



How Dangerous is This Dog?

Diagnosing and Assessing Aggression Involves Both Dog and Pet Parent

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WE'VE ALL HAD EXPERIENCE WITH AN AGGRESSIVE DOG. Regardless if it was an offensive or a defensive aggressive act, as the owner, vet tech, trainer, shelter staff, rescue, or behavior consultant, some difficult decisions will have to be made. The variety of reasons, or the "whys" of aggressive behavior can be due to temperament, emotional, or environmental issues: poor breeding, genetics, lack of socialization, aversive training, abuse, neglect, or any combination of them all.

There can be physical components of aggression as well: health issues, pain, terminal illness, or trauma. This article is not about the "whys" of aggression, however, but about "what" do we do now? How do you assess the situation? Euthanasia is the all too common answer. In the United States, approximately one to one and half million dogs were euthanized in 2017. According to the American Veterinary Medical Association, *US Pet Ownership and Demographics Source Book, 2012 Edition*, approximately 10 percent of dogs brought to shelters are due to "behavior" problems. An educated guess is that at least half of those were due to aggressive behavior.

Assessment; Gathering Information:

Proper assessment(s) could lower the euthanasia rates as some dogs have not yet crossed the red line and rehabilitation is certainly worth a try. Regardless of "how" these dogs came to be or "how" this dog landed in your world, the bottom line is that the dog is hurting emotionally, and the caretaker is under stress. As professionals, if our job is to help both the dog and owner, caution must be made to be as accurate and as objective as possible. Our emotions must be held in check, with professional objectivity paramount. Keep in mind not only the obvious problems of the dog's potential for causing harm and the liability risks, but the dog is living in a world of emotional stress and distress.

Assessing the intensity, frequency, and duration of the stress is critical in your decision making. On a scale of 1-10 how high is it? How consistent? How many times a day does the dog exhibit stress behavior? How long does it take for him to settle and feel safe? What is the overall quality of life for both the dog and the caretaker or pet parent? Are they living on edge or in fear? Is a liability issue looming on the horizon? What are the safety concerns for those around him? Can the safety protocol be managed; how fail safe, for how long, and in what situations? What is the worst possible scenario should the management protocol fail? A valuable resource on aggression is Steven Lindsay's *"Handbook of Applied Dog Behavior and Training: Etiology and Assessment of Behavior Problems, Volume 2."*

The absolute first question for you to ask is: Is this dog dangerous? If the answer is yes, then your job is to educate and guide the caretaker into making a responsible decision for everyone concerned: the dog, caretaker, pet parent and society. If the answer is no, then you can proceed to the next category of questions: what would be the skill set required for handling or living with such a dog? Do you need another professional for support and feedback? Based on your training, experience and motivation, are you qualified to work with both the dog and the caretaker or pet parent? If not, then the obvious answer is to refer the client to the professional who can.

How to know if the dog is dangerous?

There is a large spectrum from owners when it comes to declaring that they have an aggressive dog. For example, I had one senior client who was afraid of her dog. He would sit and bark at her. She thought he was being “aggressive” and his future entailed rehoming at best, or, at worst, euthanasia. Upon observation, all he was doing was “talking” to her — it was his way of communicating. She lived a sedentary life and he was bored mindless. Education and an activity plan would have been an easy fix, but she was not motivated nor committed to the dog and choose relinquishment.

On the other extreme was a couple whose husband would not consider euthanasia, even after the dog had bitten several members of the family (young granddaughter included) on multiple occasions. The bite count was in the teens. The intensity, frequency, and duration answers were consistently high. This is a case where your responsibility should be a “no-holds-barred” truth-and-consequences scenario and as a professional, it’s time to bow out.

Concrete Data:

We need to know in which Chi Square cell the dog falls in order to begin an accurate assessment. (The Chi Square statistic compares the tallies or counts of categorical responses between two (or more) independent groups). Obviously, the dog with no warning has lost his bite inhibition and clearly is dangerous. There are four options regarding warning and bites.

I. Bite Chi Square:

Cell # 1: No bite/no warning

Cell #2: No bite/with warning

Cell #3: Bite/with warning. How many warnings before the bite is an important piece of information in your assessment as well as knowing what level (Dunbar Bite Scale) was the bite?

Cell #4: Bite/no warning. How many bites were in one overt act? Did the dog keep charging his target? Did the dog let go easily? Did the dog retreat? How long did it take for him to settle? What level was the bite?

II. Dunbar Bite Scale:

If there is a bite you need to assess the level of bite using the Dunbar Bite Scale.

Level 1: Air snap; this is a warning with no contact.

Level 2: Air snap with skin contact. There might be a red mark or bruise but there is no puncture.

Level 3: One to four puncture holes from a single bite. “Punctures are no deeper than half the length of the dog’s canine teeth.”

Level 4: One to four holes from a single bite. Punctures are “deeper than half the length of the teeth. There is severe bruising where the dog clamped down and/or made slashes in both directions indicating that the dog bit and shook his head.”

Level 5: Multiple level four bites with “deep punctures or slashing due to clamping down, shaking or repeated gripping in an attempt to move the bite to a better advantage.”

Level 6: A fatality occurred

Dr. Ian Dunbar estimates that 99 percent of all dog bites are levels one through three and are mostly ones and twos. Level ones and twos are candidates for rehabilitation. A protocol of desensitization and counter-conditioning should be paired with a management protocol involving environmental controls, training, and supervision. Levels 3, 4 and 5 should be referred to a behaviorist for further evaluation.

III. Aggressive Act-to-Bite Ratio:

Lots of dogs have a history of snarling, snapping, and growling but have never acted on it; i.e., they have never made contact. Conversely, for example, if a dog has made two contacts out of two attempts, then this is a very different, and potentially dangerous, situation. Seeing these answers in a concrete and objective format provides an invaluable tool as a reality check for the professional, caretaker, or pet parent.

IV. Temperament Tests:

There are a number of temperament tests available in helping to assess aggression. However, an overall behavior evaluation must be done as well, which includes asking the questions in the “information gathering” phase, re: the dog’s genetics, socialization or lack thereof, health, living conditions and environment, etc. I call this a Temperament Assessment and Behavior Evaluation or T.A.B.E.

I developed a Pre-Consult Questionnaire that gives the professional an “at-a-glance” snapshot immediately targeting a problem area and what would need to be explored further. To recommend a few other tests Sternberg’s “Assess-A-Pet” is an excellent tool for assessing aggression thresholds in dogs. The Safety Assessment for Evaluation Rehoming; “S.A.F.E.R.” or the “ATTS” by the American Temperament Test Society are also worth consideration.

V. Follow Up Questions:

- History of Bites? Where, (location of bite in the dog’s environment and where on the body of the victim) when, who, why, and how did this happen? In other words, what were the triggers and with whom? Did the victim require medical care? If so, what was the degree of medical care needed? Again, intensity, frequency, and duration of bites, i.e., level of bite(s), number of bites and how long this behavior has been occurring must be recorded for objective evaluation.

- Was medical attention required? If so what type? This could range from a quick tetanus shot to a few stitches to a hospitalization.

- What is the potential for future aggressive acts? Would a management protocol be viable?

Guidelines for caretaker or pet parent:

Making a decision requires a game plan. The dog must be a candidate for rehabilitation. That decision is made from the answers acquired from the assessment information gathering stage. If both you and the caretakers have the appropriate motivation and the necessary skill sets, rehabilitation is certainly an option. If not, you are back to square one as there is absolutely no sense in proceeding.

With aggressive dogs rarely do I consider a Plan B. If it has been determined the dog is a candidate for rehabilitation and Plan A fails, then you must seriously consider if developing Plan B is a viable and responsible option. Certainly, going to a Plan C would seem that professional objectivity has been compromised. At the very least, if you are considering a Plan C, then it’s time for a reevaluation involving the caretaker, veterinarian, trainer and/or behavior consultant. It’s time to re-assess the situation regarding the dog’s temperament, behavior, environment, and owners’ capabilities.

Some excellent questions to ask the caretaker or pet parent are: what are their resources? How much time, energy, and money are they willing to spend? Can they work with and manage this dog safely for life? How motivated are they as a couple, a family, or organization? What is the impact of living with such a dog? Do the costs—emotional strain, time, risk, money—justify rehabilitation? Just as important as their commitment to try, will they be compliant with the protocol? Part of the rehabilitation protocol has to include an ultimate deciding factor of knowing when enough is enough. What behavior or aggressive act would be absolutely too far and too much?

If the worst should occur would euthanasia be considered? If not, why? Explore the reasons. So often it is, “well, he was abandoned as a puppy” or they are burdened by some irrational guilt. Help them work through this with the reality check questions. The “endgame plan” has to be decided upon and committed to before the rehabilitation begins. For example, one more bite even if it is just a Level 2, or just one more attempt, successful or not, might be the last straw. The final question is the coup de grâce: Are they still emotionally involved with this dog? Do they “want to want to”? Can they live with and manage this dog on a daily basis? Asking these questions directly and up front can help give you the answers needed in assessing the dog’s care and quality of life. There is no sense going any further if the answers are no—the decision has been made.

Summary

Yes, these dogs are hurting emotionally; and unfortunately some are harmful. The caretakers are hurting emotionally as well. At the very least, they are concerned and worried; otherwise they would have already dropped the dog off at their local shelter as a relinquishment or their vets for euthanasia. However, most caretakers or pet parents truly love their dogs and will do anything for them. It is not uncommon to hear, “he is so good...except,” “most of the time he is just fine,” or “this just happened out of the blue.” Sometimes the answer can be fairly straightforward. For example, a dog that should not be in a home with small children probably would be fine in an empty nester’s home.

But the reality is that dogs with aggressive outbursts or a history of aggressive acts are not adoptable and the odds of them getting re-homed are slim to none. The environment they presently find themselves, unfortunately, is their last chance. Most of the time it is a loving and responsible home and it is heartbreaking to observe. Even with that knowledge, we must not let our emotions or rationalizations cloud our judgement. Make a checklist of questions and be direct with the dog’s caretaker or pet parent.

Ask questions that explore realistic answers with viable options. The dog’s temperament, history, environment, and potential for harm are definite considerations, but the caretaker’s ability to manage the dog might be the ultimate deciding factor. If the caretaker fails, the dog could lose his life. All have to be considered as a working unit. Your management protocol must be realistic, easy to implement, and as fail safe as possible. A management protocol works 100 percent of the time until the day it doesn’t. Rely on the answers from the question, “How to Know if the Dog is Dangerous?”



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