NASW has received phone calls and e-mails from members with questions regarding the use of animals as a therapeutic tool. There are four categories of animals used in a helping capacity: (1) service animals, (2) emotional support animals (ESAs), (3) comfort dogs, and (4) animal-assisted therapy. Clinical social workers’ roles and responsibilities vary in each category. The purpose of this practice perspective is to define each category and identify the roles of clinical social workers.

Service Animals
The U.S. Department of Justice (2011) defines a service animal for the purpose of the Americans with Disabilities Act (ADA) as a dog that is individually trained to perform work for the person with the disability. As of March 2011, only dogs are considered service animals under Title II and Title III of the ADA. Service dogs are permitted to accompany the person with the disability in all public areas (U.S. Department of Justice, 2011).

Service animals assist only one person with a disability and are always functioning in the role of a service animal. The function of a service dog is not to provide general comfort with its presence.

Examples of tasks that service dogs perform include:
• recognizing the onset of a seizure and keeping the owner safe during the seizure
• assessing a room for threats before someone with post traumatic stress disorder (PTSD) enters a new environment.

Although individuals and organizations sell service animal certification or registration documents online, there are no formal training requirements or certifications for service animals. These documents do not convey any rights under the ADA and the U.S. Department of Justice does not recognize from as proof that the dog is a service animal. There is also no requirement to register the animal as a service animal. Some cities offer voluntary registration so that the animal can be cared for in the event of an evacuation or emergency.

Examples of tasks that service dogs perform include:
• recognizing the onset of a seizure and keeping the owner safe during the seizure
• assessing a room for threats before someone with post traumatic stress disorder (PTSD) enters a new environment.
Although service animals have protections under the ADA, owners must comply with local laws regarding pet registration and vaccination and be able to maintain the general care of the animal (U.S. Department of Justice, 2015).

Clinical social workers may recommend that a patient consider using a service animal to help with a disability and identify resources to obtain a service animal if desired.

**Emotional Support Animal**

An ESA is defined as an animal that provides emotional benefits to a person diagnosed with a mental health disorder. For an animal to be legally recognized as an ESA, the owner must have a chronic mental illness that impairs or limits functioning in one or more life domains and have documentation from a licensed mental health professional knowledgeable of the person’s illness and treatment. It should state that the presence of the animal is therapeutically necessary to improve and/or ameliorate the impact of disabling symptoms and reduce distress.

Although ESAs do not have the same protections under the ADA as service animals, they may receive special considerations. ESAs are allowed to fly with the owner under the Air Carrier Access Act and are also permitted to live with owners in housing that otherwise restricts pets under the Fair Housing Act. However, ESAs are not permitted in public spaces like service animals. To have an ESA accompany a person on a flight or reside in restricted housing, a letter from a clinical social worker or other mental health professional is required. In addition to the letter, the owner should contact the airline prior to their flight to inform the airline that an ESA is traveling with them. Some airlines require 48-hour notice for ESA accommodation on a flight.

There is debate regarding how a patient should obtain a letter. Some practitioners recommend that a clinical social worker work with the person to attend the therapy session, which will improve retention and treatment outcomes.

**Comfort Dogs**

Comfort dogs are frequently used in disaster response by organizations such as the Federal Emergency Management Agency (FEMA). Comfort dogs offer a calming presence and provide a needed distraction during a disaster or crisis. FEMA works with HOPE Animal-Assisted Crisis Response to train the animal and its owners to be prepared for disaster response settings. Dogs are deployed to shelters and other sites to offer comfort to individuals and families affected by the disaster (Stapf, 2017). While most emotional support animals support one owner, comfort dogs work with the public to provide support.

**Animal-Assisted Therapy**

Animal-assisted therapy is defined as a therapeutic intervention that incorporates an animal into a treatment plan. Although various animals are used in animal-assisted therapy, the most common are dogs and horses. Animals perform intentional, goal-directed activities to complement traditional therapeutic interventions. Unlike service animals who only work with one individual, therapy animals work with many individuals. Animal-assisted interventions are used for a variety of therapeutic goals such as to promote social and normative development, teach socialization skills, reduce isolation, fight obesity, combat bullying, battle PTSD, and enhance physical health (Jackson, 2013).

**Conclusion**

The practice perspective highlights ways in which clinical social workers may use the human-animal connection as a therapeutic aid. Animals provide protection, emotional support, and aid in the achievement of therapeutic goals. Fostering the human-animal connection may help patients identify sustainable, long-term support to maintain symptoms and continue functioning after the therapeutic relationship with a clinical social worker has ended.

**Resource**


**References**


Animals provide protection, emotional support, and aid in the achievement of therapeutic goals. Fostering the human-animal connection may help patients identify sustainable, long-term support to manage symptoms and maintain functioning after the therapeutic relationship with a clinical social worker has ended.
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There is debate regarding how a patient should obtain a letter. Some practitioners recommend that the treating clinician provide the required letter for the patient. Others state that this is a conflict of interest and a referral to a third party should be provided to the patient for an evaluation and letter. There are online organizations that link patients to a mental health professional who can conduct a phone evaluation and provide a letter for a fee. These services do not appear to be the best practices due to limited nature of the therapeutic relationship established. In accordance with NASW (2017) Code of Ethics, social workers should only practice within their area of competence and scope of practice.

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Animals may also function as a surrogate of the therapist and allow for therapeutic touch in a more ethical manner, which could be a corrective experience for those with a trauma history (Tedeschi, 2018).

An animal handler may be involved in the therapeutic session or the clinical social worker may directly handle the animal. Regardless of who is handling the animal, the clinical social worker should be competent in the delivery of animal-assisted therapies (Tedeschi, 2018).

There are certificate programs in animal-assisted therapy to complement existing social work education. Two examples include the University of Denver Graduate School of Social Work Institute for Human-Animal Connection that offers a certificate program in animal-assisted therapy and Veterinary Social Work Certificate Program at University of Tennessee. In addition to training in animal-assisted therapy, malpractice insurance may be required for responsible practice.

### Conclusion

The practice perspective highlights ways in which clinical social workers may use the human-animal connection as a therapeutic aid. Animals provide protection, emotional support, and aid in the achievement of therapeutic goals. Fostering the human-animal connection may help patients identify sustainable, long-term support to manage symptoms and maintain functioning after the therapeutic relationship with a clinical social worker has ended.

### References


### Resource

The Role of Animals as Therapeutic Aids in Private Practice

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