Characteristics of six recent animal hoarding cases in Manitoba

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Compulsive hoarding has emerged as a treatment-refractory psychological disorder (1–4). Although promising research over the past decade has furthered an understanding of hoarding, the etiology, diagnostic criteria, and associated features of this phenomenon are not well understood (5). A compulsive hoarder has been defined as an individual who has a collection of possessions so large that it encroaches on the amount of usable living space within the residence of the hoarder (5). Animal hoarding is a special manifestation of compulsive hoarding (3). An animal hoarder is defined as someone who has accumulated a large number of animals and who 1) fails to provide minimal standards of nutrition, sanitation, and veterinary care; 2) fails to act on the deteriorating condition of the animals (including disease, starvation, or death) and the environment (severe overcrowding, extremely unsanitary conditions); and 3) is often unaware of the negative effects of the collection on their own health and well-being and on that of other family members (6).

Women are more susceptible to hoarding animals and, on average, the elderly are more prone to collecting animals (3,4,6,7). Animal hoarding was first reported in the medical literature in a 1982 case report of 36 incidents in New York (7). Since then, no study has significantly increased the scientific and medical understanding of the phenomenon. Peer-reviewed scientific papers to date are generally case reports.

Cases were selected from review of the enforcement and investigations files of the Manitoba Chief Veterinary Officer between July 2005 and July 2007. The hard copy investigation files were retrieved and, where pertinent information was missing, the original investigator was interviewed. The individual associated with the hoarding behavior was interviewed if found to be alive, competent, and cooperative. The 6 cases involved 3 investigating officers with 1 individual lead investigator in 4 of the cases.

Case descriptions

Case A
This case involved a middle-aged woman employed full time in a personal care home. She lived with her elderly mother in a 102 m² (1100 ft²) house in which the only usable space at the time of investigation was the kitchen. There were walking paths through the remainder of the house, which was filled with boxes of chattels. This environment met the case definition of general compulsive hoarding. Many cats were present, and the owner did not know the actual number. The individual admitted she did not feel comfortable allowing others to adopt her cats as she felt others would not be able to care for them as well as she could.

The animal welfare concern was lodged by a veterinarian who received 3 different cats on separate occasions, each requiring front limb amputation due to severe injuries consistent with avascular necrosis post-entrapment. The veterinarian reported treating many cats owned by this individual, but seldom was the same cat presented more than once.

Some cats were found in confined areas that did not permit adequate exercise or ventilation. In various areas of the residence...
ammonia levels of 20 to > 100 ppm were recorded (Toxipro Single Gas Detector; Sperian Protection, Smithfield, Rhode Island, USA). Several of the cats were kept in crates while others lived primarily in the basement as a semi-feral population. The basement was littered with debris and cat excrement. A group of 4 cats was housed in a bedroom in darkness at all times. Few were spayed or neutered (actual number not recorded) and the owner stated that the colony had primarily derived from a few individuals. This was supported by the observation of similar appearances. However it was also reported by neighbors that the colony was comprised of individuals having strikingly few were spayed or neutered (actual number not recorded) and the owner stated that the colony had primarily derived from a few individuals. This was supported by the observation of similar appearances. However it was also reported by neighbors that the colony was comprised of individuals having strikingly similar appearances. However it was also reported by neighbors that the owner was actively trapping free roaming cats in the community.

The owner agreed that the cat population had exceeded her ability to provide care. Four were immediately seized from the premise due to acute poor living conditions and 61 free roaming cats were voluntarily surrendered and removed on the initial capture attempt. From a random sample of 6 cats, 2 tested positive for feline leukemia virus and 1 was afflicted by the feline immunodeficiency virus. Of this cohort, 62 were euthanized as intractable individuals who were unsuitable for adoption. In 8 cats sent for postmortem examination, respiratory and ocular mucous membranes showed minimal signs of irritation. Histologically, tracheal lesions found in 1 cat could have resulted from exposure to high ammonia levels. Three days after the initial removal, 17 additional cats had emerged from the refuse stored in the house. These animals were trap captured and removed over the next 72 h.

The woman expressed a desire to obtain custody of 4 original cats. She asked members of her community including patients from the personal care home where she was employed, her supervisors, and an individual from a veterinary clinic to give her letters of reference, giving their support to have the animals returned to her. No animals were returned.

Case B

In this case, a woman was found sharing a house and yard with 48 cats and 8 dogs. The animals were primarily kept in a restricted area in the house, which smelled of ammonia and lacked adequate ventilation. The floors were littered with excrement and the house was in disrepair. Most of the animals had mats in their coats due to lack of regular grooming and dry areas for sleeping. Several of the animals were sneezing and appeared to be congested, suggesting upper respiratory tract infections. The owner admitted that diarrhea was a problem in the population and suggested that it was related to an abrupt change in feed.

This individual was not co-operative with enforcement staff and when she became aware that the animals were to be seized, she took 17 cats and 1 dog to a nearby veterinarian to have them euthanized. She indicated that no one could care for them as well as she could and that they were better off dead. The next day, animal protection officers (APOs) went to her house; she was absent, and she had delivered 13 cats and 2 more dogs for humane euthanasia. She agreed to voluntarily relinquish the remainder of the animals on the condition that they be euthanized immediately. The remaining animals were euthanized.

A follow-up inspection a year later showed the woman had 3 cats living in the house. The house did not smell of ammonia and the litter boxes were clean. The animals appeared to be bright and alert. The owner was cooperative, and showed the inspectors plans for the cottage she was going to build that would include an outdoor run for the animals. She indicated that once her cottage was finished she would be interested in acquiring a small dog. The owner appeared to be in good health and reported that she felt better than at the previous visit and her improved health and attitude were apparent to the inspector.

Case C

This case involved a woman who admitted that she was financially and physically incapable of caring for her 96 cats and 4 dogs. She was admitted to a psychiatric facility in the local hospital and decided to voluntarily surrender the animals under the direction of her veterinarian and subsequently transferred ownership of the animals to him. The practitioner then contacted the enforcement branch for assistance.

The cats were primarily outside and had access to outdoor buildings for shelter. In the initial capture and removal attempt 66 cats were intractable and were euthanized; 9 tractable cats were relinquished to the care of an animal shelter; 10 cats were taken by the veterinarian involved for further evaluation for adoption; and 4 dogs were transferred to a separate animal shelter. Several days later, 10 more cats were captured and transferred to the veterinarian involved.

Case D

This case was initiated by the movement of an elderly woman into a nursing home leaving the husband and mentally disabled son in the home. The husband asked the municipality in which they resided for assistance in trapping and removing a colony of cats. No assistance was forthcoming at the municipal level. The husband and son's mental health care worker contacted the provincial enforcement branch and reported that neither the man nor his son was financially or physically able to provide the cats with adequate care.

The enforcement branch removed 26 cats from the house. The cats lived primarily in the house and had access to the outside. Food and water were available to the cats; however, there were no litter boxes and the floor was littered with excrement. The cats were in acceptable body condition and health with the exception of 25 individuals that had ear mites.

At a follow-up inspection the next year, no cats were found in the residence. The mother had passed away prior to this inspection. The house did not have electricity, but otherwise seemed to be clear of debris and clutter.

Case E

This case involved an elderly woman who hoarded rabbits. The first complaint was made by a neighbor who reported outdoor grazing of rabbits. At initial inspection in the summer, rabbits were found in cages on the ground outside. The cages were covered in vapor barrier plastic that was weighted by rocks for rain protection. The individual assured the officer that there were no rabbits in the house. Entry to a residence under the
powers of The Animal Care Act (Manitoba) requires a warrant. The outdoor rabbits were in fair condition and the officer gave the individual recommendations to better care for the animals. Several months later, several rabbits were brought into a veterinary clinic with various injuries, and the veterinarian recognized that there could be a problem involving animal abuse and that the owner may have a mental illness. The veterinarian reported the case to the authorities. As well, an independent report from a pet store indicated the individual would purchase rabbits and within a few days call to say they had died and requested replacement rabbits. As a result, the pet stores stopped selling to her.

The individual was highly combative when interviewed by an enforcement officer. The individual felt that people were “out to get her,” and that she was the subject of racial prejudice. She complained that people should “mind their own business.” Inspection of the residence was negotiated, and 34 rabbits were found in cramped cages in very poor hygienic conditions. The cages were in the basement near the furnace and water heater. There was no ventilation in the basement and the furnace room was extremely hot.

The environment of the house met the definition of general compulsive hoarding, with piles of food items, ornaments, and cleaning supplies. There were only small paths to walk on and no room in the house was fully functional.

The primary investigator reported that the individual had posted a newspaper advertisement of rabbits for sale and adoption. After speaking with several people who had responded to the advertisement, no individual could be found who had purchased or adopted a rabbit from this individual. When questioned, she reported that she had not sold any as she felt no one was fit to care for her rabbits. One of her business plans related to the officer was forming a rabbit circus that would allow her to charge admission.

As cooperation of the individual was unlikely, the animals were seized under the Act. On the date of execution of the seizure only 10 rabbits were found. The woman claimed to have sold or given away 21 rabbits. A municipal police officer independently reported witnessing the woman releasing a rabbit in a public park.

In an attempted follow-up investigation a year later, the woman declined to be interviewed. The original mental health care worker remained with the case and reported the individual still actively grieved the loss of her rabbits. The health care worker was unable to provide any information concerning whether or not the individual had more animals in her possession, citing medical confidentiality.

Case F

In 2004, an elderly man was found in possession of 41 horses. One horse was unable to stand and was immediately euthanized, and another single carcass was found. These carcasses were sent for necropsy. Sixteen horses were in poor body condition with many being extremely thin. The surviving horses were seized and removed to an assembly point for feeding and care. Early in the re-feeding period 8 additional horses died, as has been previously reported for horses suffering prolonged starvation (8). The 2 carcasses sent for necropsy showed severe emaciation and serous atrophy of fat. Both horses had histological signs of severe venuous arteritis of the mesenteric artery and there was no evidence of dental maintenance.

The owner was highly combative and denied the assessment of the inspecting veterinarian and the pathology report. He insisted that the horses that appeared unfit were only in that condition due to poor weather which had prevented his pastures from growing lush grass. He felt that most of the horses were in good condition. He credited the companionship of the horses as the reason he stopped smoking and drinking. He pleaded to have the horses that were in good body condition returned to him and said that once the weather improved he would be able to give them better care. The individual made a passionate plea to the Minister of Agriculture and was allowed to purchase 10 of the horses at auction.

A follow-up investigation a year later showed that the individual had 12 horses. The animals were in good condition. However, in 2007 the owner was again inspected and there were 28 horses on the property. Of these horses, several were thin and 3 were tethered to a rail. The owner explained that 2 of these horses did not get along with the rest and 1 was a stallion. No water or feed was available to them. The individual was ticketed under the provincial offence “to tether a horse without supervision.” In the winter of 2008, 31 horses were present and the 2 horses that had been tethered had been moved to a different area. All animals appeared to be in good body condition.

Additional follow-up investigation in early summer 2008 showed 23 horses on the property. All appeared to be in good body condition; however, 12 were kept in very small enclosures. Nine yearlings were covered with mats and mud. Water was available to the animals; however, food was not observed. This individual did not ride, drive, or train these horses. The primary reason for the herd population increase was field mating and the birth of foals.

Discussion

Veterinarians can play a critical role in identifying animal hoarders and thus it is important for veterinarians to understand the process of hoarding and recognize individual animals that may be part of a hoarding situation. Many experts have offered guidelines that can help veterinarians decide if a client is a potential hoarder. These include repeated visits of numerous individual animals that are parasite-ridden and have evidence of on-going contagious diseases indicative of confinement in filthy conditions, with very few, if any, animals being brought in for old age complications such as cancer or heart disease (9). These individuals are often not willing or unable to provide routine vaccinations and parasite control (4). It is possible that they will use other veterinarians in order to decrease suspicion, thus it is important to consult with other veterinarians if suspicions have been aroused (9). Often these individuals cannot or will not state how many animals they have and will show an active interest in rescuing more animals (9).

Some hoarding situations may include exotic species and it is important to know the legal status and husbandry of these animals (10). An understanding of all the potential zoonotic diseases is essential in order to decrease the risk of infection (10).
As well, until proven otherwise, animals from a hoarding situation should be considered contagious to other animals and should be isolated. Precautions, such as sedation, may be needed to deal with animals that are not properly socialized. Veterinarians should make complete examinations of each animal for potential court proceedings (10). These records must be unambiguous and often labeled photographs are required with textual documentation. It is important for veterinarians to know when it is appropriate to euthanize an animal, and they should review methods on how to euthanize exotic creatures (10). The environment in which the animals are kept should be photographed and described as the environment is intimately linked to the health of the animals (10). Such details as the availability of food and water should be noted.

Veterinarians should be aware that there are several potential avenues for intervention including violations of local building codes (10). Elder neglect or child abuse prevention programs may also offer means of intervention (10). Lockwood (4) suggests that veterinarians visit the individual’s home in order to see the living conditions. Veterinarians may be able to gain help from appropriate agencies including the Health Department, wildlife agencies, Aging and Adult Protective Services, Child Protective Services, Mental Health, Sanitation, Zoning, Code Enforcement, and Hazardous Waste Management (10). Societies for the protection of animals are often also engaged in either their own animal rescue mandate and/or their law enforcement mandate.

Veterinarians and animal welfare staff implementing animal removal from hoarding situations should be aware there may be a risk of ammonia toxicity. In Case A, ammonia levels ranged from 20 to >100 ppm. The Manitoba Workplace Safety and Health Division indicates that threshold limit values (TLVs) for a healthy individual should not exceed 25 ppm over an 8-hour period (11). If exposure exceeds 8 h or the individual is elderly or has respiratory problems, the TLV should be decreased. For short-term exposure (15 min), the recommended TLV is 35 ppm.

Veterinarians should be wary of enabling the hoarder (9). This can be done innocently by calling the individual if an animal needs a home or giving out free samples that can help the person take on more pets. Veterinarians should also be aware of this condition in their employees and themselves. Often people working at shelters or veterinary clinics will want to save as many animals as possible and they may need to be reminded that they cannot save every animal by taking it home.

Two methods of classifying hoarders have emerged based on objective information available to an inspector at the time of evaluating a specific situation. A utilitarian approach to understanding and classifying cases has been developed by The Hoarding of Animal Research Consortium (HARC) at Tufts University (12). An alternative model of understanding human cognitive functioning around hoarding has been proposed by Vaca-Guzmen and Arluke (VGA) (13). Veterinarians should be familiar with these classifications in order to determine, through discourse, if their client is a potential animal hoarder (4).

The HARC classification divides hoarders into 3 categories: the overwhelmed caregiver; the rescuer hoarder; and the exploiter hoarder. The overwhelmed caregiver normally has the capacity to provide good care for the animals but due to an unanticipated incident, such as a death in the family or personal injury, has become overwhelmed. Such caregivers have a strong emotional attachment to the animals and tend to acquire more animals passively. These people tend to be withdrawn from the community. The overwhelmed caregiver will acknowledge there is a problem and try to minimize it rather than deny it. This type of hoarder is generally cooperative, shows respect for the system, and tries to comply with recommendations. Cases B and C showed characteristics of an overwhelmed caregiver.

An HARC rescuer hoarder is someone whose desire to help animals has turned into an obsession leading them to actively seek out more animals. They start out being able to care adequately for the animals; however, as the number rises, their capacity to provide even minimal care is exceeded. Rescuer hoarders tend to not want to cooperate with agencies trying to help as they feel they are the only ones able to care for the animals. They are not necessarily isolated from the community and may have a network of enablers who drop off animals in need of care. Case A involved an individual who fell into the category of a rescuer hoarder.

Exploiter hoarders actively acquire animals to fulfill their own needs and they are unable to exhibit empathy for the suffering of the animals and other people involved. They tend to have sociopathic tendencies, may have an extreme need to be in control and are likely to hinder investigations. They believe that they have superior knowledge of the animals and do not comply with recommendations as they feel they are caring for the animals adequately. The exploiter hoarder can be manipulative and is good at creating excuses and diversions. The individuals in cases E and F were characteristic of animal exploiters. Both were unaffected by the suffering of the animals in their possession, and were not cooperative with animal protection officers. One (Case E) went so far as to threaten to hurt one of the officers if the rabbits were taken. Both individuals used the animals for personal gratification; one (Case E) in monetary terms, and the other (Case F) in emotional terms.

The person in Case D was not characterized under the HARC or the VGA classification system, as the hoarder had died prior to the follow-up investigation and was not present at the time of animal seizure. The remaining family members were clearly overwhelmed caregivers.

The alternative novel VGA approach to understanding the phenomenon of animal hoarding is based on a single study of media reports, and examines the types of excuses and justifications hoarders use to explain their behavior as reported in the media (13). In the VGA model, justifications act to neutralize the circumstances by having the individual accept responsibility for the act, but deny the severity of the situation (13). Some individuals assert that their profound love of the animals negates moral wrong-doing. Another justification, termed the “Good Samaritan,” is characterized by the argument that positive intent justifies the negative outcomes of their actions. The 6 cases discussed in this manuscript were characterized by many of the explanations, justifications, and excuses previously described in the literature. In this series of cases excuses were used more
often. However, unlike the results of the VGA study, many of the cases used multiple excuses in conjunction with justifications; Case E being the only case in which a single justification was used.

These VGA and HARC models converge in some areas. For example, the VGA-Good Samaritan is very similar to the rescuer hoarder of the HARC model as in both instances the individual states that the animals are being saved from death and that they are in fact doing a noble deed (12,13). Difficulty of the task and appealing to accidents are excuses under the VGA model which are similar to the overwhelmed caregiver of the HARC model.

One major difference between the models is that the VGA model does not describe the callousness of the exploiter hoarder of the HARC model. This is reasonable because the media, the source of information for the VGA model, may not be able to identify callous behavior as easily as reports from experienced enforcement officers which provide the foundational data for the HARC model. It is unlikely that an individual hoarder will describe herself or himself as callous to the media.

This series of cases was difficult to compare due to lack of systematic investigation and data collection by the various inspectors. Recidivism was documented or suspected in 50%, as has been previously reported (14,15). Previous authors have suggested that a comprehensive response to animal hoarding should encompass several organizations including health and animal welfare related agencies (3,6,7,10).

Animal hoarding remains a poorly understood human behavior, and veterinarians should be aware of this when dealing with clients. In this series of cases the local practitioner was frequently involved in the original identification of the incident. It is also pertinent to note that with Canada’s aging population, hoarding cases may increase in prevalence. It is crucial to educate the appropriate agencies to ensure that hoarding cases are dealt with in a way that is beneficial to the animals, the hoarder, and the professionals involved.

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