



International Association of  
**Human-Animal Interaction**  
Organizations

## **IAHAIO international guidelines on care, training and welfare requirements for small animals in animal-assisted interventions**

### **Development of the guidelines**

These guidelines provide best practice guidance for meeting the care, training and welfare requirements of small animals involved in delivering animal-assisted interventions. They apply to small animals of different species that may be included in visiting and residential programs.

The guidelines were developed by an international task force of IAHAIO members and individual experts and relevant organizations working between 2018 and 2021. They are based on a review of evidence of current best practices and research.

### **Use of the guidelines**

The recommendation is that these guidelines are adopted and implemented in practice by everyone that incorporates small animals in programs that benefit people. It is acknowledged that knowledge can change over time as research and practice expands and it is intended that this document be reviewed every two years and adjusted, if required. National guidelines or profession-specific competencies for small animals as part of human services that exist in individual countries must be followed in care, welfare, training and handling procedures.

### **1. General guidelines applying to both visiting and resident small animal programs**

- 1.1 Facilities must comply with the laws in their country relating to animal health and welfare.
- 1.2 The Five Freedoms (see Mellor et al. 2020) are but a starting point in animal welfare provision. The Five Domains Model expands the concept to provide quality of life to deliver a life worth living and the Five Provisions/Welfare Aims paradigm extends this further. It provides clear guidance on animal welfare management and can be applied to many species across different circumstances.
- 1.3 Careful planning is required in developing any animal-assisted intervention to help ensure high standards of animal welfare. The interdisciplinary team creating and overseeing the program should include, in addition to health and social care and education professionals, a veterinarian experienced in the species involved, and possibly also veterinary nurses and technicians, clinical or accredited animal behaviorists, animal

welfare scientists, veterinary ethicists, representatives from an AAI organisation, animal trainers and species specialists.

- 1.4 The safety, comfort, physical and psychological wellbeing of the animals will be compromised if their needs are unmet. Therefore, the physical environment must be suitable and those responsible for animal care should be competent in that particular species and be accountable.
- 1.5 To determine whether AAI can be recommended, and which species are suitable, a site assessment is required. This includes assessment of the indoor and outdoor environs; meetings with staff and clients to determine their commitment, their abilities, any issues, risk and safety management and to ascertain available funding to support ongoing animal needs and housing.
- 1.6 In some situations, the recommendation will be not to involve live animals, but instead use soft toys, robotics and/or reminiscence activities.
- 1.7 Wild animals and exotic species, including those kept as pets, must not be involved in AAI as their needs cannot be met. Their stress signals are poorly understood, they rarely remain in good health, usually have a shortened lifespan in captivity, and they pose a high zoonotic risk. There are also serious concerns about high mortality during transit, and ecological species depletion.
- 1.8 Observation of wildlife, including mammals and birds in nature, is recommended, provided they are undisturbed.
- 1.9 Prior to admission to the programme or facility, the animals should be assessed by a veterinarian for suitable health and by a veterinary behaviourist, or by an accredited or clinical animal behaviorist for temperament and behavior. Prophylactic licensed veterinary preventive medications should be administered for parasite control and vaccination as indicated. To mitigate zoonotic risks, AAI animals must not be fed on raw diets of animal origin such as raw or undercooked meat or fish or such by-products; or unpasteurised milk or such by-products; or raw eggs.
- 1.10 Every animal involved in AAI should have a veterinary wellness examination at least annually, and the veterinarian should be made aware that the animal is involved in AAI, and of the types of activities and the clients served. The handler of the animal is also expected to do a wellness assessment prior to every AAI session.
- 1.11 Symptoms of illness must be recorded and reported to the animals' veterinarian. Sick, pregnant, females in oestrus, wounded or animals recovering from surgery must not be involved in AAI until their veterinarian advises this is safe.
- 1.12 Adverse changes in behavior that are unexplained or not easily mitigated with behavior modification should be reported to the veterinarian, the animal behaviorist and to the

person responsible for the animal and the person overseeing the program.

- 1.13 The time that animals spend interacting with clients, staff and visitors should be documented, and limited to the capacity of the individual animal.
- 1.14 Animals should willingly engage in the interactions, not just tolerate these. Interactions must not be forced onto the animal and free interaction with possibilities for retreat is required.
- 1.15 Only relationship and reward based, humane training methods and techniques should be employed in training.
- 1.16 A local veterinarian and also an accredited or clinical animal behaviorist experienced in the species involved, should be included in the panel of experts appointed to advise on and monitor the programme.
- 1.17 A written protocol for the retirement of animals involved in AAI should be in place. This should include criteria for deciding when retirement is advisable, whether the animal is phased out and how retirement is spent.
- 1.18 Clients with a history of inappropriate interactions with animals should be very closely supervised when in the presence of animals. Careful consideration and planning are required for clients with a history of animal abuse. Unless AAI is being applied in a rehabilitation programme or mental/emotional therapy, under close supervision by a mental health professional, such clients would normally not be involved in AAI.
- 1.19 Animals should not have contact with clients suffering from infectious diseases transmissible to animals, i.e. zoonoses, also known as reverse zoonoses, including MRSA patients.
- 1.20 A written protocol is required for the programme which describes steps to safeguard animal welfare. This must include education to monitor for stress-associated behaviors for that particular species and steps to mitigate zoonotic disease transmission.

## 2. Specific points relating to care and welfare of small animals in visiting programs

### Dogs

- 2.1 In general, dogs are the most common species in visiting programs and can be suited for this work. However, many dogs that are excellent as family dogs are unsuitable in the context of this work. Very careful selection is required of each individual animal. Dogs must be assessed by an experienced AAI evaluator and found to have the required temperament and behavior for accreditation to be involved in AAI. Owners must not

evaluate their own dogs. The evaluation should be appropriate for work in specific settings. For example, a dog suited for visiting young offenders in prison may not be suitable for visiting frail older people.

- 2.2 Dogs should be at least 12 months of age and have been in the same ownership for at least 6 months before being evaluated for accreditation. Many dogs may not be sufficiently mature or have reached the required level of training at this point to achieve accreditation. This may take up to two years. However, their owners can be provided with helpful advice to guide them towards being successful at a later date. The dog handler team should be re-evaluated, ideally annually, even if there are no concerns during that time period. Any changes in an animal's temperament, behavior or performance warrants timely re-evaluation.
- 2.3 The dog's veterinarian should certify that the dog is current with all standard preventive health treatments for the region, i.e. vaccination and parasite treatment.
- 2.4 The dog's handler should normally be his owner. The presence of the owner will reassure the dog, and the owner knows their dog and should be attuned to his particular stress signals. If the owner is unavailable to be the handler of the dog, another handler who is familiar with, has worked with the dog previously, and has been evaluated and approved as an individual team by the AAI organization, may be permitted to act as handler. The dog should never be handled by a stranger or an individual who has not been approved by the AAI organization to handle the dog.
- 2.5 The handler should complete dog training and dog behavioral modification programs that are relationship and reward based, and employ humane training methods and techniques that are negative stress (i.e. distress) free, before joining an AAI programme, and be cognizant of early stress signals. The handler must be able and ready to advocate for the dog when required.
- 2.6 Journey time to the facilities should be short/limited to the capacity of the individual animal, and the dog should be habituated to, and comfortable with car journeys, or other appropriate forms of transportation.
- 2.7 Prior to commencing AAI visits, the handler should visit the facility with the dog to allow him/her or their dog to become familiar with the environment including its smells, layout and flooring.
- 2.8 Initial visits should involve accompanying an established team, or evaluator, and the handler should be very alert for stress signals. If stress signal are exhibited, steps must be implemented to de-stress, and if unsuccessful, the visit should be terminated.
- 2.9 On arrival at a facility, dogs should be allowed some outdoor exercise, offered water and given an opportunity to urinate and defaecate.

- 2.10 Dogs should be trained not to eat items from the floor, or take food from clients, as there is a risk of them ingesting medications, toxic substances, or overeating.
- 2.11 We suggest 45 minutes as the maximum length of a session, no more than three sessions per day and the dog should be given a minimum of 10 minutes break after each session with a duration of 20 minutes or more. We recommend that no more than nine sessions per week should be scheduled. Duration will depend on the intensity of the visit, and the capacity of the animal. Animals should not be forced to work a minimum amount of time.
- 2.12 Dogs should wear a comfortable collar or harness. Choke/check collars, half chokes and spike collars are unacceptable.
- 2.13 Bitches must not be involved when in season, during a pseudopregnancy, during the last month of pregnancy, or when lactating.

### Other species

- 2.14 Other species of small animals that can be involved in visiting programs can include guinea pigs, rabbits and cats - if adequately prepared, handled and housed, and have opportunities to withdraw and hide. However, these species are generally more suited as facility residents. Again, each individual animal should be very carefully assessed for suitability. A veterinarian should assess their health and check that disease prevention measures are appropriate and their temperament and behavior assessed by a veterinarian or behaviorist experienced in that species.
- 2.15 Ideally an additional person should accompany the animal-handler team, solely to focus on the visiting animal's welfare.
- 2.16 Transportation should be non-stressful for the species. If the animal exhibits signs of stress during the journey and is unable to recover shortly after arriving at the location, that animal should be precluded from visits.

### 3. Specific points relating to care and welfare of small animals in residential programs

- 3.1 It is essential to select species whose needs can be met in the facility. Many factors must be considered including the layout of the interior and exterior of the facility; available space; ambient temperature; light levels; room orientation; flooring; areas for rest and respite; access points for water and electricity, especially if siting an aquarium; and existing animals.
- 3.2 Resident animal programs require greater commitment from staff, and a supportive governing body. There must also be sufficient and sustainable funding to prepare for the lifespan of the animal.

- 3.3 Animals must be carefully selected and acquired from a reputable source, following advice from a species specific specialist, the programme veterinarian or an accredited/clinical animal behaviorist.
- 3.4 Depending upon the facility layout and the client group, species that can be considered include cats, guinea pigs, rabbits, rats, cage and aviary birds, aquarium and pond fish. New animals must be compatible with existing animals. Predator and prey species should be kept well apart.
- 3.5 Programs should start small, expand slowly, introducing one species at a time.
- 3.6 Detailed research about the care needs of the chosen species must be conducted before they are acquired from a reputable source. A written protocol approved by a veterinarian or an accredited/clinical animal behaviorist is required for the programme overall, and a health care plan for each individual animal, and for each aviary and aquarium or pond.
- 3.7 Several staff members should be designated as animal stewards and receive additional training in animal care and handling. Responsibilities include entering a daily log about each animal, aviary and aquarium; feeding nutritious species-appropriate food; ensuring fresh water is always available; keeping enclosures clean; weighing and body scoring animals monthly; regularly grooming and (if appropriate) bathing animals; ensuring appropriate exercise; monitoring human-animal interactions; and induction of new residents, staff and visitors about stress signals and how to interact with the animals. Animal stewards must follow veterinary and behavioral advice.
- 3.8 Prior to introduction to a programme, newly selected animals should be examined by the programme veterinarian to ascertain their health and assessed by a veterinarian or an accredited or clinical animal behaviorist experienced in the species for their temperament and behavior. Routine preventive health protocols should be followed using licensed veterinary medications for vaccination and parasite control. Neutering should be performed if indicated. A period of one month's quarantine is then advisable to better assess temperament and allow for the expression of disease or behavior issues before introducing mammals, fish and birds to a facility. This also allows time for veterinary recommended screening for disease which can include psittacosis in birds, and feline leukaemia virus (FeLV) and feline immunodeficiency virus (FIV) in cats.
- 3.9 Suitable environmental locations must be chosen for each species' accommodation, with consideration of light, temperature, noise, and level of human traffic. Whilst most species enjoy living with conspecifics, some species require to be kept singly. The accommodation should be as large as possible (at least as large as that required by local laws) and include hiding places.
- 3.10 All items for the animals' care must be in place before they arrive i.e. cages, food, dishes, bedding, toys, basket, litter and trays, cleaning equipment etc. and environmental enrichment appropriate for each species.

- 3.11 Following admission, a period of quiet, monitored care by the steward, will enable animals to settle in. Once adjusted, low key introductions are made to the community, one or two people at a time, not involving handling at this stage. The process must be gradual.
- 3.12 A facility should have an Animal Wellness Programme which will involve the programme veterinarian making regular visits to the facility to perform thorough physical examinations, including checking oral health, and body condition score; discussion about the animals with their stewards; prescribing preventive medications and vaccinating when required; potential screening for infectious disease; observation and assessment of the animals' behavior; observation of human-animal interactions; checking pre-existing problems; nutritional advice; assessing animals' accommodation and making recommendations e.g. about environmental enrichment.
- 3.13 Veterinary care must be readily available between wellness visits, if needed. An emergency veterinarian should be identified for any emergencies that occur if the regular veterinarian is unavailable.
- 3.14 Animals should be safeguarded from people who have the potential to harm animals intentionally or unintentionally. People with a known history of animal abuse should not have unsupervised contact with an animal. Some clients with emotional or physical disabilities may pose a risk to animals because of their inability to interact with them appropriately, or by giving them food or medications. Reverse zoonoses or anthroozoonoses are infections that can be transmitted from humans to animals. Patients suffering from such diseases, which include tuberculosis, MRSA, amoebiasis, ringworm, scabies, mumps, influenza, cryptosporidium and giardia, should not have animal contact.
- 3.15 All animals should have a human-free time daily. This could be a freely accessible zone for animals that are mobile, or a time of day when humans are not allowed near the animals' accommodation.
- 3.16 Protection from wild animals. Animals, including fish that are outdoors, need protection from predators e.g. birds of prey, herons, foxes, coyotes, rats. The food supply must also be protected from rodents and other pests and stored securely in a dry place.
- 3.17 A written policy is required to address the care of animals permanently retiring from the programme. Animals may be discharged due to stress; suffering from an illness that requires advanced nursing care and special monitoring such as renal failure or diabetes; have a behavior issue that cannot be resolved within the facility or if they no longer accept being handled. The animals should be rehomed to a carefully selected individual who has been screened, is responsible and educated about the animal, including the reason for retirement from the programme. Residents should be kept fully informed about these decisions and provided with progress reports that indicate this is best for

animal welfare and wellbeing.

- 3.18 Euthanasia of program animals should only be performed when this is in an animal's best interest in consultation with the program veterinarian.
- 3.19 An evacuation programme for the animals is required in case of emergency.
- 3.20 Everyone who cares for and handles the animal should know the early stress signals of each species and individual, and report to the steward if observed. Non-essential interaction must be suspended until the cause of stress is remedied and the animal has recovered. If signs continue, the program veterinarian and animal behaviorist must be informed.
- 3.21 Potential stressors for resident animals include temperature, light, noise, smell, overcrowding, inappropriate nutrition, lack or presence of other animals, lack of retreat possibility, unsuitable accommodation, over or clumsy handling, lack of rest, forced positioning, forced or over training and prolonged contact with stressed people.
- 3.22 Any training should be for a few minutes at a time and be relationship and reward based, humane training methods which are pain and negative stress free.
- 3.23 In some facilities such as children's homes, psychiatric hospitals and prisons, clients may be able to have a pet(s) of their own and should be taught how to best care for them.
- 3.24 Especially in prisons and psychiatric facilities, where there is no regulated provision for animal contact, clients may make their own provision by capturing wild mammals, birds, and insects, resulting in serious animal welfare issues (and risks of zoonoses and injuries).
- 3.25 Inmates can be inclined to release animals they care for into the wild, free from the establishment, believing they will return. Before animals are introduced, it must be emphasised that release will harm them.

#### 4. Additional points regarding specific species

- 4.1 **Cats.** Their behavior is less predictable than dogs. Cats should be at least 12 months old and have been well-socialized to both conspecifics and humans as kittens. Prior to admission their health should be assessed by a veterinarian; screened for Feline Leukaemia (FeLV) and Feline Immunodeficiency virus (FIV); vaccinated and neutered. Their behavior should be assessed by a behaviorist and then monitored for at least 4 weeks prior to admission.
- 4.2 **Fish.** An experienced aquarist should be involved in choosing and siting the aquarium and in selecting and installing the tank filtration, heating, thermostat and lighting, and selecting and establishing the plants and fish. The fish should be selected in strict accordance to their biological needs including adequate space, company of other fish of



the same and other species, preferably from the same biotope, as well as adequate biochemical conditions of the water. Aquarium setup should also include habitat needs of all species it hosts. The aquarist will set out a timetable for partial water changes with a water conditioner (to remove heavy metals and chloramine) and water quality measurement. Large tanks are generally more easily managed than small tanks, are better for fish welfare and provide greater interest to residents. Key issues include how densely the tank will be populated, considering the adult size of the fish, how well the water quality will be tended to, and how much the aquarium will resemble the natural environment.

- 4.3 The aquarist should oversee tank maintenance unless staff or residents acquire these skills. Only designated stewards should feed fish as overfeeding is a common cause of illness either directly or through negative influence on the biochemical conditions of the water. A lockable lid is advised. People should be instructed not to tap the glass. The most suitable set up is a freshwater tropical aquarium stocked with community fish. These are fish from different species that are compatible. To create greater interest, fish can be selected that have different behaviors, occupy different tank levels, and contrast in appearance. The aquarist will advise on suitable fish species, size and numbers and of reputable sources. Hardy species such as common goldfish, Koi carp and orfe can be kept in outdoor ponds provided steps are taken to prevent predation. However, they should not be kept in a pond designed for wildlife.
- 4.4 **Birds.** Suitable pet bird species include zebra finches, lovebirds, canaries, budgerigars, cockatiels, pigeons and doves. An experienced aviculturist should be involved in the siting and construction of indoor and outdoor aviaries appropriate to the size and number of birds. They should also be involved in bird selection, in collaboration with the programme veterinarian, and advise about which species are only to be observed, and which can become hand tamed with careful training. High maintenance and/or noisy species such as parrots should not be introduced.
- 4.5 **Rabbits.** Rabbits should only be cared for in facilities with calm clients who will interact with them safely and gently. There is now a high incidence of dental problems in pet rabbits. Selecting individuals whose skull approximates the “wild type” and ensuring that the diet approximates that of wild rabbits with access to hay, outdoor grassed areas and suitable cultivated wild plants, whilst limiting access to concentrated foods, will reduce the incidence of dental disease. Rabbits need much exercise to ensure the development of a strong musculoskeletal system. They must also be able to dig extensive burrows. Stress recognition can be very difficult in rabbits and their “freeze” behavior strategy in response to stress should be explained to animal stewards and clients. They need to be able to withdraw from interactions and hide. In addition, struggle against restraint may result in the rabbit kicking away violently, putting stress on the spine which can cause this to dislocate or fracture, resulting in paralysis of the rabbit.
- 4.6 **Guinea pigs.** These are very nervous and should only be cared for in facilities with calm clients who will interact with them safely and gently. They have a high dietary requirement for Vitamin C and should therefore not be fed rabbit food, unless

supplemented. Similar to rabbits, their “freeze” behavior strategy in response to stress should be explained to animal stewards and clients. They too need to be able to withdraw and have shelter to hide from interacting with clients/patients. Both rabbits and guinea pigs have extremely sensitive feet, prone to infection, and thus appropriate flooring is an absolute necessity, and must be kept very clean.

- 4.7 **Dogs.** Dogs are unsuited as communal resident animals as they usually bond to a specific person. The stresses of living in facilities usually prove too much and dogs may suffer burnout after a period of time, often due to lack of adequate rest or ‘down time’. They can also be kept in a facility if as an individual’s pet dog or an assistance dog.

## Literature

Animal Assisted Interventions: SCAS Code of Practice for the UK 2019

[AAI Code of Practice \(UK\) | SCAS](#)

AVMA Animal-assisted Interventions: Guidelines

[Animal-assisted interventions: Guidelines | American Veterinary Medical Association \(avma.org\)](#)

Barker S, Gee, N. [Canine-Assisted Interventions in Hospitals: Best Practices for Maximizing Human and Canine Safety | Veterinary Science \(frontiersin.org\)](#) Front. Vet. Sci., 30 March 2021

Barker, S B.; Vokes, R A.; and Barker, R T. *Animal-Assisted Interventions in Health Care Settings: A Best Practices Manual for Establishing New Programmes: Volunteer Manual Template* (2019). AAI. Paper 1.  
<https://docs.lib.purdue.edu/aai/1> [Google Scholar](#)

Driscoll, C.J. (Ed) (2020). *Animal-Assisted Interventions for Health & Human Service Professionals..* Nova Science Publishers, NY: New York

Glenk L. *Current Perspectives on Therapy Dog Welfare in Animal-Assisted Interventions.* In *Animals February 2017 Animals 7(2):7* doi [10.3390/ani7020007](https://doi.org/10.3390/ani7020007)

Gut, W,; Crump, L.; Zinsstag, J.; Hattendorf, J. and Hediger, K. *The effect of human interaction on guinea pig behaviour in animal-assisted therapy.* *Journal of Veterinary Behavior* 25 (56-64).

IAHAIO White Paper (2018): Definitions for Animal Assisted Intervention and Guidelines for Wellness of Animals Involved

[White Paper on Animal-Assisted Interventions | IAHAIO](#)

Mellor DJ, Beausoleil NJ, Littlewood KE, McLean AN, McGreevy PD, Jones B, et al. *The 2020 five domains model: including human–animal interactions in assessments of animal welfare.* In *Animals.* (2020) 10:1870. doi: 10.3390/ani10101870

[PubMed Abstract](#) | [CrossRef Full Text](#) | [Google Scholar](#)

- Mellor DJ. Moving beyond the “Five Freedoms” by Updating the “Five Provisions” and Introducing Aligned “Animal Welfare Aims”. *Animals*. 2016; 6(10):59. <https://doi.org/10.3390/ani6100059>
- Murthy R, Bearman G, Brown S, Bryant K, Chinn R, Hewlett A, et al. *Animals in healthcare facilities: recommendations to minimize potential risks*. *Infect Control Hosp Epidemiol*. (2017) 36:495–516. doi: 10.1017/ice.2015.15  
[PubMed Abstract](#) | [CrossRef Full Text](#) | [Google Scholar](#)
- Royal College of Nursing *Working with Dogs in Health Care Settings* 2019  
[Working with Dogs](#) | [Publications](#) | [Royal College of Nursing \(rcn.org.uk\)](#)
- Serpell J., Kruger K., Freeman L., Griffin J., Ng Z. *Current Standards and Practices Within the Therapy Dog Industry: Results of a Representative Survey of United States Therapy Dog Organizations*  
Front. Vet. Sci., 07 February 2020 | <https://doi.org/10.3389/fvets.2020.00035>
- Shepherd K. Development of behavior, social behavior and communication in dogs. In: Horwitz DF, Mills DS, editors. *BSAVA Manual of Canine and Feline Behavior Medicine*. British Small Animal Veterinary Association (2002) p. 8–20.
- Tierärztliche Vereinigung für Tierschutz e.V. (Sept. 2018) Tiere im sozialen Einsatz, Merkblatt Nr. 131. TVT, Bramscher Allee 5, 49565 Bramsche, Germany. (Soon available in English either over TVT or IAHAIO). Translated title: German Veterinary Association for Animal Welfare, Document Nr. 131, Animals in Social Interventions.
- Tierärztliche Vereinigung für Tierschutz e.V. (2020). Merkblatt Nr. 131.4 Hunde und Merkblatt 131.6 Katzen. TVT, Bramscher Allee 5, 49565 Bramsche, Germany. (2021 only available in German: German Veterinary Association for Animal Welfare, Animals in Social Interventions, Document Nrs. 131.4 Dogs and 131.6 Cats.)
- Winkle M., Johnson A., Mills D. Dog welfare, well-being and behavior; considerations for selection, evaluation and suitability for animal-assisted therapy. In *Animals* 2020, 10, 2188; doi 10.3390
- Wirth, S.; Gebhardt-Henrich, SG.; Riemer, S.; Hattendorf, J.; Zinsstag, J. and Hediger, K. *The influence of human interaction on guinea pigs: Behavioral and thermographic changes during animal-assisted therapy*. *Physiology and behavior* 225 (2020) 113076.
- Ziv G. *The effects of using aversive training methods in dogs – a review*. *J Vet Behav*. (2017) 19:50–60. doi: 10.1016/j.jveb.2017.02.004 [CrossRef Full Text](#) | [Google Scholar](#)

## Practical advice

**ISAAT Species List:** [Microsoft Word - Positive List Species 2018-03-08 redlist \(isaat.org\)](#)

[esaat\\_principles.pdf](#) with instructions about animals in AAI including rabbits, guinea pigs, rats and mice

Series of PetPartners information sheets pertaining to rabbits, guinea pigs, rats and birds:

[Rabbit-and-Guinea-Pig-Behavior-Packet-2021.pdf](#)

[PetPartners International-Rabbits-Guinea-Pigs-Scoresheet.pdf](#)

[PetPartners EvaluationOverview RabbitsGuineaPigs.pdf](#)

[PetPartners Rat-Behavior-Packet.pdf](#)

[PetPartners EvaluationOverview Birds.pdf](#)

[PetPartners International-Bird-Score-Sheet-.pdf](#)

[PetPartners Bird-Behavior-Packet.pdf](#)

[Fish - RSPCA](#)

### International task force members

IAHAIO extends its sincere thanks to the international task force members (small animals visiting and residential) and other experts who contributed their experience and expertise in drawing up and reviewing these guidelines:

Claude Beata, France  
 Katie Bristow, UK  
 Shirley Chen, Taiwan  
 Callie Cozzolino, USA (co-head)  
 Joan Dalton, USA  
 Vangelis Diamatakos, Greece  
 Lisa Glenk, Austria  
 Marine Grandgeorge, France  
 Karin Hediger, Switzerland (co-chair)  
 Jennifer Henley, USA  
 Ann Howie, USA (co-head)  
 Brinda Jegatheesan, USA (Co chair)  
 Taylor Johnson, USA  
 Zenisthon Ng, USA (co-head)  
 Debbie Ngai, Hong Kong  
 Robert Mitchell, USA  
 Christine Olsen, Norway  
 Elizabeth Ormerod, UK (Co chair)  
 Agnieszka Potocka, Poland  
 Michal Pregowski, Poland  
 Rainer Wohlfarth, Germany  
 Keiko Yamazaki, Japan

With special thanks to Dennis Turner, Switzerland, for his editorial input and advice.