



Survey to investigate pet ownership and attitudes to pet care in metropolitan Chicago dog and/or cat owners



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ABSTRACT

The aims of this descriptive cross-sectional study were to investigate dog and cat acquisition and attitudes toward pet care among residents of the Chicago area (zip codes 60600–60660); to compare data obtained from owners of shelter-acquired pets with those of residents who acquired their pets from other sources; to compare data from dog owners with cat owners; and to compare pet health practices among the respondents of different zip code income groups. In-person surveys administered at five pet store locations collected data from 529 respondents, representing 582 dogs and 402 cats owned or continuously cared for in the past 3 years. Median household income data for represented zip codes was also obtained.

Shelters were the most common source of cats ($p < 0.01$) and were the second most common source of dogs. Cats were more likely to have been acquired as strays, while dogs were more likely to have been acquired from friends/family/neighbors, pet stores, breeders or rescue organizations and to be kept as outdoor-only pets ($p < 0.01$). More cats were kept per household than dogs (dogs mean = 1.32/household; cats mean = 1.78/household; $p < 0.01$). Pet owners were most commonly 'very likely' (5 on a 1–5/5 Likert scale) to administer all hypothetical treatments discussed, although cat owners were less likely to spend time training their pet ($p = 0.05$). Cat owners were less likely to have taken their pet to a veterinarian for vaccinations or annual physical exams ($p < 0.01$). Shelter-acquired cats were significantly more likely to have been taken by their owners to the veterinarian for annual exams ($p = 0.05$) than cats obtained as strays. Owners of shelter-acquired pets were at least as willing as other respondents to administer hypothetical treatments and pay $\geq \$1000$ for veterinary treatment. Respondents from site #3 lived in zip codes that had relatively lower median household incomes ($p < 0.01$) and were less likely to spend $\geq \$1000$ on their pets than those at the four other sites ($p < 0.01$). Over 90% of pet owners from all acquisition categories expressed very high levels of attachment (≥ 8 –10/10 on a Likert scale), except for owners of cats acquired as strays (84.9%) or from the 'other' category (75.0%).

Survey respondents commonly acquired their pets from shelters and those who did were at least as willing to pay for and provide veterinary care as respondents who owned pets acquired from other sources. The data collected provides a snapshot of the attitudes of survey respondents in the Chicago area toward pet acquisition and care.

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1. Introduction

Modern companion animal sheltering in the United States focuses considerable effort on decreasing pet homelessness by promoting animal shelter adoptions, thereby reducing the numbers of healthy and treatable animals that are euthanized (Asilomar Accords, 2004; AP-Petside.com Poll, 2005). The Asilomar Accord's definitions of healthy and treatable are designed to be specific to each local community (Asilomar Accords, 2004) and some U.S. shelters have begun the process of collecting data to track trending toward those goals (Organizations participating in the Asilomar Accords, 2011). According to the *Chicago Animal Shelter Alliance's* community statistics report, in 2010 approximately 44,938 dogs and cats entered Chicago-based shelters; 19,703 (44%) were euthanized, while 12,028 (27%) were adopted (Chicago Animal Shelter Alliance, 2010).

Insight into local community willingness to address medical and/or behavioral conditions in dogs and cats is necessary for shelters to determine the adoptability of the dogs and cats they manage. The creation of regionally sensitive pet evaluation models is important when establishing practical and relevant shelter protocols to drive the mission of increasing adoptions and defining the terms healthy and treatable for a given community. A recent survey in a rural Midwestern area indicated that pet owners were generally willing to pay for and administer various treatments if their dog and/or cat became unwell (Murphy et al., 2013). This was also the case when hypothetical situations were posed, and past experiences involving pets that did not fully recover after receiving veterinary treatment did not diminish this potential for care (Murphy et al., 2013). It is likely that socioeconomic factors and the accessibility of veterinary care exert major effects on community attitudes and willingness to administer and pay for pet care. Additionally, shelter-related factors, such as location (e.g. metropolitan vs. rural) and intake protocol (e.g. adoption-guarantee vs. municipal open access) can dictate the characteristics of the animals that are offered for adoption, their lengths of stay and outcomes (Bartlett et al., 2005; Marston et al., 2005).

The aims of this study were to survey Chicago area pet owners to (1) investigate the level of health care 'typically provided to pets by reasonable & caring pet owners/guardians in the community' (Asilomar Accords, 2004); (2) compare the attitudes and typical standards of care provided by owners of shelter-acquired pets with those of residents who acquired their pets from other sources; (3) compare the attitudes and typical standards of care provided by dog owners to those of cat owners, and (4) to compare pet health practices among the respondents of different zip code income groups.

2. Materials and methods

2.1. Survey administration

Permission to conduct the study was obtained from Purdue University Human Research Protection Program (IRB Survey Permit #1104010769). The initial survey questions were based on a previously published instrument (Murphy et al., 2013). Pilot surveys were conducted among

pet owners at the College of Veterinary Medicine, Purdue University, to modify the original instrument by refining and clarifying the language used. In May and June of 2011, the survey was administered in all five pet supply store locations of the same retail chain within the Chicago area zip code range 60601–60660 (sites 1–5). The retail chain specialized in selling pet supplies and pet services, such as grooming and dog training. The zip code range was obtained using the results of a Look Up a ZIP Code™ search on the United States Postal Service website (<https://www.usps.com/>), using the search term 'Chicago, IL'.

To be eligible to participate in the survey, respondents must have owned or continuously cared for a cat and/or dog within the past 3 years, be 18 years or older and reside in a zip code 60601–60660. Surveys were conducted as 8–10 min, in-person interviews on a voluntary basis. The trained research assistant read survey questions aloud and recorded responses by hand. All surveys were administered and coded by the same person. Approximately equal numbers of surveys were collected from each site across weekdays and weekends – at least twice from each site on a weekday and at least once on a weekend day, at varying times throughout the day. Respondents were recruited (Supplementary Data 1, Recruitment Script) to take the survey as they entered the store location and a goal was set of 500 completed questionnaires. No vouchers or incentives were used to encourage participation. Inclusion was qualified by a series of preliminary questions pertaining to zip code, age, and cat and/or dog ownership. Those determined 'ineligible' were not included in the study.

Surveys for dog owners and cat owners were administered separately (Supplementary Data 2 and 3, Dog Owner Survey and Cat Owner Survey), so that if a respondent owned both species, they completed a separate survey for each species. Individuals who indicated that they have/had continuously owned or cared for both cats and dogs within the past 3 years were asked to participate in both surveys consecutively. If dual survey participation was declined by an owner of multiple species, this detail was noted and partial data was still submitted for analysis.

To evaluate pet ownership and attitudes toward care, the survey included questions in the following categories: (1) pet ownership, clarifying number and species of pets, form or location of pet acquisition and indoor/outdoor status; (2) pet health, examining both hypothetical and historical willingness to administer specific treatments, amount the respondent was willing to spend on 'a condition with a good chance of a complete recovery' (equivalent to Asilomar treatable-rehabilitatable conditions; Asilomar Accords, 2004) or 'a condition that would always be there and required regular attention, but the treatment would improve your pet's quality of life' (equivalent to Asilomar treatable-manageable conditions; Asilomar Accords, 2004), vaccinations and annual exam maintenance, past incidence of major illness cost and time, recent injury or illness cost and time and actions taken, and (3) respondent demographic data, recording store location, respondent gender, age, zip code and pet attachment level. Median household income data for 2010 for the zip code given by each respondent was obtained from a website

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