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Attitudes and Motivations of Owners Who Enroll Pets in Pet Life-Care Centers

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ABSTRACT The purpose of this study was to examine the characteristics, motivations, and expectations of humans who enroll their dogs, cats, and other pets into pet life-care centers. Pet life-care centers are groups or institutions that provide a permanent home for pets in the event of the owner's illness, inability to care for their pet, or death. The long-term pet care industry has grown in the quality and type of care available to pet owners and is a classic example of the human–animal bond in action. This bond is well-documented in the literature, with most research focusing on physical, emotional, and mental health benefits to the pet owner. Few studies have examined how the human–animal bond affects the animal, and little is known about the motives and expectations of owners who enroll their pet in a life-care center. We conducted a study using a mail questionnaire sent to 163 current clients of a pet life-care center in Texas, USA. Of 101 respondents, whose ages ranged from 30 to over 70, most were female, married, and college-educated. Respondents strongly endorsed a variety of reasons for enrolling their pet in the center, with quality of veterinary care and satisfaction of their pet's basic needs

being the most highly rated. Coding of open-ended responses was consistent with these ratings and identified having no other options as another frequently endorsed reason. The open-ended responses also indicated that respondents expected that their pet would enjoy extensive social interaction, receive high-quality medical attention, and be treated like they were at home. Respondents who had previously visited the center were more willing to adopt a pet in the future than those who had not visited the center. With the dramatic growth of pet life-care centers in the United States and lack of existing literature, further studies in this area are advised.

Keywords: attitudes, human–animal interaction; pet life-care centers; pet owner motivations



The companion animal industry in the United States has tripled in the past 20 years with 68% of households now owning a pet (American Pet Products Association, 2017). The frequency of pet ownership and investment of time and money spent on pets can be explained, in part, by the strong emotional attachment or bond that develops between human owners and their animals (Anderson, 2008; Crawford, Worsham, & Swinehart, 2006; McConnell, Brown, Shoda, Stayton, & Martin, 2011; Serpell, 2017). Research on the biophilia hypothesis (e.g., Kellert & Wilson, 1993) suggests that humans may be innately predisposed to focus on and have emotional responses to other life forms. Other researchers have interpreted the relationships between humans and their pets through the lens of attachment theory (Bowlby, 1982; Shaver & Hazan, 1993), identifying unique attachment patterns that characterize these relationships (e.g., Zilcha-Mano, Mikulincer, & Shaver, 2011). While there are many aspects of the human–animal bond that remain to be examined (Beck & Katcher, 2003), there is little doubt of its prevalence and significance (Serpell, 2017; Walsh, 2009).

Pet owners may enjoy physical, psychological, and social benefits through the relationships they share with their companion animals (Amiot & Bastion, 2015; Maharaj & Haney, 2014). For example, pet ownership has been associated with cardiovascular health (Levine et al., 2013) and can encourage people to engage in more frequent physical activity (Christian et al., 2013; Cutt, Giles-Corti, Knuiman, & Burke, 2007). Pets also serve as an important source of social support that promotes self-esteem and lower levels of depression (Friedmann & Tsai, 2006; McConnell et al., 2011). Pets may also provide feelings of self-cohesion, calmness, soothing, and acceptance (Brown, 2007). The benefits of human–pet relationships are also evident throughout the human life cycle (Sable, 1995). For example, companion animals may be particularly beneficial for pediatric and geriatric populations (Horowitz, 2008).

The bond between humans and animals provides many benefits to humans, but it is also important to consider how this bond may affect the animal's health and quality of life. For example, people with stronger bonds appear to seek higher-quality health care for pets (Wensley, 2008) and are more likely to follow veterinarian recommendations regardless of the cost (Lue, Pantenburg, & Crawford, 2008). In another study, the presence of pets, like family, was found to influence decisions to evacuate during a hurricane (Brackenridge, Zottarelli, Rider, & Carlsen-Landy, 2012). These behaviors can be interpreted as a result of the obligations owners feel toward their pets because of their bond. Burgess-Jackson (1998) proposed that the act of taking an animal into one's life or home generates responsibilities to the animal; particularly, to provide for its needs. Hens (2009) described four possible types of relationship between dogs and humans: master-slave, employer-worker, parent-child, and friend-friend. Perceived responsibility for the dog's welfare varies as a function of the relationship type. Overall, these studies demonstrate that humans are strongly bonded to their animals, and that this translates into willingness to provide high-quality healthcare for their pets. In the current study, we focused

on another positive and understudied benefit this unique bond has on the animal's quality of life: long-term life care planning and implementation.

Some owners choose to provide funds for their pet to ensure adequate care in the event of their sickness, incapacitation, or death. These funds can be kept in a will or pet trust. This area of estate planning has brought about new areas of concern such as gaps in care for pets in wills, limited accountability for trustees of pet trusts, legal limits on the duration of statutory pet trusts, possibility of fraud, and the inability of pets to legally inherit (Casteel, 2007; Hirschfeld, 2009). One solution to these concerns may be long-term animal care sanctuaries and shelters, which have been considered in response to legal issues which have arisen with trusts and wills due to their financial and legal structure (Beyer, 2013).

Pet Life-Care Centers

Pet life-care centers are a comparatively new development in response to pet owners' feelings of responsibility and obligation to provide care for their pets. In addition to private centers, veterinary schools and animal shelters have organized non-species specific, full-care, life-care centers (Ebeling, 2010). Texas A&M University's Stevenson Companion Animal Life-Care Center, Kansas State University's Perpetual Pet Care, and Oklahoma State University's Cohn Pet Care Facility are three life-care centers associated with universities in the United States (Mott, 2011). Using the Stevenson Companion Animal Life-Care Center in this study, we sought to determine the reasons individuals choose to enroll their pets into a life-care center rather than alternatives. The Center is located in College Station, Texas, United States and is affiliated with the Texas A&M University College of Veterinary Medicine & Biomedical Sciences (Texas A&M University College of Veterinary Medicine & Biomedical Sciences, 2014).

There were four objectives of this study. The first objective was to determine the demographics characteristics of the people who enroll their pets at the life-care center. The second objective was to establish clients' reasons or motives for enrolling their pets. The third objective was to assess owners' expectations regarding their pet's lives at the Center. Finally, we sought to determine if visits to the Center influenced willingness to adopt a new pet. As reviewed earlier in the introduction, owning a pet is related to psychological and physical well-being for owners, but little research has examined what variables relate to one's willingness to adopt a pet. In the current study, we examined whether having pet owners who had previously visited the Center would be more or less comfortable with potentially adopting a new pet in the future. To achieve our objectives, a short survey was sent to all clients whose pet(s) were currently enrolled for future placement at the Center. For the purpose of this study, "enrollment" was defined as having reserved space at the Center to be used at any time in the future for a pet or pets.

Methods

The study protocol and all materials were approved by the Texas A&M University Institutional Review Board (IRB2015-0363M). All respondents provided their informed consent before completing the study materials.

Participants

Surveys were sent to all clients who had enrolled their pet(s) into the Stevenson Center. One hundred and one pet owners of 163 who had currently reserved a space for their pet at the Center completed the study; the response rate was 62%. Respondents' ages ranged from 30 to over 70 years old (27% were below 60; 37% were aged 61–70, and 36% were older than

70). The respondents were primarily female (70%), married (63%), and possessed a Bachelors-level college degree or higher degree (99%). Nineteen percent of respondents had children and 15% had grandchildren. The median number of times respondents had visited the Center was one (38% had never visited the Center, 21% visited once, 21% visited twice, and 20% visited more than 2 times). The respondents who had never visited the Center primarily mentioned time and/or distance (78% of respondents in this category) as the main reason for not visiting. Sixty-one percent of respondents indicated that they did not consider asking family members or friends to care for their pet(s), and 79% indicated they did not consider any program besides the Stevenson Center to care for their pet(s). Self-reported health was relatively high ($M = 5.70$ for one's own health), as was the reported health of their pet(s) ($M = 5.69$), rated on a 0 (the worst possible health) to 7 (the best possible health) scale.

Survey

Respondents completed a short mail questionnaire assessing various attitudes, motivations, and expectancies regarding their decision to enroll their pet(s) at the Stevenson Center. Items for the questionnaire were generated by the second author and then edited and approved by Merrideth Holub and Michael Chaddock and two primary staff of the Stevenson Center. Respondents were asked to rate nine items on a 1 (not at all) to 7 (extremely) scale to assess their attitudes toward their pets and the Stevenson Center. Three items assessed their connectedness to their pet(s): "To what extent do you feel close to your pet(s)?," "To what extent do you feel connected to your pet(s)?," and "To what extent do you consider your pet(s) part of your family?" Three items assessed how their decision to enroll their pet(s) influenced their wellbeing: "To what extent does your decision to enroll your pet(s) give you "peace of mind?," "To what extent does your decision to enroll your pet(s) relieve anxiety?," and "To what extent does your decision to enroll your pet(s) make you feel satisfied with your life?" Three independent items assessed how awareness of the Stevenson Center had influenced respondents' feelings toward adopting a new pet: "To what extent would you feel comfortable adopting a new pet?," "To what extent would you feel comfortable adopting a new pet if you did not know about the Stevenson Center?," and "To what extent has your knowledge about the Stevenson Center influenced your willingness to adopt a pet in the past?" Respondents then rated nine additional items assessing various reasons they enrolled their pet(s) on a 1 (not at all) to 7 (extremely) scale (see Table 1).

Additionally, respondents completed two open-ended essays asking them to explain, in their own words, (1) their personal reasons for enrolling their pet(s) into the Center, and (2) their expectations for their pet's life at the Center. To quantify these responses, two people first reviewed the essays and identified a set of common themes (see Table 2). To assess the frequency of each theme, two additional people, unaware of the purpose of the study, independently coded whether each theme was mentioned in each respondents' essays. Finally, a third person reviewed the previous coders' results and resolved any discrepancies.

Results

Respondents rated items in groups of three on a 1 (not at all) to 7 (extremely) scale that assessed connectedness to pet(s) ($M = 6.90$, $SD = 0.31$), and how their decision to enroll their pet(s) influenced their wellbeing ($M = 6.45$, $SD = 0.79$). Results from the three independent items assessing how awareness of the Center influenced respondents' feelings toward adopting a new pet were as follows: "To what extent would you feel comfortable adopting a

Table 1. Clients' reasons for enrolling pet(s) at the Center, rated on a scale from 1 (not at all) to 7 (extremely).

	<i>M</i>	<i>SD</i>
<i>I enrolled my pet(s) because...</i>		
I believe my pet(s) will receive exceptional veterinary care	6.86	0.40
I believe his/her basic needs (e.g., food, safety) will be satisfied	6.80	0.70
Of the reputation of the Stevenson Center	6.63	0.76
Of the College of Veterinary Medicine & Biomedical Sciences at Texas A&M University, specifically	6.59	0.99
I believe his/her social needs (e.g., bonding with staff) will be satisfied	6.44	0.98
I believe my pet(s) will have a lot of social interaction with other animals	6.43	0.94
I believe my pet(s) will be happy living at the Stevenson Center	6.30	0.96
I feel happy imagining my pet's (pets') life at the Stevenson Center	6.22	1.23
Of the reputation of Texas A&M University	6.12	1.57

Table 2. Themes identified in clients' open-ended responses.

	Percent
<i>Reason for enrolling pet(s) at the Center</i>	
No other options/Didn't want to take pet(s) to shelter	58
Reputation of the center/staff	45
Pet's psychological well-being	43
Pet's physical well-being	42
Peace of mind/Relieve anxiety	38
Other reasons (e.g., to help students conduct research)	7
<i>Expectancies for pet's (s') life at the Center</i>	
Lots of social interaction	73
Great medical attention/General care	69
Will be treated like they are at home	30
Other	5

new pet?" ($M = 4.99$, $SD = 2.23$), "To what extent would you feel comfortable adopting a new pet if you did not know about the Stevenson Center?" ($M = 3.53$, $SD = 2.19$), and "To what extent has your knowledge about the Stevenson Center influenced your willingness to adopt a pet in the past?" ($M = 3.69$, $SD = 2.63$). As indicated by these descriptive statistics, participants' ratings suggested that, overall, they felt extremely close to their pets, enrolling their pets at the Center positively influenced their wellbeing, and those who had visited the center were more willing to adopt a pet in the future than those who had not.

Ratings for the nine items assessing motivations for enrolling a pet at the Center are displayed in Table 1. All reasons were rated at 6.12 or higher on the 7-point scale. Participants strongly endorsed enrolling their pets at the Center because they believed their pet's physical and psychological needs would be met, their pet(s) would be happy at the Center, and because Texas A&M University, the Texas A&M University College of Veterinary Medicine & Biomedical Sciences, and the Stevenson Center had a good reputation.

Content coding of the essays describing reasons for enrolling pet(s) revealed six themes: no other options/didn't want to take pet to a shelter, reputation of Center, pet's psychological wellbeing, pet's physical wellbeing, to provide peace of mind, and other reasons. The content coding of the essay describing expectations for their pet's experience at the Center revealed four categories: extensive social interaction, receiving high-quality medical attention, treated like they are at home, and other. The proportion of essays including each of these themes is reported in Table 2.¹

Finally, participants' willingness to adopt a new pet significantly varied as a function of having visited the Center. An independent samples t-test revealed that those who visited the Center were significantly more comfortable with potentially adopting a new pet in the future ($M = 5.59$, $SD = 1.91$) compared with respondents who had not visited the Center ($M = 3.84$, $SD = 2.40$; $t_{(91)} = 3.80$ $p < 0.001$).

Discussion

As evidenced by the size and growth of the companion animal industry, pet owners generally place a great amount of importance on pets as companions (American Pet Products Association, 2017; McConnell et al., 2011). Feeling responsible for the health and wellbeing of their animals, pet owners seek ways to provide care for their cherished pets in the event of sickness or death (Burgess-Jackson, 1998). Animal life-care centers and shelters have been created to fill the need for dependable, high-quality pet care available to highly bonded pet owners. Prior to this study, limited research had investigated the characteristics of people who use pet life-care centers. The Stevenson Center Companion Animal Life-Care Center offered an opportunity to identify and examine this subset of pet owners in the current study.

The four objectives of this study were met. First, the basic demographic characteristics of the people who had enrolled their pets at the life-care center were described. Second, we identified strongly endorsed reasons for enrolling pets in the Center. Third, owners' perceptions of what their pet's life will be like at the Center were characterized. Fourth, respondents who had visited the Center were found to be significantly more comfortable with potentially adopting a new pet in the future than respondents who had not visited the Center.

This study helps establish why people choose to enroll their pets into life-care centers. Quality of veterinary care and satisfaction of basic needs were the most highly rated reasons for enrolling a pet, however all of the provided reasons received relatively high ratings. Interestingly, concern for their pet's social and emotional wellbeing rivaled concern for their physical wellbeing and the veterinary care they would receive. These findings are consistent with previous research demonstrating that strong bonds between owners and their pets can contribute to enhanced health and physical wellbeing for pets (Lue et al., 2008; Wensley, 2008), but also highlight the importance people place on their pet's psychological wellbeing.

It is important to consider that these results only provide a partial picture of what does and does not motivate owners to enroll their pets in life-care centers. All of the reasons for enrolling pets in the Center rated in the current study received very strong endorsement, so less influential motivating factors were not identified. Future research could ask pet owners to rate a more diverse set of reasons, potentially drawn from open-ended responses, such as the essays in the current study. Additionally, asking pet owners about the reasons they might be reluctant to enroll their pets in a life-care center could provide further insight into what motivates these decisions. Another consideration is that the ratings in the current study were retrospective self-reports and may be more susceptible to inaccurate recollection and response

biases, such as acquiescence, than other methods. Future research could assess motivations and expectations at the time of enrollment to address these limitations.

One strong motivating factor for enrolling a pet in the Center that was not included in the motivation ratings but emerged in the content coding was having no other options or not wanting to take the pet to a shelter. Future research could explore why pet owners feel they have no other options, to more accurately characterize their motivations and attitudes. For example, family members are often asked or expected to care for an owner's pet after they are no longer able to care for it themselves. Only 19% of the respondents in the current study reported having any children, suggesting, perhaps, that this particular subgroup of pet owners may be more socially isolated than others, at least with respect to immediate family members who might be able to care for their pet when they are unable to do so.

Another finding with potentially important implications is that respondents who had previously visited the Center were more comfortable potentially adopting a new pet than respondents who had not visited the center. Respondents' ratings suggested that their knowledge of the Center increased their willingness to adopt a pet, but it is unclear whether this explains the difference between those who had visited and those who had not. It is possible that visiting the Center engendered confidence and reassurance that their current and newly adopted pets would have a happy and satisfying life at the Center after they are no longer able to care for them. However, the current study does not provide causal evidence for this finding, as respondents were not randomly assigned to visit or not visit the Center as part of an experiment. Another plausible explanation is that willingness to adopt or another preexisting individual difference influenced whether the pet owners chose to visit the Center. For example, some pet owners may grow uncomfortable with the idea of adopting a new pet if the possibility that their current pet may outlive them becomes especially acute and concrete when thinking about the Center.

Future research in this area is still needed to address important basic questions about pet life-care centers. For example, what types of human–animal relationships (e.g., Lue et al., 2008) predict enrollment at pet life-care centers? Does enrollment in such centers lead to higher rates of human psychological wellbeing and physical health due to less worry about the pet's future? Does the wellbeing of the owner influence willingness to adopt future pets after enrolling? Studies that address these and other questions can provide a deeper understanding of pet life-care centers and their relation to human–animal bonds that would benefit industry professionals, veterinarians, clients, and ultimately the pets themselves.

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Conflict of Interest

The authors certify that they have no affiliations with or involvement in any organization or entity with any financial interest (such as honoraria; educational grants; participation in speakers' bureaus; membership, employment, consultancies, stock ownership, or other equity interest; and expert testimony or patent-licensing arrangements), or non-financial interest (such as personal or professional relationships, affiliations, knowledge or beliefs) in the subject matter or materials discussed in this paper.

Note

1. For exploratory purposes, we conducted t-tests to test for differences between men and women on the outcome variables, as well as ANOVAs to test whether age of respondent was related to motivation or expectancies. The results of these tests revealed no significant effects of sex or age on these outcomes variables.

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