Animals can have a profound effect on the health and wellbeing of the people who care for them so every nurse should consider this when compiling patients’ care plans.

The impact of animals on patient wellbeing

In this article...
- The role of animals in people’s lives
- The link between animal abuse and risk of abuse to humans
- How nurses can support patients in relation to their animals

Keywords: Patient/Animal/Pet/Companion/Wellbeing

1. This article has been double-blind peer reviewed

Over half of UK households include at least one animal; most are pets (companion animals) but some will be assistance or working animals and livestock (Reynolds, 2006). Nurses are likely to care for many people with strong emotional attachments to their animals, and can help to support these attachments. Examples of this include hospital staff enabling a dying patient to be visited by their horse (Oscar, 2015; BBC News, 2014). Regardless of their own views, nurses should do their best to understand what has meaning in patients’ lives, including their animals.

For most people, animals are helpful; those whose animals need exercise will mobilise better, generally be fitter and have a structure/routine to their day with more opportunities for social contact (Slatter et al, 2012). Animals can be vital companions who help their owners feel more secure, happy and relaxed, and reduce loneliness. Some can be vital to patients’ functioning, such as assistance or service animals; these usually support people with visual or auditory impairments but have started to support those with mental health problems, such as post-traumatic stress disorder.

Animals and risk
Animals can increase risks to owners. Some may delay or refuse treatment if they will be separated from their animals, while older people may postpone or avoid going into care if they cannot take their animals (Morley and Fook, 2005). Homeless people often have companion animals and refuse accommodation if they cannot keep them; similarly, women who have been abused can find it difficult to take safe accommodation as animals are not usually accepted (Krienert et al, 2012; Allen et al, 2006).

Owning several animals may not be an issue until circumstances change, often through illness or bereavement. This can trigger animal hoarding – the pathological keeping of companion animals in large numbers (Williams, 2014). Owners with financial difficulties may choose to feed their animals or pay veterinary bills rather than provide for themselves.

Bereavement
The impact of the loss of an animal is poorly recognised in the literature and by society. Studies examining bereavement in animal owners show their grief can be as intense as that for a human, often more so (Donohue, 2005). Animals can also provide a connection to someone who has died (Chur-Hansen, 2010) so the animal’s death can trigger renewed or unresolved grief.

Disenfranchised grief – when an owner is prevented from sharing grief with others – is common, especially when someone says: “It was only an animal” or “you can get another one” (Dunn et al, 2005). There are also no recognised formal rituals when ani-
mals die, which can impede bereavement. However, animals are not only lost in death; they can be stolen, taken by an ex-partner, go missing, be rehomed or given to an animal charity if their owner must go into care. This causes ambiguous grief as owners may never know what became of them – this can be a difficult type of grief to cope with (Faver and Strand, 2007).

It is often assumed older people are more likely to experience a significant grief reaction when an animal dies but this can apply to younger people. However, the death of a companion animal can cause older people to consider their own mortality and death, and the impact can be greater if their animal suffers or dies, from an illness they or a loved one also has (Margolies, 1999).

Safeguarding
Increasing evidence highlights a clear link between animal abuse and violence and the abuse of humans (Linsey, 2009). Nurses should therefore be aware of animal neglect, mistreatment or abuse in patients’ households as this may indicate the abuse of children and adults (Blewett, 2008).

In households that neglect animals, there is increased likelihood of zoonoses as it can occur in unsanitary environments, often with animal urine and faeces in living areas. Unsocialised, traumatised animals or those given insufficient space and exercise can become aggressive and may injure themselves, other animals and people.

Animal welfare law
The Animal Welfare Act (2006) clarifies how animals should be kept and cared for (Box 1), and can be used to inform risk assessments, alerts and referrals to other agencies. As with human safeguarding, animal welfare should be recognised by nurses, and acted on if there are concerns.

Ill treatment should be reported to the police (abuse is an offence under the Act) or relevant national society for the prevention of cruelty to animals. Animal welfare concerns should not be ignored in the hope or expectation that someone else will identify or act on them, especially as they are often linked to human safeguarding.

The role of nurses
Nurses gather holistic information about patients, and this should include attachments to animals. It is important to understand what animals mean to patients and make accurate nursing and risk assessments. Nurses visiting patients at home are more likely to identify issues as they will see how patients interact with their animals. If risks or potential problems are identified, nurses should refer to others including:

» Environmental health;
» Local authority safeguarding teams;
» Animal agencies such as the RSPCA and other voluntary agencies.

Nursing assessment should consider any potential risks that increase or decrease with animal ownership, including risks to the owner, carers, family and others visiting the home. Risk assessments should consider the nurse’s working environment, including whether animals are present.

Nurses supporting patients seeking help from animal organisations should ensure they are registered; Charity Choice’s website (www.charitychoice.co.uk) lists all UK registered charities. For example, The Cinnamon Trust (www.cinnamon.org.uk) helps older and terminally ill people to keep their animals through volunteer help at home, and fosters or rehomes animals whose owner has died or gone into residential care.

Veterinary staff can be a useful source of animal care information, support and signposting. Documenting in nursing notes the surgery where a patient’s animals are registered can be invaluable in emergencies or if there is a sudden change of circumstances.

Box 2 lists things to consider when caring for animal owners. Go the extra mile - as did the hospital staff who supported and enabled their patient to see her horses one last time to say goodbye.

Conclusion
Animals are an important part of many people’s lives so if nursing assessments and treatment plans are to be truly holistic, patients’ connections to, and relationships with, animals should be included in the care that nurses plan and deliver.

References
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Reynolds AJ (2015) Dying man’s horse brought to Wigan Hospital. BBC News; online. 7 November. Bit.ly/HorseFarewell

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BOX 1. THE ANIMAL WELFARE ACT (2006)

Section 9 states that an animal’s needs that should be met include:

- A suitable environment
- A suitable diet
- Being able to exhibit normal behaviour patterns
- Being housed with, or apart from, other animals
- Being protected from pain, suffering, injury and disease

BOX 2. CHECKLIST: THINGS TO CONSIDER

- Does the patient have an important attachment to an animal/animals? Check even if animal ownership is not obvious
- Does the patient/s increase or decrease risks?
- Are the animals adequately cared for? Is there an animal welfare concern? If so, who should you contact to report abuse?
- Is there an adult or child safeguarding concern? If so, who should you contact?
- What impact would the separation from the animal/s have on the patient?
- Has the patient made plans in case they can no longer care for their animal/s?
- How can the patient be supported to keep their animals, if appropriate?
- If they are unable to look after their animals, how can contact be maintained?
- Has the patient recently lost an animal. What was the impact? What support can you offer? What can you say to a patient who has lost, or may lose, their animal?