' well-being needs, including being able to detect signs of discomfort and stress. Professionals should have taken a course on general animal behavior and appropriate human-animal interactions and species specific (i.e., horses, pigs, hamsters, gerbils, and others) interactions.
- Professionals must have an understanding of animal specific boundaries that are normal and respectful to them. Animals participating in AAI should never be involved in such ways that their safety and comfort are jeopardized. Examples of such inappropriate activities and therapy exercises include, but are not limited to, recipients (children and adults) jumping or bending over animals, dressing up animals in human clothes or costumes, outfitting animals with uncomfortable accessories (dressing other that clothes such as bandanas, weather related jackets, booties designed specifically for animals), or asking an animal to perform physically challenging or stressful tasks (e.g., crawling, leaning/bending in unnatural positions, pulling heavy gear) or tricks and exercises that require such movements and postures. Recipients should be supervised at all times and in all settings (e.g., schools, therapy)

sites, nursing homes) to make sure that they are not teasing the animal (e.g., pulling tail/ears, sitting on or crawling under the animal) or otherwise treating the animal inappropriately, thereby putting themselves and the animal at risk.

- Professionals who are responsible for the well-being of the animal during intervention
 must ensure that the animal is healthy, well rested, comfortable, and cared for during
 and after the sessions (e.g., provision of fresh water, work floors that are safe and
 suitable). Animals must not be overworked or overwhelmed and sessions should be
 time limited (30-45 minutes).
- Proper veterinary care must be provided. All animals participating in AAI or AAA must be checked by a veterinarian during the selection process and on a regular basis. The frequency of these checks should be decided by the veterinarian based on each animal's needs and the type of activities the animal is involved in. Care of the animals must be appropriate to the species. This includes species specific food and housing, appropriate temperature, lighting, environment enrichment and other pertinent features and ensuring that the animal is able to maintain natural behavior to the extent possible.
- Adequate measures must be taken to prevent zoonoses. Professionals must ensure
 that the animals receive a routine health evaluation by a licensed veterinarian at least
 once a year regarding appropriate vaccinations, and parasite prevention. Animals
 involved in AAI must not be fed raw meat or other raw biological protein e.g.
 unpasteurized milk. (with the exception of unweaned animals receiving their dam's
 milk) (Murthy et al. 2005)
- Professionals and administrators working in partnership with visiting or resident animals in institutions such as schools, psychiatric wards, prisons & residential programs need to be aware of local (e.g., school, district, state) laws and policies. Within their own programs and institutions professionals should advocate for policies and procedures to ensure care is provided for animals assisting in AAI. The formation of an ethics committee is advised and the committee must include individuals knowledgeable in animal welfare (e.g., veterinarian)
- Assistance Dogs are highly specialized and guidelines for professionals working in partnerships with Assistance dogs are not part of this document.

Given the biological and psychological evidence for the innate affinity of humans to companion animals and vice-versa and a commitment to their health and welfare, the members of the International Association of Human-Animal Interaction Organizations overwhelmingly embrace the concept of "One Health," which asserts that the health and wellness of animals, people, and the environment are inextricably linked (http://www.iahaio.org/files/declarationchicago.pdf, IAHAIO 2013 Chicago Declaration).

REFERENCES

- 1. American Veterinary Medical Association (AVMA) (nd). *Animal-Assisted Interventions:*Guidelines. Link: https://www.avma.org/KB/Policies/Pages/Animal-Assisted-Interventions-Guidelines.aspx
- Brakes, P., & Williamson, D (2007). Dolphin Assisted Therapy. The Whale and Dolphin Conservation Society. Link: https://oceancare.org/wpcontent/uploads/2016/07/Report_Delphintherapie_Brakes-Williamson_Can-you-put-your-faith-in-DAT_EN_2007.pdf
- 3. Farm Animals Welfare Council (FAWC) (1979, 2009). Five Freedoms. Link: https://webarchive.nationalarchives.gov.uk/20121010012427/http://www.fawc.org.uk/freedoms.htm
- 4. Fraser D. (2008). *Understanding Animal Welfare: The Science in its Cultural Context*. Oxford: Wiley-Blackwell.
- 5. Jordan, T., Lem, M. (2014). One Health, One Welfare: Education in practice Veterinary students' experiences with Community Veterinary Outreach, *Canadian Veterinary Journal*, vol. 55(12), pp. 1203–1206; link: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4231813/
- 6. Murthy, R., Bearman, G., Brown, S., Bryant, K., Chinn, R., Hewlett, R., George, G., Goldstein E., Holzmann-Pazgal, G., Rupp, M., Wiemken, T., Weese, S., Weber, D. (2015). Animals in Healthcare Facilities: Recommendations to Minimize Potential Risks. "Infection Control and Hospital Epidemiology", vol. *36*(5), pp. 495-516. DOI: 10.1017/ice.2015.15
- 7. Ormerod, E. J (2008). Bond-centered veterinary practice: Lessons for veterinary faculty and students. *Journal of Veterinary Medical Education*, vol. 35 (4), pp. 545-551
- 8. Pinillos, R., Appleby, M., Scott-Park, F., Smith, C.W. (2015). One Welfare, "Veterinary Record" vol. 177, pp. 629-630; link: http://dx.doi.org/10.1136/vr.h6830
- 9. World Health Organization (1946). WHO Definiton of Health. Preamble to the Constitution of WHO as adopted by the International Health Conference, New York, 19 June 22 July 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of WHO, no. 2, p. 100) and entered into force on 7 April 1948. The definition has not been amended since 1948.

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PROTOCOL FOR TRANSLATING THE IAHAIO WHITE PAPER INTO OTHER LANGUAGES

The White Paper is an official document and communication of IAHAIO and its official language is English. To enable our global members to promote the content of the White Paper in their own countries, IAHAIO supports translation of this document into other languages. Member organizations or representatives of member organizations can request the board for an official translation in their language. The board then will hire a neutral translation service. The translated version of the White Paper will be sent to representatives of the member organizations who are bilingual in the local language and English and requested to review and validate the technical and conceptual accuracy of the translation. The final document will be voted on by the board and it will be decided if this document is an authorized document by IAHAIO. If there ever should be a dispute about the content of the translation, wording, etc. the original English version would serve as the main reference.