Canine behaviour problems: discussions between veterinarians and dog owners during annual booster consultations

A. L. Roshier, E. A. McBride

Context
Under the Animal Welfare Act 2006 (Section 9), owners are legally obliged to ensure their animal’s welfare. Welfare consists of three distinct, but overlapping domains: health and physiological functioning (body); affective state (mind); and social functioning, including normal development, behaviour and temperament (nature). To help owners fulfil their obligation, Codes of Practice advise seeking support from veterinarians and other relevant professionals. Although the veterinary profession acknowledges its responsibility to provide behavioural support, it has been criticised for focusing on the physiological aspects of welfare and overlooking the psychological. This study explored the welfare support provided by veterinarians through observing discussions during dogs’ annual booster vaccination consultations and questionnaires.

Main conclusion
All clients reported their dog performed one or more problematic behaviours. These were not fully explored during the consultation, if at all. It is unclear how pet owners access behaviour support. Where sources of support are not knowledgeable, both human and animal welfare can be seriously compromised. Veterinarians need to ensure clients are enabled to discuss behaviour issues and are provided with appropriate support, be that in-house or via referral.

Approach
A ‘fly-on-the-wall’ approach was used to investigate welfare discussions during dog annual booster vaccinations. Seventeen consultations were videoed in two UK small animal practices, involving six veterinarians, 17 owners and 17 dogs. Clients completed a questionnaire after the consultation. The purpose of the study was to capture a range of insights, rather than provide a representative view of the profession and its clientele.

Results
Consultations lasted on average nine minutes. Five main topics of discussion were identified: navigation (ie, directing the consultation, medical, husbandry, behaviour and cost). Veterinarians led discussion of all topics except behaviour, which was instigated approximately equally by veterinarian and client. All clients reported that their dog performed one or more behaviours that they considered to be problematic, totalling 58 behaviour concerns across the sample. Ten of these were discussed during consultations, although none was fully explored or managed beyond the consultation. Behaviour discussion varied between veterinarians; this may reflect their experience, confidence or clients’ requests. Owners accessed welfare information (eg, diet, vaccinations, breeding) from a variety of sources, not always from veterinarians. Information for issues relating to mental wellbeing, including suitability of purchasing the animal, training and behaviour problems, was as or more likely to be sought externally.

Interpretation
A lack of mentioning behaviour, and therefore detecting and addressing problems at an early stage, is regrettable and has welfare implications for animal and owner. Generally, the longer a behaviour problem exists, the more established it becomes and the more difficult it is to change. This is particularly so for those behaviours involving fear and/or aggression. Additionally, the owner’s bond with the animal is likely to be so damaged that relinquishment or even euthanasia is the favoured option. Several dogs required muzzling during the consultations. Not only did this restrict clinical examination, but this behaviour could have implications outside the consultation. When veterinarians notice behaviour in the clinic, but assume that it is isolated to that scenario, they miss the opportunity to explore its wider ramifications. However, not all issues will present in the clinic and these can go undetected unless the client is questioned.

All clients were satisfied with their consultation and did not have any unstated concerns. Perhaps concerns are discussed at another time, or there is a perceived timeliness to discuss the problem (eg, firework phobias); or clients may not recognise that support is available or may not be confident in the support offered by the veterinarian.

Care must be taken when extrapolating meaning from instigation data. Quantification by instigation is limited in that it is not clear how long discussions lasted, the questions or comments made, or the quality of the information provided.

Significance of findings
The data indicated that there was a paucity of assessment of behaviour concerns, even though these are potentially seriously detrimental to welfare. Assessment of an animal’s behaviour in various situations should be an integral aspect of veterinary examination.

Veterinarians must employ good questioning and listening skills and gain the client’s trust to aid disclosure of difficult to discuss topics. Veterinarians have an obligation to ensure that their knowledge base supports both the physiological and psychological aspects of animal welfare. This support can either be offered directly or indirectly by referral.

Further studies are needed to investigate why clients seek behavioural information, or why they choose not to; and what sources of support are utilised. Clients indicated they would source support from the veterinary practice, though not necessarily from the veterinarian. Other scenarios in the veterinary practice should be explored, including services provided by other staff, different consultation formats, and the support provided to other species. Understanding the needs of owners and animals enables the opportunities for the veterinary profession to support behaviour welfare to be optimised. When support is not accessed or provided, animal welfare, the human-animal bond and the dog’s impact on society can be compromised.
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