



Homelessness & Animal Companionship

Presented by Christine Kim,
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PhD, LISW-S

Presented to the Human-Animal
Interaction Section, American
Psychological Association
September 14, 2022

About My Dog Is My Home

My Dog Is My Home is a 501(c)(3) national nonprofit dedicated to **expanding access to shelter and housing for people experiencing homelessness and their companion animals**. By securing their ability to maintain their most important relationships and find adequate shelter, we ensure every family's right to build a home.

How We Work Towards Our Mission

We assist service providers like homeless shelters in expanding their programming to allow humans and their companion animals to remain together. My Dog Is My Home's programs currently fall into three categories: storytelling, community building, and technical assistance.

About Your Instructors



DORIT DOWLERGUERRERO, MPA
Board Secretary, My Dog Is My Home

Dorit and her husband Al are the Directors of Lilly's Place, Affordable and Workforce Housing. In addition to her community work with My Dog is My Home, she is a cofounder, board member and chair of Participant Services with SELAH Neighborhood Homeless Coalition and on the Board of the United Neighborhoods, Neighborhood Council in the Mid-City section of Los Angeles. Dorit has worked in social services for more than 30 years. Most of that time has been with organizations who assist unhoused individuals and families. Dorit has been very fortunate; she has never had to choose between a place to live and having her beloved animal companions. It is her life's goal to make sure that others have the same right to housing with their animal family members.



CHRISTINE KIM, MSW
Board Member, My Dog Is My Home

Christine Kim is the founder of My Dog Is My Home. She also served as the first director of the NYC Mayor's Office of Animal Welfare under Mayor Bill de Blasio, the first office of its kind in the country. Christine is the recipient of the ASPCA's 2021 Public Service Humane Award for effectively uniting the animal welfare community and city government to tackle animal welfare issues in public policy, especially during the COVID 19 pandemic. Christine received her Master of Social Work from University of Pennsylvania and currently lives in New York City.

About Your Instructors



JANET HOYGERLACH, LISWS, PhD

Professor, Social Work Program, The University of Toledo

I am a social worker, educator, and researcher seeking to improve the wellbeing of people and (non-human) animals through recognition and support of the human-animal bond (HAB) in health/mental health care and human services. Toward that end, I authored *Human-Animal Interaction: A Social Work Guide* along with my colleague Scott Wehman; this book was published by NASW Press in 2017. I present and train internationally on therapeutic animal roles and health and mental health benefits of human-animal interaction. I have served as an expert witness on Emotional Support Animals for the U.S. Department of Justice Civil Rights Division and recently completed a study detailing the benefits of ESAs that can be accessed for free here: ["Exploring Benefits of Emotional Support Animals \(ESAs\): A Longitudinal Pilot Study with Adults with Serious Mental Illness \(SMI\)"](#)

Objectives

By the end of the webinar, participants will be able to:

- Describe at least three themes of the nature of the bond between people experiencing homelessness and their animals.
- Name three ways the lack of pet-friendly homeless services can negatively impact people experiencing homelessness with their animals.
- Describe the role that clinicians play in ensuring homelessness for people with animals is as brief as possible.
- Name three policy and program changes that can lead to increased access to services for people experiencing homelessness with their animals.

Pre-Assessment Chat

What words come to mind to describe the qualities of the relationship between people experiencing homelessness and their companion animals?

What are the service gaps for people experiencing homelessness with animals?

How do you feel about writing emotional support animal letters?

Myra + Prince

What words come to mind to describe the qualities of the relationship between people experiencing homelessness and their companion animals?



MY DOG IS MY HOME

THE EXPERIENCE OF HUMAN-ANIMAL HOMELESSNESS

Qualities of the Bond

- Motivation and responsibility
- Protection and safety
- Mental health benefits
- Vulnerability to future problems
- Social support and connection
- Barriers to housing, employment, and services

Kerman, N., Gran-Ruaz, S., & Lem, M. (2019). Pet ownership and homelessness: a scoping review. *Journal of Social Distress and Homelessness*, 28(2), 106-114.

Brigitte + Nubeian

What are the
service gaps for
people
experiencing
homelessness
with animals?



MY DOG IS MY HOME

THE EXPERIENCE OF HUMAN-ANIMAL HOMELESSNESS

Spirit, Kyya + Miniaga

What are the
service gaps for
people
experiencing
homelessness
with animals?



MY DOG IS MY HOME

THE EXPERIENCE OF HUMAN-ANIMAL HOMELESSNESS

Scope & Gaps In Service

- Subpopulations more likely to be caring for animals: youth, single women (survivors of DV), and chronically homeless individuals.
- The number of people experiencing homelessness with animals in the US is unknown, but some efforts to quantify undertaken on a local level show a range of 5.5% - 23% across various geographic communities and sub-populations of homelessness (i.e. youth, survivors of domestic violence, etc.).
 - In Los Angeles, pet ownership was included in recent point-in-time count surveys, estimating about 12% of unsheltered homeless adults had an animal. Among people surveyed with animals, about half reported being turned away from shelter because of pet policies (Henwood et al., 2020).
 - In Knoxville, TN, researchers used Homeless Management Information System (HMIS) to quantify pet ownership and found that 5.5% of the homeless population reported animal caretaking at the time of the study (Cronley et al., 2009).
 - Researchers in Los Angeles examined animal companionship among 398 youth experiencing homelessness, of which 23% reported having a pet (Rhoades et al., 2015).
- Gaps in service in shelter, housing, medical services, substance use services, employment services, etc.

A Service Provider's Testimony

How can you work on yourself when it means abandoning the only family member you have left?

Former PTA mom falls into homelessness.

Sometimes when you put a loved one before yourself, you wind up benefiting as well.

Tom and Trixie



**Emotional Support
Animals (ESA) Need
Verification: The
Role of
Health/Mental
Health Care
Providers**

Main areas of concern across current professional guidelines:

- **Competence**
 - Knowledge
 - Skills
 - Ethics
- Professional ethics
- Legal obligations

Competence and ESA letters

Knowledge:

- Human-animal interaction (HAI) benefits and risks
- How HAI benefits can be therapeutic/helpful for health/mental health conditions
- Relevant laws and ethical responsibilities

Skills:

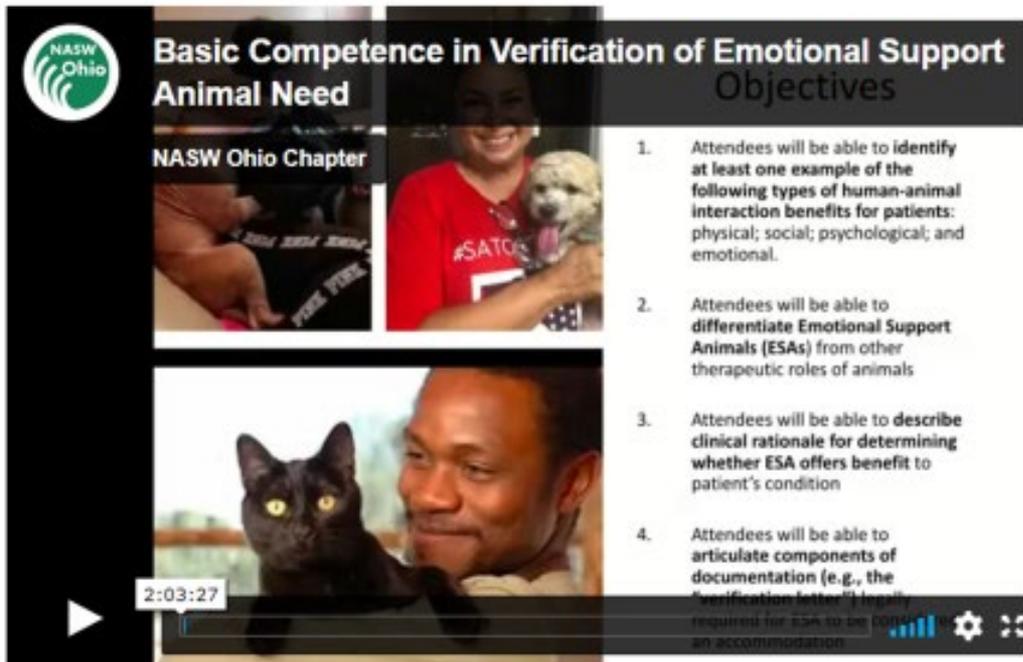
- Baseline professional competence in assessment and care provision of health/mental health conditions within scope of practice (this should be a given)
- Ability to cross-walk specific impairments/needs of client with HAI benefits provided/expected to be provided by an animal serving as ESA

Ethics:

- Professional ethics
- State, federal, local laws
- Responsibilities to client, community, animal

Free two-hour webinar

<https://www.naswoh.org/page/ESA>



NASW Ohio

Basic Competence in Verification of Emotional Support Animal Need

NASW Ohio Chapter

1. Attendees will be able to **identify at least one example of the following types of human-animal interaction benefits for patients:** physical; social; psychological; and emotional.

2. Attendees will be able to **differentiate Emotional Support Animals (ESAs)** from other therapeutic roles of animals

3. Attendees will be able to **describe clinical rationale for determining whether ESA offers benefit to patient's condition**

4. Attendees will be able to **articulate components of documentation (e.g., the "verification letter") legally required for ESA to be deemed an accommodation.**

2:03:27

Case Example

- Janell Doe is seeking access Shelter X with her mixed breed dog Cookie
- Janell is well-known to the shelter staff; they report that she has been in and out of psychiatric hospitals “for many years”, does not follow up with outpatient services and struggles with ongoing paranoia; she has been discharged from hospitals to Shelter X multiple times but has historically refused to stay at the shelter
- Janell has been living on the streets on and off for several years according to shelter staff, and about 9 months ago started approaching shelter staff asking for help for dog food; she reportedly informed staff that she had found a stray dog she was calling Cookie
- Janell and shelter staff have developed an increased rapport around Cookie’s needs, and Janell is for the first time willing to access Shelter X and consider using support services
- Shelter X permits only service animals and ESAs (ESA letter is required)



**“Natural” HAI
Benefits:
a Biopsychosocial
Framework**

4 types of “natural” HAI benefits

- Biological/physical
- Psychological
- Social – direct and indirect
- *Emotional

Stress-mediation effect

- **Human experiences of stress and anxiety encompass many physical symptoms** such as heart palpitations, shortness of breath, and release of cortisol.
- **Physical act of stroking and holding an animal can have *immediate* mitigating effects** on such physical symptoms related to stress and anxiety, contributing to the subjective sense of feeling good when holding an animal
- **Oxytocin** thought to be the key



SINCE 1828

GAMES & QUIZZES

THESAURUS

WORD OF THE DAY

FEATURES

SHOP

therapeutic

Dictionary

Thesaurus

Definition of *therapeutic*

- 1** : of or relating to the treatment of disease or disorders by remedial agents or methods : CURATIVE, MEDICINAL

// *therapeutic* diets

// They confirmed the *therapeutic* effect of supplemental light in treating winter depression with phototherapy.

— Richard Wurtman and Judith Wurtman

// A just-right amount is the *therapeutic* dose, just enough to provide the intended effect without problems.

— Paul G. Donohue

- 2** : having a beneficial effect on the body or mind

// Warm lotion manicures ... are a luxurious, *therapeutic* treat ...

— *Elle*

// ... they painted, hoed, swept, and planted when the mood for *therapeutic* work struck them, and lolled on the beach when they felt like it.

— David Guterson

- 3** : producing a useful or favorable result or effect

// In classical economics, before the illusion of fine-tuning became widespread, recessions were regarded as *therapeutic*.

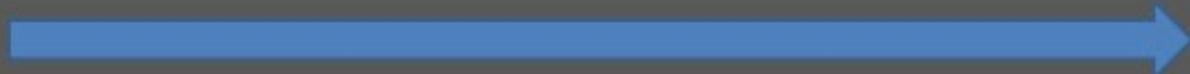
— Geoffrey Smith and Jane Sasseen

How can animals be “therapeutic”?

- The “natural” biopsychosocial benefits of HAI
- “Task training” – animal is taught to do specific things (tasks) to help



Therapeutic roles of animals (Least to most training)



Pets and Emotional Support Animals



Therapy Animals



Service Animals



Emotional Support Animal (ESA)

- A companion animal (pet) who is deemed by a licensed healthcare professional, *in writing*, to be necessary for a person to *reduce distress/impairment related to disability*
- Helps person through “natural” biopsychosocial benefits of human-animal interaction
- Not trained to do things that assist/compensate for *specific* disability impairments
- Has limited legal status with some legal protections



Where does the term “ESA” come from?

Three federal laws related to anti-discrimination protections for people, *including people with disabilities*:

- **Fair Housing Act (FHA)**
- Section 504 of the Rehabilitation Act
- Air Carrier Access Act*

*ESAs are no longer recognized as accommodations for air travel

Fair Housing Act of 1968

- **Prohibits discrimination** in the sale, rental, and financing of dwellings and other housing-related activities
- Includes numerous protected classes, including people with disabilities



FHA and ESAs

- FHA states animals who “provide emotional support that alleviates one or more identified effects of a person’s disability” are not pets, but rather, a sub-type of assistance animals commonly referred to as ESAs
- An individual with a disability (as defined by FHA) may request an ESA as a reasonable housing accommodation to afford the equal opportunity to use and enjoy a dwelling



FHA protections for people with ESAs

ESAs are considered a disability accommodation, *not* a pet, therefore:

- People with ESAs cannot be prohibited from living in “no-pet” housing
- People with ESAs cannot be charged pet deposit
- People with ESAs cannot be charged pet fees



Assessing a Person's Request to Have an Animal as a Reasonable Accommodation Under the Fair Housing Act
<https://www.hud.gov/sites/dfiles/PA/documents/HUDAsstAnimalNC1-28-2020.pdf>

real estate-related services.

⁴ 42 U.S.C. § 3604(f)(3)(B); 24 C.F.R. § 100.204. Unless otherwise specified, all citations refer to those authorities effective as of the date of the publication of this guidance.

⁵ For purposes of this guidance, the term "housing" refers to all housing covered by the Fair Housing Act, including apartments, condominiums, cooperatives, single family homes, nursing homes, assisted living facilities, group homes, domestic violence shelters, emergency shelters, homeless shelters, dormitories, and other types of housing covered by the FHA.

⁶ See 24 C.F.R. § 5.303(a).

⁷ Under the FHA, a disability is a physical or mental impairment that substantially limits one or more major life activities. See 24 C.F.R. § 100.201.

⁸ See Joint Statement of the Department of Housing and Urban Development and the Department of Justice, Reasonable Accommodations Under the Fair Housing Act ("Joint Statement"), Q and A 11

3-Part ESA Definition from FHA

1. **A companion animal (pet)** who is deemed by a licensed healthcare professional, *in writing*, to be needed for a person *due to the therapeutic impact of animal on the person's health/mental health condition*
2. The person's physical or mental health condition must meet the definition of "disability" *under the U.S. Fair Housing Act (FHA)*
3. The animal must alleviate or be expected to alleviate distress or impairment *related to the FHA-qualifying condition*

HUD guidelines for determining disability under FHA (p. 10)

<https://www.hud.gov/sites/dfiles/PA/documents/HUDAsstAnimalNC1-28-2020.pdf>

Disability Determination

Note that under DOJ's regulations implementing the ADA Amendments Act of 2008, which HUD considers instructive when determining whether a person has a disability under the FHA, some types of impairments will, in virtually all cases, be found to impose a substantial limitation on a major life activity resulting in a determination of a disability.³³ Examples include deafness, blindness, intellectual disabilities, partially or completely missing limbs or mobility impairments requiring the use of a wheelchair, autism, cancer, cerebral palsy, diabetes, epilepsy, muscular dystrophy, multiple sclerosis, Human Immunodeficiency Virus (HIV) infection, major depressive disorder, bipolar disorder, post-traumatic stress disorder, traumatic brain injury, obsessive compulsive disorder, and schizophrenia.³⁴ This does not mean that other conditions are not disabilities. It simply means that in virtually all cases these conditions will be covered as disabilities. While housing providers will be unable to observe or identify some of these impairments, individuals with disabilities sometimes voluntarily provide more details about their disability than the housing provider actually needs to make decisions on accommodation requests. When this information is provided, housing providers should consider it.

Information About Disability May Include . . .

- A determination of disability from a federal, state, or local government agency.
- Receipt of disability benefits or services (Social Security Disability Income (SSDI)), Medicare or Supplemental Security Income (SSI) for a person under age 65, veterans' disability benefits, services from a vocational rehabilitation agency, or disability benefits or services from another federal, state, or local agency.
- Eligibility for housing assistance or a housing voucher received because of disability.
- Information confirming disability from a health care professional – *e.g.*, physician, optometrist, psychiatrist, psychologist, physician's assistant, nurse practitioner, or nurse.

Note that a determination that an individual does not qualify as having a disability for purposes of a benefit or other program does not necessarily mean the individual does not have a disability for purposes of the FHA, Section 504, or the ADA.³²

Information Confirming Disability-Related Need for an Assistance Animal. . .

- Reasonably supporting information often consists of information from a licensed health care professional – *e.g.*, physician, optometrist, psychiatrist, psychologist, physician's assistant, nurse practitioner, or nurse – general to the condition but specific as to the individual with a disability and the assistance or therapeutic emotional support provided by the animal.
- A relationship or connection between the disability and the need for the assistance animal must be provided. This is particularly the case where the disability is non-observable, and/or the animal provides therapeutic emotional support.
- For non-observable disabilities and animals that provide therapeutic emotional support, a housing provider may ask for information that is consistent with that identified in the Guidance on Documenting an Individual's Need for Assistance Animals in Housing (*see Questions 6 and 7) in order to conduct an individualized assessment of whether it must provide the accommodation under the Fair Housing Act. The lack of such documentation in many cases may be reasonable grounds for denying a requested accommodation.

When providing this information, health care professionals should use personal knowledge of their patient/client – i.e., the knowledge used to diagnose, advise, counsel, treat, or provide health care or other disability-related services to their patient/client. Information relating to an individual's disability and health conditions must be kept confidential and cannot be shared with other

⁴⁹ See Joint Statement of the Department of Housing and Urban Development and the Department of Justice, Reasonable Accommodations Under the Fair Housing Act (“Joint Statement”), Q and A’s 13, 16-18 (May 17, 2004), at <https://www.hud.gov/sites/documents/hud DOJstatement.pdf>.

⁵⁰ This guidance does not expand on the obligations under the FHA or HUD’s regulations and should be construed consistently with Executive Order 13891 of October 9, 2019 entitled “Promoting the Rule of Law Through Improved Agency Guidance Documents,” Executive Order 13892 of October 9, 2019 entitled “Promoting the Rule of Law Through Transparency and Fairness in Civil Administrative Enforcement and Adjudication,” the Department of Justice Memorandum of January 25, 2018 entitled “Limiting Use of Agency Guidance Documents in Affirmative Civil Enforcement Cases,” and the Department of Justice Memorandum of November 16, 2017 entitled “Prohibition on Improper Guidance Documents.”

persons unless the information is needed for evaluating whether to grant or deny a reasonable accommodation request or unless disclosure is required by law.⁵¹

As a best practice, documentation contemplated in certain circumstances by the Assistance Animals Guidance is recommended to include the following general information:

- The patient’s name,
- Whether the health care professional has a professional relationship with that patient/client involving the provision of health care or disability-related services, and
- The type of animal(s) for which the reasonable accommodation is sought (i.e., dog, cat, bird, rabbit, hamster, gerbil, other rodent, fish, turtle, other specified type of domesticated animal, or other specified unique animal).⁵²

Disability-related information. A disability for purposes of fair housing laws exists when a person has a physical or mental impairment that substantially limits one or more major life activities.⁵³ Addiction caused by current, illegal use of a controlled substance does not qualify as a disability.⁵⁴ As a best practice, it is recommended that individuals seeking reasonable accommodations for support animals ask health care professionals to provide information related to the following:

- Whether the patient has a physical or mental impairment,
- Whether the patient’s impairment(s) substantially limit at least one major life activity or major bodily function, and
- Whether the patient needs the animal(s) (because it does work, provides assistance, or performs at least one task that benefits the patient because of his or her disability, or because it provides therapeutic emotional support to alleviate a symptom or effect of the disability of the patient/client, and not merely as a pet).

Under the FHA, the answers to BOTH of these questions MUST be affirmative to qualify for ESA:

1. Does the person have a health or mental health condition that meets the definition of disability under the Fair Housing Act (FHA)?
2. Will having an ESA alleviate/be expected to alleviate impairment related to the person's FHA qualifying condition?

Clinical rationale (“nexus”) for ESA need verification

- Consider the client’s symptoms/impairment from their mental health condition (present functioning, history)
- Consider the physical, social, psychological, and emotional benefits of HAI (and/or the benefits currently reported by client related to interaction with the animal)
- Ask client directly and consider client’s self-report
- Crosswalk client symptoms/impairment to empirically supported biopsychosocial HAI benefits

Examples of cross-walking

– Anxiety symptoms:

- **Physical symptoms of anxiety** → **alleviated through cuddling or petting an animal**; the physical contact triggers physiological processes in a person that reduce heart rate, blood pressure, and breathing ("**stress mediation**").
- **Subjective feelings of fear** → animal provides **emotional comfort** source

– Depression symptoms:

- **Amotivation** → the animal as **motivating and activating**; e.g., the animal needs care.
- **Isolated/lonely** → the animal alleviates **feelings of isolation** and loneliness

Example

(Letterhead with facility name/address)

Date

To whom it may concern:

Jane Doe is my client, and I am **knowledgeable** of her **mental health condition and treatment needs**. Her condition meets the definition of disability under the Fair Housing Act.

Ms. Doe needs an Emotional Support Animal (ESA) to help alleviate impairment related to her FHA-qualifying disability.

Sincerely,

Janet Hoy-Gerlach

Janet Hoy-Gerlach, LISW-S, PhD

License number (not required but often included)

Common fallacies

True or False: Disability must be “determined” in a separate formal disability evaluation as is done for entitlement-related disability benefit eligibility.

- **False:** Entitlement policies (think Workers Comp and Social Security income) use different definition thresholds for “disability”; ESAs are recognized under the FHA which is an anti-discrimination law (a much *lower* threshold to meet “disability”)
- HUD indicates certain mental health disorders automatically meet *the FHA definition of disability* in “virtually all cases”: Major Depression, Bipolar Disorder, PTSD, Obsessive Compulsive Disorder, Schizophrenia
- In contrast, virtually all cases of people with such diagnoses *do not* automatically meet Workers Comp or Social Security criteria for disability.

Common fallacies

- **True or False:** It is a conflict of interest for a clinician to provide written verification of ESA need for a client they are working with in ongoing treatment/services.

- **False:** Clinicians who are working with a person on an ongoing basis are knowledgeable of that person's mental health condition, treatment, and needs; it is this clinical knowledge that is useful for verifying ESA need.

“When providing this information, health care professionals should use personal knowledge of their patient/client – i.e., *the knowledge used to diagnose, advise, counsel, treat, or provide health care or other disability-related services to their patient/client.*”

Cross-profession ESA guidelines

Burning issues

- Should we (clinicians) provide letters to people we don't have ongoing clinical relationships with?
- Should we have a role in evaluating animals (ESAs/potential ESAs)?

Elephant in the room

- Our current guidelines exclude those who are most vulnerable due to their health/mental health conditions - and arguably have the most need for ESAs as an accommodation - from accessing ESA need verification letters
- How do we fix this?

Cross-profession ESA guidelines (cont.)

Current ESA letter guidelines across professions:

- **Assume person has access to healthcare** and healthcare providers
- **Assume person's symptoms do not pose a barrier** to accessing ongoing healthcare
- **Require ongoing clinical relationship**

Legally*, there is no requirement for the following to **reliably verify** need of an ESA as an accommodation:

- A completed diagnostic assessment
- An ongoing clinical relationship

(these are professional/clinical constructs, not legal requirements)

Back to the case example

- Janell Doe is seeking access Shelter X with her mixed breed dog Cookie
- Janell is well-known to the shelter staff; they report that she has been in and out of psychiatric hospitals “for many years”, does not follow up with outpatient services and struggles with ongoing paranoia; she has been discharged from hospitals to Shelter X multiple times but has historically refused to stay at the shelter
- Janell has been living on the streets on and off for several years according to shelter staff, and about 9 months ago started approaching shelter staff asking for help for dog food; she reportedly informed staff that she had found a stray dog she was calling Cookie
- Janell and shelter staff have developed an increased rapport around Cookie’s needs, and Janell is for the first time willing to access Shelter X and consider using support services
- Shelter X permits only service animals and ESAs (ESA letter is required)

Cross-profession solutions?

Inter-professional work group on ESA need verification for vulnerable populations?

- **Identify fundamental ethical parameters** – consent, confidentiality, scope of practice, competence
- **Reduce barriers** – consider actual legal *requirements* vs. “best practice” professional clinical *recommendations* for verification of ESA need; streamline process for individuals seeking to access emergency shelters
- **Example** – “on-call accommodation assessments for emergency shelters team”
 - bare minimum components that satisfy both legal and professional requirements for ESA status???
 - Use history from shelter staff and other key informants;
 - Curtail assessment to what is necessary to have clinical rationale for a “mental health condition” and crosswalk of impairment/symptoms to HAI benefits for particular person and their animal

Other ideas????

From a Landlord's Point of View

Housing is the start of the journey.

Now we must **KEEP** them housed.

Policy & Program Changes

- Los Angeles County Strategy to End Homelessness
- Los Angeles County Pet-Friendly Housing Ordinance
- California State's Pet Assistance & Support Program
- New York City, Local Law 96 and Local Law 97
- Pets Belong with Families Act
- Ending Exorbitant Pet Fees In Public Housing
- **Federal PUPP Act**

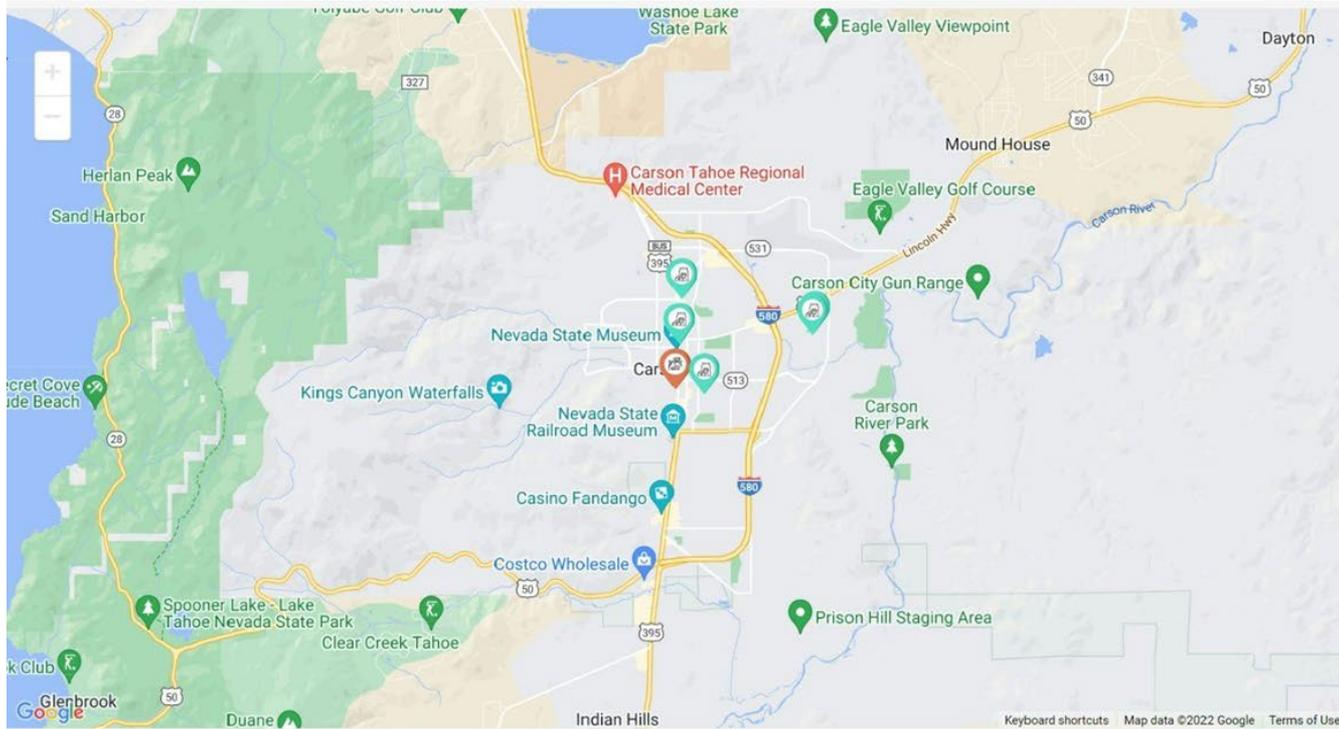
Post-Assessment Chat

What words come to mind to describe the qualities of the relationship between people experiencing homelessness and their companion animals?

What are the service gaps for people experiencing homelessness with animals?

How do you feel about writing emotional support animal letters?

Resources



The map displays Carson City, Nevada, and its surrounding areas. Key landmarks include the Carson Tahoe Regional Medical Center, Nevada State Museum, Nevada State Railroad Museum, Eagle Valley Golf Course, and Carson City Gun Range. The Carson River flows through the city, and the Carson River Park is located nearby. Other notable locations include Herlan Peak, Sand Harbor, Kings Canyon Waterfalls, and the Prison Hill Staging Area. The map also shows major roads like Highway 50 and Interstate 580.

6 results found

- FOOD AND SUPPLIES**
Northern Nevada Dream Center
3579 Highway 50 East #211
Carson City, Nevada 89702
775-443-4090
- RESOURCES**
Pets of the Homeless
Carson City, Nevada
775-841-7463
- FOOD AND SUPPLIES**
Salvation Army - Carson City
911 East 2nd St.
Carson City, Nevada 89701
775-887-9120
- FOOD AND SUPPLIES**
The Do Drop In Center
3579 Hwy 50 East
Carson City, Nevada 89701
775-841-2580

Keyboard shortcuts Map data ©2022 Google Terms of Use

Additional resources

- American Psychiatric Institute's ESA guidelines
<https://www.psychiatry.org/getattachment/3d42da2a-9a4d-4479-869f-4dd1718f1815/Resource-Document-Emotional-Support-Animals.pdf>
- American Heart Association's Healthy Bond for Life initiative:
<https://www.heart.org/en/healthy-living/healthy-bond-for-life-pets>
- This is a new study that addresses why some folks with high attachment to animals also have a higher burden of mental health issues (within the study sample the connection is fully explained statistically by difficulty attaching with other humans):
<https://bmcp psychiatry.biomedcentral.com/articles/10.1186/s12888-022-04199-1>

Questions?

THANK YOU

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