

Unexpected Requests: Ethical Considerations Related to Support Animals

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There is significant evidence that animals can positively affect individuals' emotional wellbeing and help them function. Despite these benefits, there are restrictions regarding animals, and only those certified to work with individuals with disabilities, can bypass them and frequent public areas that typically do not permit animals. Three federal regulations enable individuals with disabilities to bring animals into areas where they are normally prohibited: Americans with Disability Act (ADA), Air Carrier Access Act (ACAA) and Fair Housing Act (FHA). The complex process of determining that an individual has a disability and a support animal is necessary for their functioning requires a thorough evaluation by a competent mental health provider.

It is important to understand the distinctions among support animals. According to the ADA, service animals are individually trained to perform tasks or provide assistance in completing major life activities for people with ADA-defined disabilities. They are work animals, not pets, trained to consistently demonstrate certain behaviors that are different from natural behaviors (e.g., nudging to move an agitated individual). According to the ADA, therapy animals, Emotional Support Animals (ESA) and companion animals are not service animals. Therapy animals provide affection and comfort to people without a designated disability (e.g., college students during finals). ESA or companion animals are pets who provide therapeutic benefits through companionship and affection, and are not required to have specialized training. These animals are considered support animals.

Increasingly, psychologists are asked to provide documen-

tation that patients need a support animal to help them cope. Following are two ethical dilemmas relevant to these requests with relevant sections of the APA Ethics Code (APA, 2010) highlighted for discussion.

Matt, a 75-year-old cardiac arrest survivor, is a widower diagnosed with PTSD. He is fearful being alone and relies heavily on his cat, Benny, to alleviate his anxiety. Financial constraints require Matt to move and he has finally found an affordable apartment. Matt arrives to session distraught and reports to Dr. W. that the new apartment building will not allow animals without a "doctor's note" indicating that the animal is "essential" to Matt's well-being. Matt asks Dr. W. to write such a note.

Ophelia, a 20-year-old with an anxiety disorder, is transferring to an out-of-state college and moving away from home for the first time. She is worried about feeling overwhelmed and asks her psychologist, Dr. W., to write a letter so that Molly, her terrier, can live with her in the dorms. Ophelia states that she doesn't care if having Molly by her side identifies her as having a disability and potentially alienates her peers.

Patient requests initially may seem straightforward and uncomplicated, but it is important to clarify the purpose and potential ramifications. Dr. W. wants to help both of his patients, but is uninformed about support animals and the evaluation process (2.01). Matt has asked Dr. W. to write a letter stating he certifies that Matt has a psychological diagnosis and cannot function adequately without his cat. Ophelia requests that Dr. W. certify that she will not be able to function successfully in college without the presence of her dog. In both of these cases, Dr. W. would be moving from the role of therapist to the role of evaluator, thereby rendering a recommendation that creates a multiple relationship or conflict of interest (3.05; 3.06). Dr. W. is also concerned about the impact such a multiple relationship might have on his relationships with his patients and sees it as potentially harmful (3.04).

Through continuing education and consultation, Dr. W. confirms that he is not qualified to complete either of these evaluations. The ongoing process of informed consent (10.01) enables Dr. W. to explain the limits of his role as a treating psychologist and clarify the complexities of disability evaluations.

Specifically, disability letters and forms require a forensic specialty (APA, 2011). Instead, he offers his patients referrals to other psychologists with forensic practices. Dr. W suggests that therapy sessions should focus on patient fears and exploring options to alleviate those fears, including the presence of a support animal.

Patients frequently see their psychologists as their advocates and may make certain requests. Psychologists are challenged to maintain appropriate boundaries if their patients make requests that are outside of the psychotherapy role. The ethical dilemmas discussed above regarding requests for documentation verifying patients' needs for support animals, illustrate the process psychologists must undertake in thinking through such requests. Consultation with colleagues knowledgeable in ethics or a call to the CPA Ethics Committee for a free consultation can be useful in thinking through a patient's request.

For a comprehensive article: Younggren, J. N., Boisvert, J. A., & Boness, C. L. (2016, June 2). Examining Emotional Support Animals and Role Conflicts in Professional Psychology. *Professional Psychology: Research and Practice*. <http://dx.doi.org/10.1037/pro0000083>

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On behalf of the California Psychological Association of Graduate Students (CPAGS), I would like to extend my sincere gratitude to the talented and dedicated group of graduate student officers who served for the 2015-2016 academic year, and the incoming student officers who will serve for the 2016-2017 academic year. On July 1, 2016, the incoming officers will begin their term. I am excited by this list of intelligent and dedicated leaders making up the strong CPAGS team. We will strive to expand the students' commitment to psychology and diversity. Our team will take on the difficult, but enriching task of prioritizing culture, social justice, and diversity when making decisions that impact the CPAGS membership. I am appreciative toward Alyssa Aguilar (2015-2016 Chair) and Eric Samuels (2014-2015 Chair) for modeling great leadership, hard work, and integrity, and I hope to pass on such a tradition to this year's team.

Please join me in welcoming the 2016-2017 CPAGS Leadership Team! To learn more about our outstanding group of graduate student leaders, please visit www.cpapsych.org.

My Linh Vo, MA
CPAGS Chair 2016-20 17

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