



**TORONTO  
HUMANE  
SOCIETY**

like no  
other.

**URGENT CARE**

Preserving the human-animal bond

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## Introduction

### Our Mission

Toronto Humane Society is an animal welfare organization whose mission is to promote the humane care and protection of all animals and to prevent all forms of cruelty and suffering. Toronto Humane Society's operations are centered around improving the lives of animals and preserving families by strengthening the human-animal bond. Following no kill principles, Toronto Humane Society aspires to be a best-in-class animal welfare organization – working in partnership with the community to find creative solutions and improve outcomes for all animals.

### Our History

The establishment of Toronto Humane Society was inspired by an anonymous \$2 donation to aid an old and tired white workhorse. In November 1886, a Toronto resident sent a letter to a daily newspaper about the horse, a familiar sight on city streets.

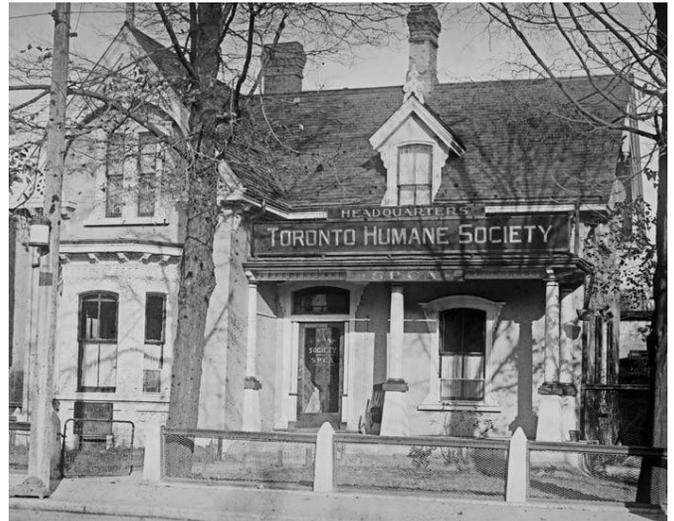
"Why ... don't we have a society for the prevention of cruelty?" was the comment added to the letter by 22-year-old reporter John J. Kelso when it was published in the World. In answer to his question, an anonymous donor sent the \$2 donation to the newspaper office the following day. The fund kept growing until \$74 had accumulated. Kelso's presentation to the Canadian Institute on February 19, 1887, marked the launch of the humane and children's aid movement in Ontario. In his speech,

Kelso pointed out there was no society of the kind in Toronto and proposed the establishment of a general humane association with several objectives including, but not limited to:

- Stop cruelty to children
- Rescue children from vicious influences and remedy their conditions
- Put humane literature into schools and homes
- Induce children to be humane
- Encourage everybody to practice and teach kindness to animals and others
- Stop the beating of animals
- Prevent the under-feeding and over-driving of horses and cattle
- Provide better laws and regulations for animal and child welfare

The inaugural meeting was held on February 24, 1887, and the name "Humane Society" was chosen "because its mission was to be broadly educational – better laws, better methods and development of the humane spirit in all affairs of life."

From its beginnings, Toronto Humane Society has had a long journey and continues to demonstrate its commitment to the humane treatment of animals.



## **Launching Toronto Humane Society Programs**

Over the years, in order to meet community needs and to breathe life into the comprehensive objectives Kelso strived for in 1887, Toronto Humane Society programs have seen vast expansion. Including but not limited to, the establishment and operation of a high-volume community veterinary clinic and the development of a full-bodied adoption program. In more recent years, additional services beyond shelter activities have flourished. They include a pet food bank for local community residents, canine and feline training and behavioural consultation programs, educational outreach to various populations and animal rescue operations at the local, provincial, national and international levels.

Living true to the original mission, we work to bring and encourage kindness to animals and others. By observing and continually learning of the needs of our community, we embrace opportunities to add to our vast array of services.

We view animal welfare as part of an overall investment in families and our larger community.

## **Sheltering Programs**

Toronto Humane Society strives to operate a first-class animal shelter with the highest quality programs, services and facilities supported by expert staff. In 2019, over 3,100 animals were brought into our care and found their forever homes, including 1,500 animals that were brought in by our Rescue Transport team from other local, national and international regions in order to prevent unnecessary euthanasia.

## **Public Veterinary Services**

In 2018, our Public Veterinary Services (PVS) offered over \$173,000 in subsidized care services to those in need, serving more than 12,000 animals. Among other services, our PVS offers community pet owners access to reduced cost neuters/spays, vaccinations, preventative testing and treatments, and microchip services. Despite the rising cost of veterinary care, we continue to understand and prioritize the importance of having accessible services to those who are on income supplementation. By supporting these needs, we are helping to keep animals healthy in loving homes, and out of the shelter system.

## **Public Training Services**

Toronto Humane Society is proud to offer a variety of training and care support options. We are passionate about advocating for, and educating pet owners about, humane, compassionate, and trust building training practices. We provide a number of group training classes along with private behaviour consultations and training appointments for both cats and dogs. We also provide dog walking services to busy pet owners in need of professional and dependable care support. Our certified and experienced team follow minimally aversive handling, training and behavior modification interventions, in addition to providing a constructive, supportive, and inspiring environment to strengthen the human-animal bond.

## **Safe Pet Program**

In 2019, we continued to move towards a humane society by joining others in helping survivors of domestic violence. With a grant from PetSmart Charities, we officially partnered with Link Coalition Toronto, via the "Link T.O.--Toronto Humane Society Community Partner Program", to support and expand their existing *SafePet* program.



*SafePet* program provides temporary foster care for pets of survivors fleeing domestic violence. Toronto Humane Society provides veterinary care for *SafePet* animals throughout the duration of their fostering period.

### **Urgent Care Program**

Over the years, in response to community requests, we offered temporary fostering, similar to *SafePet*, to pet owners with needs that fell outside of the domestic violence realm. In the interest of maintaining the human-animal bond, we accepted these animals into our foster program.

Appreciating this need existed on a larger scale, and in conjunction with our experience offering *SafePet*, we felt compelled to officially expand our program.

**Thank you to PetSmart Charities® of Canada for making this program possible.**



With the official launch of the UC program, we were able to make two key program expansions:

- Extend the program offering to populations beyond survivors of violence
- Accept requests directly from owners, without requiring a third-party referral

### **Manual Intention**

As part of our program development, it is important to us that not only are we able to expand our program offerings in Toronto but also that we contribute on a more macro level. We developed and produced this manual in hopes that it would guide other communities in establishing their own respite fostering programs. As we acknowledge that other organizations may have a different focus, and that every community has differing needs, we hope that there are applicable elements and concepts within.

### **With Gratitude**

#### **Land Acknowledgement**

Our [\*Land Acknowledgment\*](#) is a formal statement that recognizes and respects Indigenous Peoples as traditional stewards of this land and the enduring relationship that exists between Indigenous Peoples and their traditional territories.

### **Sister Programs**

We are grateful to our sister programs across North America who run similar programs with whom we consulted. Thank you for your generosity in speaking with us, sharing your time, your key learnings and your experiences. In the spirit of collaboration, we offer this manual to other communities that may experience a similar need and could benefit from our learnings.

By supporting each other, we support and grow humane societies.



## Why Urgent Care is a Priority

At Toronto Humane Society, we are committed to addressing inequity and reducing barriers to resources for pet owners in need. The Humane Society of the United States (n.d.) and Toronto Humane Society “recognize that a love for pets transcends socio-economic boundaries. It’s our belief that no one should be denied the opportunity to experience the joy and comfort that comes from the human-animal bond.” We strive to understand the challenges our specific community faces and in doing so, we are able to bring to life the interconnectivity between humans, animals and our environment in new ways.

We recognize the value that the human-animal bond (HAB) has for both the guardian and the pet. We also recognize that the best place for every pet is in a loving home. We take a multi-disciplinary approach to providing services, support and shelter to both the animal and the guardians in need of assistance.

During times of crisis or transition, the UC program provides temporary foster care placement for owners who are temporarily unable to care for their pet. By providing services to marginalized populations we are gifted with the opportunity to see the reciprocal wellbeing of caring for our community and individuals. We also further our own understanding and awareness of how systemic barriers, such as poverty, violence, vulnerability and homelessness, impact marginalized pet owners and why access to a program such as UC is of need and benefit.

The UC program responds to the needs of individuals and their pets facing crisis, and at the same time, prevents unnecessary surrenders and mitigates animal abandonment.

## Populations Who May Benefit From Urgent Care

At Toronto Humane Society, we recognize that each community differs, and within each community there may be divergent populations for whom UC may be of most benefit.

In Toronto, the UC program offers temporary foster placement to pet owners who are experiencing homelessness/housing insecurity or are being admitted to a health facility/require medical treatments that impact their ability to care for their companion animal. In addition, we continue to welcome requests from persons fleeing violence through SafePet. As we anticipate there may be alternative scenarios of need, these categories are fluid and not exclusive.

We assess each application on an individual basis with acceptance contingent on our ability to successfully and safely place the animal(s) in a foster home.

## Marginalized Populations

### Diversity, Equity and Inclusion

At Toronto Humane Society we recognize that animal welfare services are connected to larger systemic challenges. Intersecting oppressions and discrimination impact marginalized populations and creates economic disparities, racial segregation, housing insecurity, barriers to education and employment, and implications for unfair justice responses. We recognize that these issues can have direct impacts on pet owners' access to, and ability to engage, pet care.

Humane Societies of the United States operate an inclusion program entitled “Pets for Life” (PFL). PFL works to, “address inequities and the lack of access to pet resources people experience in underserved communities” (The Humane Society of the United States, n.d.). Toronto Humane



Society embraces PFL's philosophy and continues to seek ways to balance disparity in our community. We stand in solidarity with our community members working to address systemic racism and actively engage in meaningful introspection.

We are strongly committed to promoting diversity, inclusivity and equity and launched a formal DEI Program in July 2020 which will further guide this work both internally and externally. We will continue to engage in ongoing research to assess our programs and inform and guide service offerings to ensure we are best reaching and serving our community.

### **Anti-Racism/Anti-Oppressive Practices**

As an organization we are committed to our social responsibility to take a deeper look at systemic issues that impact our staff, volunteers and pet owners, with a goal of achieving a more equitable animal welfare industry.

Toronto Humane Society aims to foster a diverse, inclusive, and equitable environment for all its stakeholders. In the Urgent Care program, we embrace an anti-racism/anti-oppression (AR/AO) approach by aiming to acknowledge differences, analyze and mitigate biases, and practice empathy. By doing so it challenges us to look at the ways in which people experience oppression and marginalization, acknowledging that context is paramount, and that people's realities are complex.

As Toronto is one of the most diverse cities in the world, it is incumbent upon us to acknowledge that pet owners carry multiple and varied identities and we, at Toronto Humane Society and the Urgent Care program, need to continue embracing and prioritising access for heterogeneous backgrounds and diverse identities.

By recognizing interpersonal, structural and institutional oppressions we can better understand the dynamics of power and privilege in our communities and in our organization. We, at Toronto Humane Society, choose to positively harness our power, position in society, and privilege to be any ally and play a role in challenging disparities. Animals act as a common denominator and can bring unity, collaboration, and inclusion. By embracing this unique position, we work to widen our scope, our impact, and create a more "humane society" for our community.

### **Bias**

As service providers, our work in AR/AO requires us to analyze personal bias. Recognizing that everyone has bias is essential; and acknowledging that these shape what we think and how we behave is critical. By acknowledging and addressing our bias we work to eliminate discriminatory practices, protocols, and service delivery. Working on self-assessment is essential, it is a key to our engagement with the community, and a mandatory component of offering the UC program.

We are mindful that this process can be painful. As such, we support our staff in recognizing and acknowledging that membership in dominant or majority groups/identities can be distressing and discomfoting. Therefore, we strive to work from a position of "allyship," defined as: "a lifelong process of building relationships built on trust, consistency, and accountability with marginalized individuals and/or groups of people" (The Humane Society of the United States, n.d.); offering the opportunity to stand with, and harness our privilege as experts in animal welfare for advancement of our whole community.



## Judgements, Assumptions and Misperceptions for Reflection

It is well researched that persons experiencing marginalization are subjected to high degrees of stigmatization; this is also true for those who are pet owners. Personal values and subsequent judgements may lead to criticism and questions about someone's ability to care for their pet, and in more escalated situations, threats of removal by means of animal services.

In order to provide effective and ethical care to marginalized populations accessing the UC program, it is essential that staff consider our own perceptions and biases. As animal care providers, it is implicit that we desire all animals to have the highest level of care possible. When we consider owners, who may not be able to offer care that we believe would be optimal, it is incumbent on us to explore what arises within and challenge those judgements. A lack of financial resources does not equate to a lack of love.

If we overlook this exploratory self-work, we risk engaging in a manner that continues to further marginalize those very owners who are boldly asking for our help. We run the risk of projecting our assumptions, biases and perceptions onto them, instilling/furthering judgement, and potentially preventing an animal from receiving care and treatment.

Jordan & Lem (2014) conducted a research study "One Health, One Welfare" which sought to explore student veterinarians' experiences volunteering in a public veterinary clinic. Prior to commencement they analyzed pre-existing biases. Among those, students described three primary concerns:

### Judgement #1: "Owners will be difficult"

Students disclosed concerns that pet owners may be "indifferent and difficult to work with." In spite of these reservations, after having an opportunity to engage, students quickly came to realize that the common goal of animal welfare brought unity and an alliance.

*"... I was concerned about my ability to talk with the clients. Their experiences in life have been so different from my own.... Initially I was very cautious...but it wasn't long before conversation came naturally.... experience made me realize how easy it is to talk with people, regardless of their lifestyle, as long as you're polite and willing to listen." (Jordan & Lem, 2014)*

### Judgement #2: "Animals will be in poor health"

The study further drew attention to the assumption that homeless or instability housed persons may be incapable, or unwilling to provide care, "To be honest, I did have biases. I was nervous that we would see patients who were poorly cared for and clients who were apathetic. But I could not have been more mistaken." (Jordan & Lem, 2014)

*"I think I had a bias that these people would not care for their animals as well as those people that were a bit more well off. That changed immediately once the first client walked through the door. I'd never seen people love their pet so much, and care so much for them. It was incredible to see and incredibly rewarding to be able to help them and their animals." (Jordan & Lem, 2014)*

### Judgement #3: "If you can't care for self, you shouldn't own an animal"

The students expressed reservations about owner's capacity to care, however they learned that not only were these owners "on par" with owners who had housing, but instead they were found to be "more attentive, inquisitive, and grateful."



*"I expected that people having difficulty feeding themselves would also lead to reduced care for their pet. This was incorrect and I was impressed about how well they were looked after."*

*"... they wanted to know about toys and training and really, really cared about the quality of life their pets were experiencing." (Jordan & Lem, 2014)*

By challenging ourselves to look within, we may discover we too carry judgements and assumptions. The next step is to create space to be curious and determine whether these concepts are based on implicit bias and in fact, may be misperceptions, just as the student veterinarians found.

### **Staff Enrichment**

A significant opportunity exists by offering this work, not only for owners but for staff as well.

By providing services to marginalized populations, we see the opportunity to expand one's professional identity, beyond the clinic, and to see the value within the wider community. Jordan & Lem (2014) found that doing so provides the opportunity for individual staff to explore their own sense of self, the larger context in which they operate, and the opportunity to make an impact in larger society. The opportunity for long term personal and professional growth is present.

*"I have learned so much, but mostly about myself. I identified personal biases (and broke most of them). I realized how the well-being of both animals and owners are intertwined. And I learned that a little giving, even just your time, can go a long way."*

*"... allowed me to grow as a student veterinarian, a community member but most importantly, as a human being." (Jordan & Lem, 2014)*

Another area for staff growth noted in the study speaks to the ongoing development of empathy and compassion.

*"I've learned to be patient, compassionate and to treat every individual without any preconceptions — I don't know their situations/backgrounds, so I shouldn't be judging. What we do have in common is that we care about their pet(s), and that's why we're here — we should work as a team to help their pet(s)." (Jordan & Lem, 2014)*

By increasing our empathy and our compassion for pet owners, we will undoubtedly improve animal welfare and thus improve community health.

### **Connecting Equity and Animal Welfare**

Issues of inequity are not isolated; they impact every aspect of society, including animal welfare. We see this in accessibility to veterinary care, access to affordable veterinary care, access to sustainable, safe and secure housing, food security and access to safe places within one's community to enjoy, amongst others. Even with access, persons who experience marginalization may have different outcomes.

At Toronto Humane Society, we aspire to collectively and individually recognize the interconnectivity, intersectionality and cumulative impact of systemic discrimination, institutional discrimination and implicit biases. We are working towards considering how our services and our systems are influenced by oppressions for pet owners. By striving to understand the intersection



of social, racial and economic justice with, and on, animal welfare, we take responsibility for service inequities and look to bring balance.

## Housing Instability

In order to be prepared to provide service to persons experiencing housing instability, we believe it is imperative to have a greater understanding of the complexity and varying dynamics that being without housing, can comprise.

## What is Homelessness?

The Canadian Observatory on Homelessness (2012) has defined homelessness as a “situation of an individual, family or community without stable, safe permanent, appropriate housing or the immediate prospect, means and ability of acquiring it.”

It is understood that being, or becoming homeless, is the result of complex and interconnected factors, including systemic and social barriers.

The Observatory (2012) has grouped this experience into four primary categories, as homelessness occurs on a spectrum, as community members in Toronto have experienced across the continuum.

- **Unsheltered:** living on the street or in places not habitable for humans e.g.: living outside, in cars, garages, tents, squatting
- **Emergency sheltered:** residing in shelters
- **Provisionally accommodated:** temporary residences
  - e.g.: transitional housing, with friends/family without ability to secure own housing, “couch surfing,” motels/hostels, rooming houses, in hospital/treatment centres/group homes/jails who were homeless prior to admittance/lost housing while in care, cannot return to housing due to change in needs, accommodation for recently arrived immigrants/refugees
- **At risk of homelessness:** not currently homeless but financial status or housing is precarious and it does not meet public health and safety standards. e.g.: a single event (crisis) could result in loss of housing
- **Imminent risk:** unstable employment/live pay cheque to pay cheque, parttime/contract work/poorly paid, unanticipated expense, sudden unemployment, facing eviction, household size changing (divorce, separation, roommates move out), violence in current housing
- **Precariously housing:** severe housing affordability problems due to local economy, lack of affordable housing, income concerns. Income does not cover rent/shelter and all other needs (OW/ODSP)

When we have a clearer understanding of the variability of unstable housing, it becomes more probable that we will employ a compassionate stance. As we recognize the pervasiveness and possibility that homelessness can befall anyone, we consider that not only may owners experience housing instability, but it is also possible that over the course of life, so too may our animal welfare volunteers and colleagues (Gaetz et al, 2012).



## How Prevalent is Homelessness?

### In Canada

Research indicates that between 150,000 to 300,000 individuals experience homelessness in Canada each year, with a conservative estimate of approximately 35,000 every night. (Gaetz, Donaldson, Richter, & Gulliver, 2013)

We bear in mind this data was collected using shelter-reporting statistics and as such, only accounts for persons residing in emergency shelters.

As there is no reliable data on alternative experiences of homelessness, experts' best proposals suggest that any given time, approximately 2,880 persons are unsheltered, 4,464 in institutions and an additional 50,000 "hidden homeless" who are staying temporarily with friends or family. These numbers are considered to be conservative (Gaetz, Donaldson, Richter, & Gulliver, 2013).

### In Toronto

Toronto has the highest, trackable number of people, experiencing homeless in Canada. According to a local agency working in the homeless sector, Fred Victor (n.d.) estimates there are over 9,200 people in Toronto who are homeless on any given night. This number takes into account the four distinct categories delineated by The Observatory. In considering shelter use specifically, the occupancy rate in Toronto is 98%/night. Of these, 94% desire a permanent home, with 36% experiencing homeless for more than one year and 75% experiencing mental health impacts (Fred Victor, n.d.).

## Why is Homelessness Problematic in Toronto, specifically?

It has been suggested that a major contributor to the crisis of homelessness and housing instability in Toronto relates to the economy and housing market. Over the past decade a combination of underlying issues have been recognized as cause; increases in rent, lack of affordable housing options, increases in condo development and neighbourhood gentrification, have cumulatively resulted in housing challenges.

### Lack of Affordable Housing

Affordability is thought to be a high contributor in preventing people from finding appropriate safe housing.

The cost of rent in Toronto continues to increase at exponential rates; in 2020, the average market rent for a one-bedroom apartment came in at \$2,187 (Toronto Real Estate Board, 2020).

Using the commonly cited guideline that no more than 25-35% of household income be allocated for rent in order to avoid having other financial issues; it is estimated that household income would have to be over \$100,000 for this to be sustainable. This is far from achievable for those considered "low-income" (receiving \$34,000/year or less), receive minimum wage or on fixed incomes.

For those who are employed fulltime (40 hours per week) and receive the general minimum wage, they make \$2,240/month before taxes. Which equates to earning only \$53 more than the average market rent.

As of February 2020, a single person receiving income supplementation of Ontario Works (OW) receives a monthly maximum of \$390 for rent and \$343 for all other living expenses (including:



food, transportation, personal needs) (City of Toronto, 2020). Those persons on Ontario Disability Support Program (ODSP) do not fare much better, receiving a maximum of \$672 for rent and \$497 for a total \$1169/month (Ministry of Children, Community and Social Services, 2018).

### Lack of Subsidized Housing

In terms of affordable housing, over 100,000 people are on the subsidized housing waitlist in Toronto, which currently carries an approximate ten-year wait (Fred Victor, n.d.).

### Condo Establishment/Gentrification in Toronto

Another significant consideration, specific to Toronto, is the continued surge of demolition of rental properties to make way for condominium expansion and development. Areas such as Parkdale and Regent Park (in Toronto Humane Society neighbourhood) for example, have experienced gentrification that resulted in the loss of several affordable housing options including, municipal-operated subsidized housing units and private rooming houses. Finding alternative housing within a set means, often requires Toronto residents to consider a move outside of the GTA.

### Fleeing Violence

Toronto Humane Society acknowledges that a home may be, or become unsafe and uninhabitable, due to interpersonal violence; a following section will discuss this issue in more depth.

## **Connecting Homelessness and Animal Welfare**

According to Kerman, Gran-Ruaz & Lem (2019) approximately 5-25% of the homeless population, or approximately one in ten homeless or vulnerably housed people, are pet owners.

As homelessness is primarily short-term in Canada (Gaetz, Dej, Richter & Redman, 2016), we see UC as Toronto Humane Society's recognition of the housing crisis in our city, not as an individual responsibility, but rather a complex and complicated combination of systematic and multifaceted dynamics. Further, we recognize and acknowledge the many positive effects associated with animal companionship; these impacts are no less true for owners from marginalized positions, including being without sustainable housing.

### Positive Impact of Pet Ownership

Animal ownership on a whole offers' companionship, affection, a source of love, and a sense of belonging and non-judgmental acceptance. Labrecque and Walsh (2011) conducted a nationwide research study of women residing in Canadian shelters and found attachment to be the primary reason for owning/keeping a pet: unconditional acceptance (39%) and comfort (51%). The same reasoning was found among youth experiencing homelessness, "My pet makes me feel loved.... gives me someone to love" (Harmony, Winetrobe & Rice, 2015).

Further, for those who are unsheltered, pets are also a source of soliciting external social interaction. Animals serve as a topic of conversation and may assist with facilitating social engagement between owners and members of the wider public. This act in and of itself may mitigate some of the negative isolating consequences of stigmatization (Kerman et al., 2019).

For people experiencing homelessness, pets assist in a variety of other unique ways including increased motivation for positive behavioural change, accessing health treatments, and reduction in high risk activities (Kerman, et al., 2019). Research also suggests that by accepting pet care responsibilities, it can serve to forge a positive personal identifier and elevate one's hopefulness,



"she's the reason...I keep going...I made a commitment to take care of her when I adopted her... (Irvine, 2012). On a practical level, some animals also offer physical safety, as being unsheltered can expose persons to a variety of safety concerns. The concept of "animals as protector" was particularly true for adolescents experiencing homelessness (Lem M., Coe, J.B. Haley, D.B., Stone, E., & O-Grady, W., 2013).

### Redefining Pet Ownership

It is well known that persons who are underhoused often experience degrees of stigmatization and criticism from within the animal community and the general public. They may experience humiliation, ridicule and confrontation on their ability to provide quality care. It is not uncommon for members of the public to question their ability to care for their animal and even form finite judgements and labels such as being "undeserving" of animal companionship. Although some may query why someone with limited monetary resources would take on, or attempt to maintain the responsibility of a pet. It is at these junctions that we must reflect on of our own biases and beliefs about animal companionship and maintain a curiosity and willingness to be open and supportive of owners who have these experiences. People who experience homelessness come to be pet guardians in just as varied circumstances as those who are housed.

Irvine, Kahl & Smith (2012) found that redefining pet ownership encourages us to challenge any preconceived notions, and arbitrary considerations we may see as problematic. They encourage us to consider what qualities determine the best conditions for a pet and to look for what *is* provided, rather than whether or not they have a physical home.

Elements such as ensuring adequate food and water, consistent companionship and affection, and opportunities for exercise and enrichment are considered essential quality-of-life enhancing activities. It's possible to consider that owners with housing instability may meet some of these needs in even higher quantity, than housed pet owners.

As the definition of being without housing is vast, the quality of care the animal may receive is also variable and having a "home" is not necessarily correlated with best quality of care, "people think because you're homeless, you can't take care of a dog. Being homeless, that's not the point. ...even people that have houses abuse and mistreat and neglect their animals...it has nothing to with...whether you have a house. Certain people should not own animals...there are some people on the streets that are homeless...and... there's no way they can take care of a dog...but the same ...with people that got houses and jobs. You ain't got the time to spend with the animal...your dog is neglected ...that's mistreatment too" (Irvine, et al., 2012).

At Toronto Humane Society we challenge ourselves to consider biases regarding pet ownership. We embrace the virtue that being without housing does not necessarily equate to an inability to care for one's pet. We are encouraged to embrace the idea that although someone may be homeless, they may not be helpless.

### Shelters

Historically, emergency shelters that accommodate pets have existed in small numbers in Toronto; recently, municipal policy amendments have resulted in this number growing. While Toronto Humane Society welcomes these changes, we also recognize that shelters may be ill equipped or unable to provide support needed by individuals with pets. Shelter staff may feel uncertain about supporting animals and may have concerns related to capacity, logistics and ultimately, safety. Shelter resources may also be impacted with pressure to provide pet supplies,



food and even day-to-day care so owners can attend supportive appointments such as accessing a medical facility, viewing an apartment, or interviewing for employment.

Shelter policies may inadvertently present specific challenges for pet owners. Policies such as mandatory curfew or a requirement to leave the space during business hours may interfere with normative pet elimination, enrichment or routine. Living communally, in some circumstances means multiple people to a room, with limited space, in an environment of high stress, may also not offer adequate enrichment and may bring about behavioural considerations for the animal.

#### Provisionally Accommodated

For those who have secured temporary housing, there may be alternative reasons why they may be unable to care for their animal and require UC; possible circumstances may include a no-pet policy, a home with other animals present, or even residing temporarily with someone who has animal-specific allergies. We bear these diverse experiences in mind.

#### **Summary**

Despite the varied benefits of pet ownership, we recognize there may be inherent barriers and challenges, particularly in relation to resource-attainment, for persons experiencing housing instability; we see the UC program as addressing some of these needs.

As Irvine et al., (2012) found, persons who experience homelessness receive both praise and criticism for being a pet owner; at Toronto Humane Society we choose to praise community member efforts to prioritize their animal's wellness and are honoured they choose to entrust their pet into our care during times of need.



## Interpersonal Violence

As a key strategy, Toronto Humane Society prioritizes our goal “to improve and save lives.” As such, we acknowledge “the link” between interpersonal violence and animal abuse (National Link Coalition, 2013).

### What is Interpersonal Violence (IPV)?

The Government of Canada defines intimate partner violence as: “harm caused by an intimate partner” and provides further clarity:

*“An intimate partner is a person with whom someone has or had a close personal relationship.”*

Although sometimes referred to as “domestic violence, “an intimate partner can also “take place in other forms of relationships (violence toward children or older adults).” The harm is often a result of a person looking to gain or assert power or control and threaten safety and security. It can take many forms including: physical abuse, threats, sexual abuse or any forced sexual activity, emotional or psychosocial abuse, verbal abuse intended to control or frighten, words or actions to destroy self-esteem through feelings of shame, anxiety or hopelessness, financial abuse, neglect, control or misuse of one’s money, resources or property, including situations where a person has a responsibility to provide care or assistance to someone, but actively does not do so.” (Government of Canada, Royal Canadian Mounted Police, 2019).

### How Prevalent is IPV in Canada?

Statistics for IPV in Canada are challenging to determine due to the clandestine nature of violence in families. As such, we rely on data compiled by the federal justice system, with the appreciation that violence of this nature often goes unreported; therefore, the actual number of IPV incidents may be considered higher.

In 2016, over 93,000 Canadians reported to the police having been victims of IPV. Of these, 79% were women, with young females between 25-29 years old being most at risk.

Dating relationships comprised 55% of police-reported IPV cases, while spousal relationships (current or former married or common-law spouses) comprised 44% of police-reported IPV cases (Government of Canada, Department of Justice, 2019).

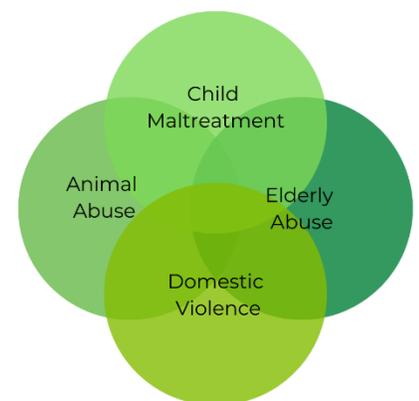
### Connecting IPV and Animal Welfare

Pets are a part of many households and are often treated as members of the family, however, Toronto Humane Society recognizes that they can also become targets of violence in households experiencing interpersonal violence.

#### The "Link"

According to the Animal Welfare Institute (2020), since the 14<sup>th</sup> century, the connection between animal abuse and interpersonal violence has been researched.

The National Link Coalition (2013) notes, *“When animals are abused, people are at risk. When people are abused, animals are at risk...”* Their Wellbeing is intertwined. There is *“growing understanding of the interrelationship between domestic violence, animal abuse, child abuse and elder abuse, often referred to as “the Link.”*



People who commit acts of serious animal abuse frequently have previous histories of, and future tendencies toward, violent crimes against humans. A Canadian police review of crime records found that “70% of people charged with cruelty to animals also had other reported incidents of violent behaviour, including homicide” (Boat & Knight, 2000).

In 2000, The Ontario Society for the Prevention of Cruelty to Animals, found that 42% of respondents who had experienced IPV indicated their partner had threatened their pet, while 44% had actually injured and/or killed their pet. A more recent survey showed that 73% reported their pets were threatened and/or mistreated (Ontario Association of Interval and Transition Houses “OAITH”, 2018).

Type of Violence Experienced

A Canadian study that interviewed survivors across Canadian domestic violence shelters found animal maltreatment is positively correlated with “significantly greater risk of *more frequent and more severe* forms of IPV” (Barrett, Fitzgerald, Stevenson & Cheung, 2017). Elevated levels of controlling behaviours were identified as well. For some of these cases, severe injuries and even death of pets were reported. As the level of violence increases ...“so too did the number of attempts to leave” (Barret et al, 2017).

Violence Committed Against Animals within the Context of IPV

Ascione, Weber & Wood (1997) found 71% of abused women reported their perpetrator had harmed, killed or threatened animals with over ¾ incidents occurring in the presence of the woman and/or her children as a method to coerce, control and humiliate.

Although animals may experience a variety of forms of cruelty, actual violence may not always be necessary. OAITH (2018) states, “in IPV, power and control are tactics that gain and sustain abuse.” Threats to animals and children may be equally effective where the animal becomes a pawn. Perpetrators may minimize and blame the woman for forcing them to hurt the animal. Some perpetrators may even “gift” the pet as an attempt to reconcile or as an act of apologizing, however ultimately, they may further serve as a method of control and manipulation.

The "Power of Control Wheel" of Animal and Domestic Abuse

**Isolation:** Refusing to allow her to take her pet to her vet. Prohibiting her from socializing her dog with other dogs.

**Threats:** To harm or kill her pet if she leaves or asserts any independence.

**Legal Abuse:** Custody battles over pets. Filing theft charges if she leave with the pet.

**Denying and Blaming:** Blaming her or the pet for his cruelty. Killing the pet and saying it doesn't matter because the pet was old.



**Emotional Abuse:** Disappearing, giving away, or killing pets to take her source of unconditional love. Forced participating in animal sexual abuse.

**Economic Abuse:** Refusing to allow her to spend money on pet food or vet care.

**Intimidation:** Harming or killing pet: " Next time it'll be you...". Targeting pets of the family/ friends who aid her escape.

**Using Children:** Harming/ killing children's pets to intimidate them. Blaming the "disappearance" of the family pet on her to create a wedge between her and her children.

Resource: [National Link Coalition](#)



### Delay Leaving

Many women are reluctant to leave their home and seek help if it means leaving their pet behind with the abuser. Multiple studies have reported abused women delay leaving an unsafe situation out of fear for the safety of their animals. Dr. Fitzgerald found that over 50% would have left sooner if they could have brought their pet with them (OAITH, 2018).

### Childhood and Pets

Approximately 70% of US households with children, also have pets (Melson, 2003). Pets offer unique opportunities for childhood development. They stimulate children's learning and can play a role in cognitive, social and emotionally development (Melson, 2003).

However, when animal abuse occurs in a home with children, there are negative correlations. Ascione et al (1997) found that 50% of the children interviewed indicated they had directly intervened in violent situations in their home in order to protect their pet, and potentially placing themselves in harm's way (Edelson, Mbilinyi, Beeman & Hagemeister, 2003).

A further "link" has been found between children who witness/experience domestic violence and future animal cruelty (Currie, 2006). Children who are victims of maltreatment are at increased risk of harming animals. As such, UC has the propensity to play a role in interrupting this link by supporting families who are leaving dangerous situations, we are also supporting children, and potentially reducing harm to animals in the future.

### SafePet

*SafePet* offers survivors the comfort of being able to seek support they need and deserve, while feeling confident their animal is out of harm's way and in a loving home, until the time comes to be reunited.

As previously mentioned, *SafePet* Ontario is a provincial-wide network, that coordinates temporary foster care for the pets of survivors fleeing domestic violence. Administered by the Ontario Veterinary Medical Association, the program offers veterinary care and long or short-term fostering options for the duration of a survivor's transition to safety. Once they're ready, *SafePet* reunites owners with their pets so they can move into a better future together (OVMA, 2019).

Since 2019, Toronto Humane Society has been honoured to partner with Link Coalition Toronto, a Toronto-based non-profit, to collaborate on their existing *SafePet* program. Toronto Humane Society provides veterinary care and foster homes, when necessary, for *SafePet* animals.



### How UC Expands on SafePet

Through this work, we have learned that many survivors may not access shelters when leaving violence and may not be connected to other professional organizations. By inviting owners to self-refer to UC, we hope to increase service access. We also welcome referrals from those who reside outside of our region, as we understand the possible necessity for cross-jurisdictional movement to ensure safety.

### **Summary**

Survivors of IPV are routinely known to conduct risk assessments to determine the safest time to seek help, and ultimately when to leave. Animals have been found as a motivating factor in making that decision but can also negatively impact help-seeking behaviours. UC support can be instrumental.



## Health Admissions

### What Health Admissions are Considered?

In March 2020, the Government of Ontario declared a State of Emergency in response to the global health pandemic, Coronavirus disease (COVID-19). In response, the UC program launch was expedited and targeted awareness raising efforts were activated to ensure high risk populations, and local first line responders, were aware of the UC program offering.

### History of Toronto Humane Society and Health Agencies

Over the years, Toronto Humane Society has partnered with several health promotion agencies and facilities and served to illuminate the gap in resources for this particular owner-base.

As such, prior to the pandemic, our program supported persons requiring hospitalization and/or treatment as a result of medical emergencies such as suffering a stroke, requiring surgery, and degradation due to chronic conditions such as cancer or HIV/AIDs. We provide foster care to persons receiving mental health support, entering rehabilitative facilities and are a part of substance support recovery programs. Our program further supports owners who receive medical treatment in their homes.

### Connecting Health and Animal Welfare

We recognize that marginalization, trauma and violence, and housing instability are root causes of poor mental and physical health, and as such, our owners may experience compounding experiences requiring UC.

A health diagnosis, degradation or set back, can be experienced as overwhelmingly stressful and traumatic. When accidents, emergencies, or progressive illnesses interrupts a person's ability to care for themselves and their pets, we are pleased to offer UC.

### Health Benefits and Animals

"The human animal bond as the relationship between people, animals, and their environment...When a positive bond has formed, not only do pets make us feel good but now there is scientific evidence that they are good for our physical health as well (Miller, 2009)

Sherpell (1991) found that for owners who have a strong attachment to their pet, ownership has been found to help ameliorate the effects of negative life events including grief, loss, bereavement and mental health impacts such as anxiety and depression. Animals can assist by providing opportunities for interactions, a sense of meaning, security and routine, a distraction from distressing symptoms and non-judgmental support.

There is also evidence of significant reduction in minor health problems during the first month following pet acquisition, impacts that were sustained in dog owners for at least ten months. It is proposed that an increase in physical exercise may contribute to this improvement. Further, there has been evidence of decrease in blood pressure and/or heart rate with a positive association between pet ownership and one-year survival in coronary outpatients (Friedmann, Katcher, Lynch, & Thomas, 1980).

As we grow older, animals have shown, through multiple studies, to lower blood pressure, assist in healing post-surgery, and ease loneliness in senior populations. Further, specific populations such



as veterans, children with developmental disabilities and persons with post-traumatic stress symptoms benefit from animals in unique ways.

Veterinary care can also act as a direct avenue to improve health and social service delivery for underserved populations; it has been demonstrated that knowledge of the adverse effects of second-hand smoke on animals was a strong motivator for smoking cessation (Milberger, Davis & Holm, 2009).

We encourage and welcome further research to explore these impacts.

### **Summary**

Although we believe that pet ownership has positive effects on human health and behaviour, an inability to care for oneself and one's pet can be devastating and even prevent a person from seeking the treatment they need; UC offers an alternative option.



## Trauma-Informed Care

### Trauma-Informed Care as Universal Engagement

Social services have been incorporating trauma-informed policies and practices into service delivery over the past number of years. By embracing these same principles into animal welfare, our hope is to offer service that owners experience as supportive and compassionate in order to bring the best possible outcomes for their animals.

#### What is Trauma?

According to Substance Abuse and Mental Health Services Administration (SAMHSA), “trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual’s functioning and physical, social, emotional, or spiritual well-being” (Substance Abuse and Mental Health Services Administration, 2014).

Trauma is both an incident, or series of incidents, and a response to that experience.

Trauma-related symptoms generally occur when an individual's ability and resources to cope, at that time, are overwhelmed. The meaning of violence and trauma can vary, based on previous life experiences, culture and personal resources and is highly subjective. Two persons can endure the same experience and interpret, react to, and be affected differently, as such not all exposed to violence or trauma will exhibit traumatic stress symptoms.

Traumatic experiences include events that are naturally occurring or human-made; they are often unexpected and leave a survivor with feelings of fear, vulnerability and helplessness. They may include having experienced the event themselves, or even hearing about the event. Examples may include interpersonal violence, grief, natural disasters, violence against a community, or trauma passed generationally, to name a few. People who experience marginalization often experience multiple forms of oppression, which may be interpreted and experienced as single or cumulative trauma. (SAMHSA, 2014).

Most forms of violence have components of interpersonal violence (violence between two or more people), intrapersonal influences (vulnerabilities within e.g. mental health concerns), and structural violence. (SAMHSA, 2014). Structural violence or trauma is embedded in social, political, and economic policies (e.g.. the inability to secure safe housing or employment due to unachievable rental/economic markets) and are generally invisible to those unaffected as they become routine in everyday life; however they profoundly impact the person.

#### Key Factors of Trauma

Fallot and Harris (2006) point to key factors:

- Trauma is common. US community-based surveys found that between 55% and 90% of respondents experienced at least one traumatic event in their lives; on average individuals report nearly five over their life course.
  - Pet owners may be at increased risk to have experienced a previous trauma and may be in active crisis while engaging with the UC program.
- Trauma can have multiple long-term impacts. An experience of trauma can impact not only one's immediate life circumstances, but can have ripple effects into areas that may seem less obvious including:
  - Physical health: physical health concerns, neurobiological adaptations



- Emotional health: difficulty managing moods and emotions
- Intellectual health: concentration difficulties
- Social health: difficulty trusting, confused sense of boundaries, hypersensitivity; hypervigilance, people pleasing or abusive/defensive behaviors
- Spiritual health: overwhelming sense of loss and grief
- In supporting our pet owners, we may bear witness to, and/or be the recipient of, their trauma symptoms.
- Marginalized communities are at increased risk of victimization.
- Trauma affects the way people approach potentially helpful relationships as trauma may have occurred within the service context. Services may also inadvertently trigger trauma responses.
  - As an animal welfare service, we may not be the owners' first engagement with service agencies, and as such, we may represent power and control and may be the recipients of past negative experiences with "helpers." Survival and self-protective strategies may interrupt or interfere with an owner's ability to accept our help. Owners may present with multiple concerns and be suspicious of the UC program, particularly related to the care their animal will receive and concern the animal may not be returned.

### **What is a Trauma-Informed (TI) Philosophy or Trauma-Informed Care (TIC)?**

TIC is defined as "an approach to engaging people with histories of trauma that recognize the presence of trauma symptoms and acknowledges the role trauma has played in their lives" (SAMHSA, 2014).

### **Key Principles that Guide TIC**

**Realize** the prevalence of trauma in the lives of our community. Any organization that offers services to people will encounter trauma and trauma symptoms. We must increase awareness of the prevalence and impact of trauma in the lives of our community.

By recognizing that an abused/neglected dog may be a window into the lives of an abused/traumatized owner, we are uniquely positioned to bear witness to the reality of how trauma impacts not only animals but also their caregivers.

**Recognize** the signs, symptoms and role trauma plays in the lives of pet guardians, staff and others involved. By raising our consciousness of its prevalence, we may recognize the signs not only in owners but in our colleagues as well.

**Respond** by integrating knowledge about trauma into policies, procedures and practices. As an agency, a department, and individuals, we must consider assessing practices and policies which may inadvertently create inequity and requires us to reduce possible experiences of retriggering, re-traumatizing, and ultimately, disempowering owners. By taking a "walk" through service provision through the eyes of a service user and soliciting owners' input, we stand to increase equity and reduce re-traumatization.

TIC does not require any specific training to employ, rather it emphasizes the basic principle of safety, trustworthiness, choice, collaboration and empowerment. As such, being TI is not applicable to only service users, rather it is a foundational way of simply being human with each other. Being trauma-informed *does not* require, nor ask us to *assume* everyone requesting our services has experienced trauma, rather it presumes the *possibility*.



**Resist** retraumatizing those involved and employ a strength-based approach. Crisis and traumas are inherently disconnecting and often isolating. Further, an inherent power dynamic exists between owners seeking services and UC staff. By dismantling the concept of "us" (animal care experts) vs "them" (people in need of our service), and instead working collaboratively, we can equalize the power dynamic and stand "with." It is crucial to recognize that in the context of UC, we are entering into partnership with owners; both parties have expertise, value and share a common goal of optimal wellness and safety for the animal. Creating an alliance with our owners is key and serves as a foundation for authentic and safe relationship development. Within this context, we can offer the most relevant information on animal health and care practices which will ultimately bring the best outcomes for the pet.

When distilled, employing trauma informed principles encourages us to work, recognize, and build on a culture of strength. We acknowledge that persons may have difficulties in one area of life but have effectively negotiated other areas. With any crisis, there exists the possibility for growth and our involvement as animal care experts to our owners' has the propensity to play a significant role. By assuming owners are doing the best they can with the resources they have, we emphasize and build on their competencies. We work to identify and highlight areas of strengths in owners as they are always present. It is looking for the "green lights" rather than the "red flags" (Crisis and Trauma Resource Institute, 2019). Simply by accessing UC, owners have exercised remarkable problem-solving strategies in the face of active crisis.

### **Connecting TIC and Animal Welfare**

In animal welfare care our primary goal is safety and a commitment to "do no harm". These tenets are also true for working through a trauma informed lens. Just as we recognize and prioritize the importance of Personal Protective Equipment and WSIB, for example, we see TIC as furthering our ability to support health, safety and wellbeing. By embracing TIC as a universal precautionary approach, we offer these principles to all service users as

TIC aligns with commonly used "Fear Free" (FF) training practices (Fear Free LLC, 2020).

TIC is a complementary support and serves to benefit *everyone* including our animals, volunteers, owners, foster parents, donors, and each other. TIC does no harm to those who have not experienced a trauma but is profoundly beneficial to those who have.

We see incorporation of TIC principles in animal welfare services as both a responsive and a responsible way of supporting our community's vulnerable animals and owners.

#### *UC Applicants May be Experiencing Active Crisis*

Owners who have experiences with trauma walk through our doors every day; by embracing TIC knowledge and foundation principles, we can provide *even better* care.

It is human nature to problem solve during times of stress, by the time someone is accessing UC it is probable that they have exhausted any other viable options for animal care and are in the midst of a crisis. It may be that when they are applying for our service, they might require the assistance within a few days, the same day, or within the hour.

Therefore, it is incumbent upon us to responsively embrace and bring to life TIC principles. When our owners feel safe to access support, their animals will benefit.



### If Owners Do Not Access Services, Animals may Remain in Unsafe Situations

Marginalized communities, trauma survivors and those who experience homelessness face a high degree of stigmatization, where they are treated with judgement, without empathy and ultimately without respect. As a result, they may be suspicious or avoidant of service use. Service avoidance could result in an owner remaining in an unsafe environment or declining greatly needed services. These impacts could subsequently result in their pet continuing to endure violence, neglect, and a lack of care. Therefore, it is incumbent upon us to ensure that the environment we create is safe and respectful, so owners feel comfortable and willing to engage with us.



## Strategies To Support Owners Accessing Urgent Care

When people experience overwhelming stress, we may observe a variety of expressions and engagements. TI philosophy reminds us that trauma can leave us in a perpetuate state of hypervigilance and/or disconnect, and owner behaviours may be responses to internalize feelings of being under threat, helpless, or out of control. As such, we recommend the following communication techniques, engagement strategies and offer unique scenarios to consider.

### Communication Strategies

Traumatic stress reactions can dramatically impact the assumptions a survivor carries about themselves, others and the world; this lens subsequently may impact how they engage and interact with us. When owners are under stress, our processes and communication may appear to be confusing.

When we are angry or under extreme stress, research suggests that we only hear approximately 25% of what is being said and retain even less information at 10%. As such, it is possible that miscommunication and misunderstanding may occur (NAVC, April 2014).

Biologically, animals and humans respond similarly when experiencing fear or threat. “Fear Free” training (2020) and TIC describe similar automatic behavioural responses such as:

- fight—aggressive
- flight—avoidance of stressor/fleeing/running away
- fret/fidget--pacing, shifting, shaking
- freeze—stiff, catatonic.

Both practices encourage us to recognize these responses are predictable consequences of having experienced threatening events. They are adaptive based on the events that occurred; they are normal reactions to what may be an abnormal situation.

“Fear Free” teaches us that employing “fear free communication” with owners is essential (2020).

### Core Skills for Effective Communication

- Be mindful of nonverbal body language such as: our body position, use of nodding, eye contact, open body posture, displaying authentic emotion and ensuring our verbal communication is in line with our nonverbal.
- Use open-ended questions: these questions encourage owners to elaborate on a topic. It also encourages gathering of information and details. By creating the opportunity for explanation, owners will not be influenced by anything we say, or don't say, and can feel freer to share. Beginning questions/sentences with, “Tell me...” “Describe...” “What...” or “How...” can help to guide open-ended questions.
- Use reflective listening: employing this skill will assist in better listening and demonstrates to owners that you are truly interested in what they say. By repeating back to the owner what you understood and rephrasing ensures accuracy. It is important to be mindful of one's implied messaging, as well.
- Employ empathy and understanding: this requires us to try to consider what the situation may feel like and how it may be experienced by the owner. It is a “considerate approach”. It can be reflective and/or expressive in validating an owners’ concerns (Fear Free, 2020). It shows an appreciation for their experience and expertise. Some examples of these statements are; “I can see that this may be very difficult decision..”, “I can imagine that must be very frustrating”, “It



seems this may be distressing”, “Let’s work together and see if we can come up with a plan” and “It sounds like you have done an excellent job of looking after Fluffy.”

### Recommendations Regarding Language

- Communicate thoughtfully and clearly; ensure any information you are offering is accurate and up-to-date
- Adjust tone and volume of speech. Recognize our words and tone can be encouraging or disenfranchising. Aim for a soothing, quiet demeanor.
- Be mindful of word choice and use simple, concise language.
- Animal and veterinary verbiage may be commonplace for staff, but it can be unsettling, worrisome and confusing for owners. When possible, use words and explanations that someone without specific and extensive animal care education can understand. Remember that owners may feel intimidated to ask questions if they don't understand.
- Use language that reflects the whole person or animal, not just apparent issues, concerns, problems or symptoms e.g.: “someone who has experienced trauma/homeless/housing instability” instead of “homeless person” or “cat with diabetes” instead of “diabetic cat.”

### Engagement Strategies

By employing and applying TIC principles, we can offer high-quality service delivery that will be experienced as accessible and equitable. A non-judgmental approach is foundational. By creating a safe and trusting space and relationship that offers choice and collaboration, by looking for strengths and building owner capacity to care for their animals with increased skills, we can predict the best outcome for our owners and their pets. (Van Roode & Strosher, 2019).

### General Recommendations

- Be empathetic. Empathy is the awareness of the feelings and emotions of other people. Strive to be non-blaming and non-shaming. “Fear Free” (2020) training encourages staff to consider how you may feel if your friend or family member was in a circumstance similar to the ones faced by pet owners.
- Be consistent and predictable as much as possible. Follow through cannot be underestimated.
- Continually build on ways to connect positively with owners within the context and confines of a professional relationship; be mindful of not developing dual-relationships.
- Maximize choices and control. By applying to UC, we acknowledge that something has occurred outside of the owner’s control that requires temporary care for their pets. By offering transparency and encouraging owner's decision making, we are enhancing their sense of control. This will facilitate a dignified experience for the owner and will serve to create authentic bonds so that we may be seen as a source of assistance and help.
- Work to become aware of your own hidden biases and expectations. Recall education on trauma and how it can manifest. Look for signs of shared humanity. Acknowledge and appreciate the strength it takes to ask for help and honour this choice.
- Strive to practice cultural humility. This involves an acknowledgement of cultural experiences, including reflecting on how our own background influences how we engage with owners. Understanding the impact and influence of culture is imperative.
- Recognize that everyone plays a role in creating a TIC culture. It is a team effort to create a space that is experienced as safe and warm. We all have a role in developing relationships based on mutual respect.
- Be patient. Applicants may only have short periods of time to speak about the program. It may require several contacts before they are prepared to set an appointment. This is most likely a result of environmental factors, rather than lack of interest.



- Be prepared to repeat information. Owners may not recall who they are calling or what the program is. They may have been in transition for some time and may have accessed a variety of services.
- Be mindful of your own emotional state, your emotional responses and your expression and body language. Be conscious and intentional. Check in with yourself, take a few deep breathes. When we speak, visuals (such as tone, body language and our environment) matter the most (55% of an interaction), followed by how we say what we say (such as tone, use of sarcasm; 38%), whereas what we say matters the least (7%). Our internal dialogue and our external presentation must be congruent. (North American Veterinary Community, 2014).

### Recommendations Before an Appointment

Owners may be arriving in an elevated emotional space due to their current life circumstances as well as any possible anxiety about leaving their animal in the care of Toronto Humane Society.

Although we recognize this may not always be possible, due to imminent needs, when able we offer owners the opportunity to review our UC program parameters and related paperwork before their arrival for intake.

- Schedule more time than you believe you may need.
- It is imperative that owners have the time they need to ease into the process. Although it may appear clear and transparent to us, it is imperative staff recognize this is an entirely new endeavor for owners and they are entrusting their family members into our care, for potentially up to a year.
- Be mindful of the wait space.
- Ensure a welcoming physical space. Elicit any accessibility needs in advance of their arrival.
- Keep the space calm and quiet.
  - Unnecessary noise can be distracting, disruptive and can exacerbate experiences of stress for both animals and owners. Step away from the intake area or waiting room for unrelated discussions and reduce the amount of traffic that is required in the area.
  - Keep the environment clean and without odour.
- Be clear about what owners can expect for the appointment and provide an accurate expected length of wait. If there is a delay, explain the reason why.
- Offer information on the closest washroom.
- Have a local resource guide available with information on local social service agencies, community centres, food banks, shelters, etc.

### Recommendations During Appointments

- Offer a confidential and private space for pet owners with appropriate lighting, a place to sit and an assigned staff.
- Approach in a matter of fact, yet supportive manner. This helps to create an atmosphere of trust, respect, and competency.
- Respect personal space. Try not to stand or sit neither too far nor too close. Cultural and ethnic factors vary regarding appropriate physical distancing; trauma experience can also create personal sensitivities. Adjust your position based on owner's body language.
- If owners become distressed, offer a washroom break or a drink of water. Offer the option to postpone the appointment, take a break or leave if they would like.

### Recommendations Regarding Information Gathering

- Provide clear information about the UC program and processes.



- Ensure informed and voluntary consent is achieved, while ensuring they genuinely understand what is being said.
- Elicit only the information necessary; no need to probe deeply. If an owner offers context to their circumstance, be mindful of your ability to hold this information. Be mindful of how you can redirect any unnecessary disclosure. You may say something like, "Your life experiences are very important. At this point, we should start with what's going on currently related to your animal's health and needs."
- Explain the purpose of any questions asked. Be mindful owners may feel sensitive to even benign questioned or information-seeking.
- Ensure owners are given information about their rights. Let them know they have a right to refuse to answer any questions.
- Ask permission to share information on animal care and wellness advice, if relevant.
- Request preference for method of ongoing contact and confirm safety of leaving voicemails.
- When we cannot, or can no longer, provide services, be transparent. Where possible, provide alternative resources. Partnerships are critical.
- Be aware of any legal implications of information you collect or gather. It is essential to know provincial or jurisdictional laws related to disclosures of child abuse, suicidality, or animal cruelty (even in the context the owner does not want the information reported). Always consult with a supervisor.

#### Recommendations Regarding Paperwork

- Be well organized and prepared.
- Solicit the owner's preferred method of completing paperwork and offer the option of e-signature, prior to intake appointment (when possible). Recognize this may not be possible due to limited access to a printer, internet, literacy or safety concerns.
- At the appointment, ask whether they would like time to themselves to review the paperwork, or if they would prefer to verbally review it together. Do not assume literacy.
- Request a few moments to re-review information together. At minimum, review critical program parameters: program length, confirm contact details, program termination options and process.
- Offer a personalized UC program review document that they can take away with them that clearly states program parameters and what they can expect: frequency and method of contact, contact information, foster period start and end dates.

#### **Challenging Scenarios**

At times, owners may display or express difficulty or distress with our processes. They may have difficulty waiting for their appointment, arrive late, reschedule last minute (sometimes several times), or not be present at all. We may see communication exhibiting aggression, defensiveness or reactivity. We may experience owners with challenges with concentration, memory, or those who may appear to be uninterested or even fall asleep. Owners may provide misinformation consciously or otherwise, out of fear their animal may not be accepted.

It is common that we may find ourselves becoming frustrated with some, or all, of these behaviours. This is fair and valid. We are often working in a high energy, high stress environment with competing demands and pressures, however it is our challenge to be mindful that there are genuine reasons for the owner's behaviours. At these times, it may help to slow down and consider that external factors may be influencing what the owner is presenting. It may be, for example, that they were unable to leave for the appointment at the time they expected, due to mental health challenges, unexpected delays, violence or perhaps perceived fear of being judged



for their circumstances or their animals' care. Recognizing that we have limited information about the life challenges that an UC client may be experiencing before they arrive at Toronto Humane Society. Employing a compassionate response may assist in alleviating personal feelings of frustration.

### Reluctance to Disclose

It may be that owners are reluctant or uncomfortable to answer questions due to mistrust and uncertainty. Most have valid reasons to omit or withhold information. Owners may view shelter workers as authority and may withhold information for fear it will put themselves or their pet in jeopardy. They may fear that the information could be used against them, their animal will not be returned, or they will be blamed for their life circumstances. Previous history of being told mistruths could impact their ability to answer questions. It is possible that internalized feelings of shame or guilt may also be the reason for any hesitancy. On this note, it is always helpful to explain to owners why we are asking the questions we do. Some questions may not appear to owners as being relevant, so providing an explanation may garner more information. Providing an explanation will create transparency, ensuring we are only asking information we require, and empower owners to make informed decisions whether, and how, they choose to respond.

Weigh the usefulness and pertinence of the information required, with the emotional impact the owner may experience by responding.

The concept of asking non-assuming questions is critical so that owners don't feel inclined or pressured to answer a question with ambiguity or lack of transparency. As an example, rather than asking "What is the name of your vet clinic?" it may be more helpful to inquire, "Has your animal ever seen a vet?" And if they answer yes, "When was the most recent time you can recall?"

### Maintaining Program Scope

As a helping organization, it is imperative that we offer services that best fit our expertise. Employing TIC principles does not mean that we are providing trauma-specific services. Although owners may choose to share some of their current or past life difficulties, it is recommended to listen attentively, and gently guide the conversation back to the present moment and the animal's needs, which we have expertise to support.

As owners may have needs that fall outside of the spectrum of animal care, we continually work to establish, maintain and sustain partnerships with local social service agencies. They are able to support our owners in creating safe sustainable environments and homes for the animal to return.

We are happy to disseminate information and resources with community supports and have handout materials available.

### Animal Welfare Concerns

Although we don't often see animals through the UC program who have suffered neglect or cruelty, we acknowledge this may be possible. Concerns may emerge at admission, return appointment or throughout the foster period.

### Animal's Health and/or Behaviours

It is not uncommon that animals presenting to UC face a diverse range of health and behavioural concerns. Owners may disclose these concerns upon arrival, or it may be that these symptoms are



identified once the animal is in program. Common health and associated behavioural concerns frequently noticed include symptoms of fear, stress or anxiety (FAS) and may manifest in disordered eating or inappropriate elimination practices. Common health conditions may include weight issues, skin irritations or dental concerns.

If the pet owner has been experiencing stress, so too may the pet. As such, it is essential that animals are viewed within the context in which they have arrived and are granted time for observation prior to drawing conclusions.

### Returning to Precarious Housing and/or a Potentially Violent Circumstance

Leaving unsafe circumstances is often a process, rather than a single event. It may take a variety of steps and a number of leave-return cycles before a person is able to make a final departure. Although staff may find this cycle distressing, our position is that owners make the safest and most responsible decisions for themselves, at that time. In our role, we can provide information (if the owner is willing to receive it) about the dangers and impact violence/instability can have on an animal, strategies for how to keep the animal as safe as is possible and must always reinforce that UC is available if/when necessary.

### Reporting Animal Cruelty

It is our expert understanding that animals experience neglect due to a lack of access to resources. As such, having transparent conversations regarding the animals' care is vital. Equally important is determining whether the problem can be rectified by services. By providing information on Toronto Humane Society programs, we may be able to support owners in addressing any concerns.

If there are cruelty concerns, contact your local enforcement office.

### Arriving Late/No Shows to Appts

As standard practice, we schedule one-hour appointments for all UC admission and return to owner appointments, rather than traditional half hour appointments. Not only does this leave additional time should owners have difficulties arriving to the appointment but also alleviates unnecessary pressure and stress on shelter and clinic staff and ensures we do not rush owners through the process.

## **Strategies for Dealing with Conflict**

People who endure trauma and violence may react in ways we don't anticipate, such as appearing to be rude, hostile or aggressive (Varcoe, van Roode & Wilson, 2019). It may be that we encounter owners displaying difficult or challenging emotions or behaviours.

At times, we may find ourselves in conflict with owners. Please see appendix for communication flow.

The North American Veterinary Community (October, 2014) offers three primary strategies for dealing with client conflict.

### 1. The "3-C Approach" to avoid conflict:

- Competence: be educated and trained, informed, and prepared
- Communication: listen and be clear



- Compassion: everyone wants to feel you care, they may be angry with a problem or a misunderstanding but if they feel you are genuine, they are less likely to be angry with YOU

## 2. The “5-A Approach” to diffuse active conflict:

- Acknowledge there is an issue.
- Apologize. Although it may not be your fault, apologize they are having this difficulty. We may find that we resolve the issue, but many times will not apologize it occurred in the first place. Be mindful not to over-apologize or apologize for things that we cannot take responsibility for.
- Affirm. Validate that you can understand why they may be feeling the way they do; perhaps, we would feel the same in a similar situation.
- Answer. Ask the person to problem solve, “What can I do for you?”
- Act. Do something about the problem.

## 3. Recommendations if Someone is Angry:

- **Stay or create calm:** When we feel threatened, we may want to respond or “fight” back. Instead, try the opposite. Take a moment, take a breath and try to relax your body. It may not be necessary to respond immediately. Slow your speaking pace, and engage using a softer, gentler tone. People will often match our energy and emotion. Self-awareness is vital to deescalate a crisis as it allows us to remain in charge and in control. We recognize that owners may have difficulty leaving their pets in our care; in order to build confidence and comfort and to reduce any unnecessary stress on the animal, we make it a practice to respond calmly and methodically.
- **It’s not personal:** Remind yourself that although it feels very personal, the anger most likely has more to do with something that occurred outside of Toronto Humane Society. Aggression in animals is generally due to feeling vulnerable, threatened and experiencing FAS; the same can be true for people. It may be possible to invite the owner to the present moment as their anger may be misplaced, “Help me understand what happened here and why you’re elevated right now.” Allow yourself to practice professional detachment.
- **What “set off” the anger:** If possible, determine what caused the elevated emotion. Allow the person to vent, within reason. Often elevated emotions occur when someone’s values have been insulted. (E.g.: if they are kept waiting, they may feel ignored, unimportant, even disrespected. Feeling respected may be important to them and by not being prioritized we may have triggered previous emotions of being made to feel undervalued.) By being able to express their concern, this may resolve the emotion.
- **Offer to help:** Instill belief that you genuinely want to help, confidence that you can help or can at least provide someone who can (a supervisor or manager). “I really want to help get this solved”
- **Be kind:** It is harder to stay angry and upset, if someone is trying their best. “Most people are kind and most people are kinder, when you’re kind.” (Fear Free LLC, 2020).
- **Be safe:** If the above strategies do not work, or the person is becoming increasingly elevated or unsafe, seek help. This may be from a co-worker, a supervisor, or by alerting security.

Sometimes removing oneself and having a co-worker step in can resolve the issue. Other times, intervention from emergency services may be required.



## Strategies for Safety

- Safety awareness cannot be understated.
- Make sure your colleagues know where you are, where you're going and approximately how long you'll be gone, through each shift.
- Where possible, be mindful of the exit. If you can, do not have the owner between you and the exit.
- Consider having a safety word/phrase that will alert your colleagues of an elevated safety risk.
- Consider ensuring onsite security are aware of appointment times so they can casually be present/available, if necessary.
- If someone seems agitated, consider holding the appointment in an open space or leave the door open. Ask a colleague to be present. Safety always takes precedence over confidentiality.
- Fear Free (2020) training encourages taking a sideway physical approach with animals experiencing FAS; offering not more than 2 quadrants of one's body to a person in an agitated state may be applicable.
- Just as we would monitor overall body posture of an anxious animal, we too observe body language of the individual.
- If the client is being verbally abusive or using aggressive language, gently remind them they are in a place of business and certain language or behaviour will not be tolerated.
- If the client has become unsafe, determine if it is your responsibility to clear the space of animals and other people. It may be necessary to remove the person from other patrons, or to request they move, depending on the situation. Recall the concept of "emotional contagion", the process of animals shifting their own emotional state based on receiving the emotions of other animals. This rings true for owners as well (Fear Free LLC, 2020).
- If the person continues to escalate, it may be necessary to ask them to leave, potentially inviting them to return at a different time.
- If required, call, or have someone else call the police.



## How To Operate Urgent Care

### UC Department/Team Structure

Toronto Humane Society's UC program has 2 full time staff and 1 part time staff who are responsible for maintaining contact with owners. We also have additional foster department staff that may assist with regular communication with foster parents and any necessary follow up animal appointments during the foster period.

We find that having a small UC team bolsters confidence for owners, builds rapport, relationship and trust, as well as reduces any unnecessary information sharing regarding the "Urgent Care" file.

### Request for Service

Individual owners or community workers can apply through the [UC Owners Toronto Humane Society](#). Owners can also phone our call centre or walk directly into Toronto Humane Society.

As part of our exploration in program development, we discussed whether to require a professional referral. Ultimately in appreciating the varying dynamics, we found it best for our program to welcome program requests via any method. In recognizing the dynamics of becoming instability housed, ill or experiencing violence, we found a referral to be an unnecessary barrier to service.

### Suitability

We review the following screening questions to assess program fit:

- Do you have any friends or family who are able to care for your animal? We are mindful of prompting all applicants as to whether they have considered alternative placements (eg: if financially capable, a private boarding kennel, friends, family), as UC is considered a "last resort" option.
- Do you have the means to pay for boarding through a private facility? Given the stress of life circumstances, we recognize that owners may not have considered alternative placement options. We find it appropriate to explore all possible options available, however it is not necessary to overly burden an applicant. UC staff are encouraged to employ sound judgement skills, to determine whether it will be helpful or harmful to explore further.
- What makes this request urgent?
- When would you be able to have your animal returned to your care fulltime?

### Request Received

[Please see flow chart in Appendix 1:](#) Urgent Care Forms.

UC staff review the application and contact the owner or the community worker, as indicated on the request form, within 48 hours.

We review information submitted and make further inquiries for any behavioural and medical information (spay/neuter, vaccination record, access to previous veterinary care, medical conditions-treated or otherwise). If we deem it to be of benefit, we may invite our training team to connect to discuss any questions or concerns. We have found this can be helpful in ensuring we are accepting animals that we can, in good faith, place in foster homes. The owner's transparency coupled with Toronto Humane Society trainers' expertise has proven to be fundamental in



ensuring that we do not decline animals which can be accepted with appropriate support and care in place. Further, tips about feeding and behavioural patterns, help us to ensure the animal is settling as quickly and as comfortably as possible, upon acceptance.

### Species Accepted into UC

Consideration will be required for any animals that cannot be accepted into our program due to jurisdictional restrictions/bylaws (eg: endangered species, livestock, unsafe/aggressive animals with bite history).

At Toronto Humane Society we welcome dogs, cats and select domesticated special species, including but not limited to; turtles, birds, rabbits, and rodents).

### Length of Placement

Animals are offered fostering for a minimum of 2 weeks, up to 1 year (365 days). Our average length of placement is three to four months.

### Decision-Making

Each referral is discussed as a team; the involvement of foster placement staff is instrumental in assessing current foster parent capacity and resources.

- If declined: We offer alternative options.
- If accepted: We coordinate owner drop-off and foster pickup.

## **Acceptance into UC**

### Admission & Discharge to Foster

Upon accepting an animal into UC, we schedule an admission appointment time and date with the owner and coordinate discharge details with the foster parent. When possible and pending no anticipated or discovered significant medical or behavioural concerns, we minimize the length of time the animal is exposed to the shelter to alleviate any unnecessary environment-related stress. This also ensures greater onsite shelter capacity.

At the time of drop-off, owners complete mandatory program paperwork. Completion and understanding of this paperwork is explicitly explained prior to admission to UC. The animal receives a medical exam, and any health concerns are reviewed.

### Authorized Agent

In order to ensure our veterinary team can make swift medical decisions during the foster period, we require owners to approve either Toronto Humane Society or a community agency as the “authorized agent”.

## **During the Foster Period**

### Contact with Owner

Although we do not require owners to remain in contact during the foster period, we have found that most owners regularly engage and/or respond positively to our updates and photo sharing. We remind owners to inform us if/when they change their contact information to ensure seamless communication.



### Follow Up

UC team members check in with both owner and foster parent within the initial 24-48-hour period. The foster department requests bimonthly updates from foster parents which are forwarded with photos to the owner.

### **Termination**

We encourage owners to keep us updated as they move closer to being reunited. Owners are reminded that we require 72 hours' notice prior to setting return date/time. Foster parents tend to grow close to their foster animals and we find that providing information in advance encourages the best planning possible.

Termination of UC agreement can occur for three main reasons:

1. Maximum length of foster care period is reached (365 days)
  - Toronto Humane Society makes arrangements with the owner for pickup
  - If the owner is unable to resume ownership due to ongoing life circumstances, Toronto Humane Society will support alternative option exploration, including possible voluntary surrender. In exceptional cases, we may be able to offer an extended foster period.
  - If Toronto Humane Society is unable to contact the owner, Toronto Humane Society assumes ownership (as laid out in agreement documentation) and makes determination as to the best next step to support the animal.
2. Owner requests the animal's return
  - Owners make a request for a return, and the pick-up date is scheduled within 72 hours.
3. Toronto Humane Society requests the animal is returned
  - If we determine there are behavioural or safety concerns we cannot support, Toronto Humane Society will contact the owner and make arrangements for pickup.

### **Special Considerations**

Depending on the reason for UC, we have observed unique considerations to offer optimal care.

### **Housing Instability**

A common challenge in supporting an UC request of this nature relates to possible communication breakdown. People experiencing housing instability may be forced to relocate between shelters or residences, and they may have limited access to the internet or Wi-Fi. Having multiple methods of communication, and a second source of contact, may serve to be helpful.

### **IPV**

In supporting individuals and families fleeing violence, it is imperative that safety risks are considered. Once it has been identified that interpersonal violence is/has been present, we recommend that UC staff gently inquire about safety concerns. These questions will assist in uncovering critical information to ensure the owner, the animal, the foster parent and Toronto Humane Society staff are not at any elevated risk. Informing the owner of the intention for the questions may alleviate concern or any possible blame they may take on. Questions that may be considered:

- Do you have concern at this time for the safety and wellbeing of your animal?
- Are your animals in danger?
- What are your family member's attitudes toward the pet?



- We sometimes hear that when an owner is leaving an unsafe environment, the animal has been threatened or injured in the home. Has something like this ever happened to your pet? (If yes, gently and compassionately explore the severity)
- Has your pet ever exhibited any behavioural concerns? How have you managed these? Do you have any suggestions for the foster parent?
- Are there areas/neighbourhoods we should avoid placing your pet?
- Do you anticipate anyone may inquire about, or seek out, the animal at Toronto Humane Society?
- Do you know if your pet is microchipped? If so, to whom?
- Do you have any reason to believe the perpetrator is aware the animal is receiving care from Toronto Humane Society?
- Would you like to provide a description of anyone you feel is dangerous to you or your pet?

It is critical that any staff engaging in these discussions are up-to-date on jurisdictional mandatory reporting laws and inform owners of any such limits to confidentiality and conditions in which we report animal cruelty.

### Health Related Referrals

Challenges related to this particular UC request, relate primarily to the nature of medical emergencies. It is common to receive requests for placement after an accident or emergency has transpired and the owner has been, or is on route, to hospital. It is not uncommon that the referring worker is a paramedic, police officer or emergency room worker meeting the owner for the first time with limited information about the person, pet or length of expected hospitalization. The owner may experience health complications that prevent them from being able to communicate directly with Toronto Humane Society or even with hospital care providers. It is common in these scenarios for the animal to require transport support from the owner's home to Toronto Humane Society.

A further challenge relates to the precariousness and fluctuation of health needs. As owner's health needs change, they may be transferred to different care units or different facilities. In these cases, we have found it instrumental to maintain one primary point of contact at the hospital who is willing to facilitate communication between Toronto Humane Society and owner.

Regarding situations of capacity (such as owner being unconscious or deemed unable to consent due to mental health concerns), programs must determine whether they are legally permitted to provide service without the owners' explicit consent.

### Surrender/Unclaimed Animals

Although this number is low, the surrender of UC animals may occur. It is our position that families and owners will make the best decisions for themselves; reunification is a desirable outcome, as can be a surrender. Where helpful, we support owners to identify a new and suitable home or support accessing our compassionate surrender program. Each situation is assessed on a case-by-case basis.

It is imperative to affirm the difficulty that may occur in coming to a surrender decision.

There is also potential for animals to remain unclaimed at the end of the foster period. As such, it is essential that a written agreement outlines conditions and is reviewed prior to all animals entering into UC. Transparency is imperative.



### **Drop Off/Pick up Transportation**

Agencies should consider transport options prior to initiating UC programming. Some owners may be unable, or ill-equipped, to organize animal transport.

We encourage agencies to become familiar with jurisdictional bylaws and provincial laws related to entering owners' homes. Where necessary, support from community partners, or coordination with local police and/or city-provided animal services may be required.

### **Owner Confidentiality**

All Toronto Humane Society staff, volunteers and foster parents sign a confidentiality form that describes, in detail, staff/volunteer responsibility to protect privileged owner information.

When UC animals are onsite Toronto Humane Society, they are placed in a private area of the shelter, away from the general public.

All UC animals' electronic files are saved under their authorized agents' name. All hardcopies of paperwork signed by the owner is stored separately and in a secure file, accessible to UC staff only.

E-files also contain an automated pop-up alert informing staff that the animal is a member of the UC program reminding them to restrict sharing any information with the public.

### **Proof of Pet Ownership & Animal Medical Records**

Due to the nature of UC, we appreciate owners may not have proof of ownership or historical veterinary records accessible.

In situations where ownership is unclear, we encourage discussion with legal advisors regarding policy development.

Absence of veterinary records is not a barrier to UC, rather, we do our best to acquire as much medical and behavioural history as possible from the owner. The medical exam at intake often offers key health information. In the case of accepting senior animals or animals with complex medical concerns, we encourage agencies to engage in quality of life and wellness-related discussions with owners prior to acceptance.

Intact animals are accepted into UC. We employ owners to make the best decision for them and their pet, and with permission we offer wellness information on the benefits of spay/neuter, in addition to offering the procedure free of charge. We also inform the owner of any placement barriers related to remaining intact.

### **Training Foster Parents**

Our foster parents' safety is of paramount importance to us. As such, our application and training process is thorough. Foster parents are required to submit an application, attend an orientation session and complete species-specific training modules, to ensure they are confident and competent to provide safe and quality care. All foster parents are also required to sign confidentiality agreements prior to having an animal placed in their care.

In addition, there are special considerations for foster parents who take on the care of UC animals. As we recognize and respect the importance of confidentiality, Toronto Humane Society foster



parents are provided with essential animal-related information only and at times where appropriate. They may also be informed of specific geographic areas to avoid with the animal. They are not offered any information related to the owner's circumstances or personal details, nor is the foster parents' personal information shared with owners.

We restrict any direct contact between foster parents and owners, and manage this by prohibiting owner visits during the foster period and ensuring there are gaps in appointment times between onsite appointments. All animal communications and updates are managed by Toronto Humane Society foster department staff. Foster parents are coached to be mindful of any photo content they send that may include identifiable information, including photos of the UC animal with other resident animals or family members. We also require foster parents to refrain from posting any photos of the UC animal on social media as noted on our foster parent agreement contract.

## Commonly Expressed Concerns

### 1. Will UC be used for free boarding rather than pet safety?

We have faith that community members will see the value in the program and an innate desire to ensure the resources available are reserved for those who need it the very most. The concern for an animal's well-being always takes priority.

### 2. What happens if animals are abandoned?

We appreciate that for reasons unplanned, owners may decide they are unable to resume ownership. In the unfortunate scenario where owners are unreachable at the end of the UC program (365 days), or unable to have their animal returned to their care, Toronto Humane Society will assume guardianship and determine the next best step.

### 3. What if owners return to unsafe circumstances with their animals?

We recognize that owners do the very best they can. We also acknowledge that it can take several attempts to leave unsafe situations. Although our hope is that we will be able to intervene in a scenario where an animal may be at risk for danger, we will never refuse or decline an animal's return to their owner.

If we are aware an animal may be returning to a historically unsafe environment, we offer to provide information to the owner on ways they can keep their animal safe, or safer, and how-to safety plan for their pet in an emergency. If we have concerns about historical abuse or neglect, we are transparent that we are required by law to call the provincial animal welfare reporting hotline.

### 4. What if there is repetitive use of the program by the same owner?

We are prepared to offer repetitive foster placements to the same person/family. Our process involves gathering information to assess the current set of circumstances and risks to animals. Part of this conversation may include reflection on any previous foster placements and exploration on what we can do to ensure a more successful and permanent return. If appropriate, we may also provide information on our surrender program.

### 5. What if owners view UC as a way to secure free veterinary care?

Our program is designed to offer longer-term care. As such, we do not anticipate that owners would be willing to relinquish ownership for a longer duration than is necessary. We see our PVS as the avenue to offer wellness care at a subsidized cost.



## **6. What if a dangerous/abusive partner arrives to Toronto Humane Society demanding access to their animal?**

As we recognize this may be a possibility, we have worked diligently to ensure safety protocols are in place. Our onsite security guard patrols both inside and outside the building 7 days a week. Furthermore we have a relationship with local police to ensure we can access emergency support, as necessary.

We have embedded safety protocols into each step of our program, as has been previously referenced, and our staff are well trained in how to safely manage an aggressive animal and how to deescalate aggressive people.

Safety of our space, our animals, our owners, our foster parents, our volunteers and our staff are our priority. We will continue to incorporate additional safety measures if necessary.

## **7. What if owners request fostering for animals with difficult / unsafe / challenging / unsocialized behaviours?**

If we have potential concerns about an animal's behaviour, we will often schedule a call between the owner and our veterinary/training teams prior to making a decision about acceptance. Ideally, with their expertise and guidance, we can find a solution to bring the animal into foster. If we are not confident we can keep both the animal and the foster family safe, we may decline the UC request and offer support through our Pet Parent Support Network. The primary purpose of the Network is a structured approach to ensure that each pet and guardian gets the support, advice, and service they need – services and support to build, maintain, and strengthen the Human-Animal Bond. The Network can assist owners in securing support related to pet supplies/food, surrender and rehoming, boarding and associated facilities, pet sitting and dog walking services, community veterinary care and affordable options, as well as behaviour issues for all species.

## **Data Tracking**

In order to support program development and expansion, we maintain statistics on program utilization:

- number of UC inquiries
- number of UC applications
- number owners and animals accepted into UC
- duration of UC foster period provided to each animal
- outcome at the end of the placement (e.g.: reunited, surrender, euthanasia).

In addition, we track services provided to UC animals:

- number/percentage of vaccines updated
- number spay/neuters provided
- number of new diagnoses following intake exam
- number of specialty procedures/surgeries provided
- number training consultations/classes provided

## **Program Evaluation**

An essential element of UC relates to evaluation and program enhancement. We value the input of our service users and view their feedback as a fundamental component in making our program more equitable. At program completion, we seek owners' satisfaction and invite feedback. We are mindful of not making the request extensive.



Owners are asked to offer input on two key areas:

- What did you find helpful about the UC program?
- Do you have ideas on how we could improve the UC program?

If the owner is supported by a community agency with whom we have had ongoing contact, we also solicit their feedback. We then work to incorporate and implement said feedback.

## **Running and Funding UC**

Organizations will need to make individualized decisions as to how best to fund their program; possible options may include program specific fundraisers or dedicating a portion of existing operational costs.

In our experience, UC can be a financially costly program. Outside of animal related supply costs, UC animals often require veterinary care and training support. Furthermore upon receiving the application and throughout the program itself can be time consuming for staff. Allocating specialized personnel with designated salary funding is recommended.

It may also be necessary to consider program material costs, such as cost to create, publish and disseminate marketing brochures/activities.

Despite the costs, we continue to offer the program at no cost to service users. While this remains our recommendation, we appreciate other programs may choose to meet their community needs by offering low-cost boarding or requesting Pet owners pay for their animals' supplies during foster.

## **Advertising UC**

Each organization will need to consider individualized advertenting and marketing strategies specific to their community and suitable to their capacity. Maintaining a balance between need and capacity is of utmost importance.

Connecting with a range of local partners will be essential to ensure the target populations become aware of the program. Toronto Humane Society maintains an ever-growing and robust index of community partners. We actively outreach to local social service agencies including emergency rooms, long-term care facilities, hospitals/rehabilitation centres, mental health facilities, violence against women programs, shelters, drop-in facilities women's networks and helplines to ensure the UC program remains top of mind and program information is accurate and up to date.



## Caring For Self While Caring For Urgent Care Animals And Owners

When we care about animals and people, it can take a toll on our mental and physical health. We are often working in a high energy, high stress environment with competing demands and pressures, and as care providers we hold ourselves to high standards. The combination of these factors can be a recipe for the development of compassion fatigue (CF), or secondary trauma stress (STS) and burnout. Furthermore, staff engaging with the UC program may be at increased risk due to increased and prolonged exposure to owner's trauma, and crisis disclosures/symptoms.

### Compassion Fatigue and Burnout

SAMHSA (2014) provides extensive expertise on STS/CF. Critical to their perspective is the acceptance that these experiences can be a normal occupational hazard and an expected sign of effective caregiving, rather than a sign of personal failure or inadequacy.

Terms such as “compassion fatigue,” “vicarious traumatization,” “secondary traumatization” and “burnout” are used routinely, and sometimes interchangeably. However there remains a stark difference in the way they occur and the impact they can have on a person's professional and personal lives.

- **Compassion fatigue** “is best defined as a syndrome consisting of a combination of the symptoms of *secondary traumatic stress and professional burnout.*” SAMHSA (2014) It arises from prolonged exposure to stress and is often experienced as exhaustion.
- **Secondary traumatization/Compassion stress** is a natural response to *exposure to traumatic and distressing events related to being a care provider.* It can be expected and unavoidable in the healthcare field and is the result of profound desire to reduce suffering. It can evolve as a result of the relationship between your role and the patient/owner/animal and impacts areas of life outside of work.
- **Burnout** is a more general type of psychological distress related to the pressures of *working in high-stress environments* over time and can occur as a result of, or a contributing factor to, secondary traumatization. (SAMHSA, 2014). Burnout is the result of stress from one's interaction with the work environment.

By offering the UC program, organizations must accept that their staff will be asked to meet with people in crisis. The by-product of this exposure may be vicarious traumatization, or the experience of staff ingesting the trauma that pet owners are experiencing. By engaging long-term (potentially up to a year) with owners in varying stages of crisis and transition, staff may bear witness to and be on the receiving end of traumatic responses which can take an emotional toll. It is critical that organizations educate their staff on CF/STS, acknowledge the pervasiveness and commonality, and provide resources to support and address when staff experience.

### Possible Compassion Fatigue Signs

Unacknowledged compassion fatigue and burnout can have physical, cognitive, emotional and spiritual consequences on the individual, the wider team, owners and ultimately, on one's ability to provide the best care possible for animals.

Symptoms may include but are not limited to: psychological reactions (mood dysregulation, numbing or avoidance behaviours, impaired functioning, isolating), physical symptoms (impacts on sleep, hypervigilance, other somatic symptoms) and cognitive impacts (sense of helplessness



or feeling out of control, cynicism, need to exert control, negative impacts on relationships, avoidance behaviors and negative thinking or change in world perspectives) (SAMHSA, 2014).

## Strategies for Supporting Staff Wellness and CF/ST Prevention/Recovery

The key to prevention of compassion fatigue is to reduce risk and enhance protective factors. SAMHSA (2014) suggests both organizational and individual strategies to prevent negative impacts.

### Organizational Strategies to Prevent ST/CF Include:

- Normalize that compassion fatigue occurs throughout all levels of the organization as a way to help staff feel safe and understood.
- Implement workload policies and practices that maintain reasonable standards for direct-care hours and be mindful to distribute trauma exposure amongst staff.
- Increase opportunities for supportive professional relationships by promoting activities (e.g.: team meetings, staff retreats, trainings) that focuses on prioritizing authentic self-care. Supervisors can support staff in implementing self-care during the workday, such as scheduling breaks and time away from work. Supervisors are responsible for promoting, supporting, and modelling self-care while staff are responsible for developing and engaging in their care plans.
- Access to consistent, safe, and reliable supervision. Ideally, supervisors will promote both professional and personal development and provide a nonjudgmental space to discuss possible high-risk situations and possible symptoms without fear of reprisal. Supervisors can play a pivotal role in supporting staff to develop self-care and personal coping plans to enhance resilience.
- An agency culture that supports and prioritizes staff empowerment and autonomy. Encourage autonomy and opportunities to be engaged and empowered in policies that directly impact staff. Supervisors can support staff in exploring and identifying avenues and participation in organizational development.

### Individual Strategies to Prevent CF/STS Include:

- Peer support: Develop and maintain professional and personal support can reduce feelings of isolation and help alleviate emotional distress.
- Supervision and/or personal counselling: Willingness to engage in supervision and to access outside support, such as EAP, if/when required to manage distress that often accompanies working in an animal care setting.
- Training: Interest in professional training opportunities to increase competency.
- Maintaining balance: Develop and maintain healthy lifestyles including productive coping strategies that will decrease vulnerability to stress,
- Engaging in meaningful activities: Connection or engagement with a personal practice of spirituality and/or spiritual practices (such as meditation) can provide meaning, a sense of community and enhance resilience.

## Addressing Compassion Fatigue

When staff experience compassion fatigue, recovery must be supported by the organization. Supervisors can support supervisees in developing individual care plans and encourage reflection on the plans to address symptoms as they emerge (SAMHSA, 2014). Staff can also be encouraged to regularly self-administer the “Professional Quality of Life Scale” (ProQOL) tool to measure compassion fatigue and compassion satisfaction. By encouraging staff to access and administer



this tool, they may feel encouraged to self-reflect on their own innate resiliency, despite the reality that caregiving can lead to fatigue. (Please see appendix).

### Planning Care for Self

Supervision and professional culture should ensure staff appreciate that self-care is not only essential for satisfaction but in fact, is an ethical responsibility of caregiving; Green Cross Academy (2010) has established self-care guidelines that can be referred to in Appendix (see appendix).

A comprehensive plan should include activities that nourish the whole self. By looking to the "ABC's" of self-care, a comprehensive assessment can be completed that focuses on increasing awareness of current coping mechanisms and areas that may require more attention. Periodically reviewing the plan is imperative.

- **A:** Awareness of one's needs, limits, emotions and internal/external resources. Awareness involves intentional, non-judgmentally taking inventory of one's physical, psychological, emotional, and spiritual needs and ensuring these are prioritized.
- **B:** Balance of how we spend our time. This references to activities while at work, as well as striking a balance between work and other areas of life. Increase protected time for activities and events that offer a sense of mastery and satisfaction.
- **C:** Connection is key to combating CF as isolation is often a primary component. It is essential to feel connected and integrated to oneself, with others, and to something greater. Sharing reduces stress, reframes the context, increases sense of collaboration and often instills hope. (SAMSHA, 2014).

### Conclusion

It is an honour and pleasure to offer the UC program to the local community, and in turn, an honour to share this manual with those organizations who may be yearning to offer similar programming.

The development of our program has been an incredible adventure and one we stand behind fulsomely. We encourage our community partners to take the leap. There may be bumps, there may be challenges, but in the end the program is ultimately about community and there is no greater gift than building a humane society for all.

*"Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it's the only thing that ever has." - Margaret Mead*



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## Appendix 1: Urgent Care Forms

- [UC Program Agreement](#)
- [UC Authorized Agent Form](#)
- [UC Surgical Authorization Form](#)
- [UC Flow Chart](#)
- [Professional Quality of Life Scale \(ProQOL\)](#)
- [Green Cross Academy Selfcare Guidelines](#)

## Appendix 2: Green Cross Academy Selfcare Guidelines

### The Ethics of Self-Care

The Green Cross Academy of Traumatology (2010) has established selfcare guidelines.

The purpose of the guidelines is twofold:

- First, do no harm to yourself
- Second, attend to your physical, social, emotional and spiritual needs as a way of ensuring high-quality services to those who look to you for support

### Ethical Principles of Self-Care In Practice

These principles insist that it is unethical not to attend to selfcare as neglecting to do so can result in harm to those we hope to assist.

- "Respect for the dignity and worth of self: A violation lowers your integrity and trust.
- Responsibility of self-care: Ultimately, it is your responsibility to take care of yourself, and no situation or person can justify neglecting it.
- Self-care and duty to perform: There must be a recognition that the duty to perform as a helper cannot be fulfilled if there is not, at the same time, a duty to self-care."

### Standards Of Humane Practice of Self-Care

- Universal right to wellness: Everyone has a right to wellness associated with self-care.
- Physical rest and nourishment: Everyone deserve restful sleep and physical separation from work.
- Emotional rest and nourishment: Everyone deserve emotional and spiritual renewal at work and outside.
- Sustenance modulation: Everyone should be mindful of if/how they consume (e.g., food, drink, drugs, stimulation), in acknowledge of possible impact as a helper

### Standards For Expecting Appreciation and Compensation

- Seek, find, and remember appreciation from supervisors and clients: These will increase satisfaction to sustain commitment to helping.
- Make it known that you wish to be recognized for your service: Recognition increases the worker satisfaction that sustains them.
- Select one or more advocates: Colleagues who know you and are committed to supporting your efforts at self-care.

### A Commitment to Self-Care

- Make a formal, tangible commitment to practice self-care
- Set deadlines and goals related to specific self-care activities
- Develop effective strategies and commit to accessing and employing them

