ANIMAL-HUMAN POLICY CENTER
COLORADO STATE UNIVERSITY

Colorado Pet Owners Survey on Access to Veterinary Care: Summary of Results

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Executive Summary:

We conducted a series of surveys of Colorado pet owners to understand the extent and type of barriers to accessing veterinary care and the resources that would help pet owners in obtaining this care. Specifically, we surveyed 919 Colorado pet owners approximately representative of the Colorado public in terms of age, gender, and income, recruited through the online panel provider Qualtrics. We also conducted in-person surveys of 290 pet owners throughout the state attending pet food pantries and shelters for low-cost veterinary services to hear from those who might be experiencing the greatest barriers to care.

From the Qualtrics representative pet owner survey, we found that:
- Approximately 82% of pet owners in Colorado view their pet as a family member
- Approximately 8% of pet owners surveyed have never obtained veterinary care. The most common reason why pet owners had never taken their pet to a veterinarian was that it was "too expensive." Pet owners in the Eastern Plains were the least likely to have obtained veterinary care.
- Approximately 28% of pet owners had experienced a time in the past two years where they tried to access veterinary care but couldn't. The most common reasons for not being able to obtain veterinary care were there were "no available appointments at my nearby clinic", "the clinic was not open at a time I could come in", and "I could not afford it." The most common types of care pet owners were trying to get were "emergency care", "annual checkup", and "vaccinations or shots."
- Approximately 18% of respondents reported having trouble getting food for their pet in the past two years. Those that reported having trouble most commonly selected "Food is too expensive" as the reason.

- Approximately 27% of pet owners reported having to give away one of their pets before to another person or animal shelter. When asked why they had to give their pets away, "Moved to a location that didn't allow pets" was the most common answer.
- Approximately 73% of pet owners felt comfortable seeing a veterinarian through a telemedicine appointment. Of those who felt comfortable, 74% would feel comfortable seeing a veterinarian for the first time via a virtual telemedicine visit.
- Respondents rated the following potential programs as being most helpful to enhancing access to care in their community: 1) A new low-cost clinic in your community that can provide sick and emergency care for pet owners; and 2) A program for income-qualified pet owners that pays 80% of the costs of veterinary visits, and pet owners pay only 20%.

In the in-person survey at pet food pantries and shelters, we found that:
- Approximately 14% of respondents had never taken their pet to a veterinarian for any reason. When asked why they had not, the most common reason was that it is "too expensive."
- Respondents were asked if there has been a time in the last two years when they tried to see a veterinarian but were unable to. Approximately 51% of respondents had experienced a time in the past two years where they tried to access veterinary care but couldn't. The most common reasons for not being able to obtain veterinary care were "I could not afford it" followed by "there were no available appointments at my nearby clinic." The most common types of care owners were trying to obtain were "emergency care", "vaccinations of shots", and "annual checkup."
- Approximately 28% of respondents reported having to give away one of their pets before to another person or animal shelter. When asked why they had to give their pets away, "costs of veterinary care" was the most common answer.
- Respondents rated the following potential programs as being most helpful to enhancing access to care in their community: 1) A new low-cost clinic in your community that can provide sick and emergency care for pet owners; 2) A program that provides income-qualified pet owners with vouchers to receive a discount on veterinary services at a nearby clinic; and 3) Funds that you can apply for to cover a portion of the costs of your veterinary visit.

Survey Objectives and Methods:

In July, 2023, the Colorado State University Animal-Human Policy Center convened a task force of key stakeholders in Colorado to collaboratively develop surveys to better understand access to veterinary care and veterinary workforce challenges in the state. The surveys and taskforce effort was requested by the Colorado Governor's Office in response to growing concerns expressed by stakeholders regarding these challenges. The purpose of this collaborative effort was to ensure the perspectives of veterinary professionals and Colorado pet owners were considered in the development of programs and policies on this issue moving forward. The first

part of this work involved conducting a survey of veterinary professionals on their experiences and perspectives with access to veterinary care and veterinary workforce challenges. The full report of this survey and additional details about the task force and convening process is available here.

The second component of this work involved obtaining survey data on Colorado pet owners' experiences with and perspectives on getting access to veterinary care as well as their beliefs on what types of programs and policies would help expand access to care. The task force determined that it was important to hear from two different groups of pet owners: 1) a sample of pet owners that is representative of the broader population in Colorado in terms of demographics, recruited through an online panel provider; and 2) a sample of pet owners that might be experiencing the most barriers to access to veterinary care, recruited in person at pet food pantries and low-cost clinics. The representative sample is important for estimating the scope and type of challenges that pet owners throughout the state are experiencing, while the second sample is important for ensuring that potential programs and policies are able to support those with the most need.

The representative sample was recruited in person via the online panel provider Qualtrics, (Provo, UT), a commercial sampling firm with a licensed online survey platform. Researchers are increasingly using online sampling through firms such as Qualtrics to obtain representative samples because of declining response rates to phone and mail surveys. Qualtrics recruits and screens potential respondents from existing pools of online survey-takers contacted through panel partners. Qualtrics asked each potential respondent if they would be willing to participate in a survey; to avoid selection bias, they were not told about the topic of the survey. Potential respondents were incentivized to participate in different ways, depending on which panel they were recruited from; for example, panel partners compensate using monetary incentives, game points, gift cards, or other prizes. We adopted a stratified sampling approach to ensure that the sample was representative of the overall Colorado public in terms of age, gender, and income.

Specifically, our target stratification for gender consisted of 51% male, 49% female, and natural fallout (less than 5%) for nonbinary identities, our target age categories were 32% ages 18–34, 34% age 35–54, and 35% age 55 years and older, and our household income target categories were 27% less than $50,000, 29% $50,000 to $100,000, and 44% over $100,000 to reflect the demographic characteristics of Colorado based on 2022 American Community Survey results. We also structured our sampling to ensure we could compare access to barriers across different regions in the state. Specifically, we used equally distributed target quotas of the three Colorado regions: the Front Range (11 counties), Western Slope (35 counties), and Eastern Plains (18 counties), to allow for sufficient samples for comparisons across the different regions. Due to difficulties reaching respondents from the Eastern Plains region, we dropped the geographic region quota during the sampling process. As a sensitivity analysis, we used the "survey" package in R (https://r-survey.r-forge.r-project.org/survey/) to weight the data to be

representative of the true population proportions of the three Colorado regions based on 2020 Census data.

The sample of pet owners who might be experiencing the most barriers to care was recruited through in-person surveying at pet food pantries and low cost clinics throughout the state. We partnered with Colorado Pet Pantry, Annie and Millie's, and the Roice-Hurst Humane Society to survey at the following 11 events which were held throughout the state in September and October 2023:

- Tuesday September 26th, Food Bank of the Rockies/National Pet Awareness day with Colorado Pet Pantry- Denver
- Wednesday September 27th: Colorado Pet Pantry Event at Westside Community Center – Colorado Springs
- Thursday September 28th: Colorado Pet Pantry Event at Lynn Gardens Baptist Church Food Bank – Pueblo
- Thursday September 28th: Colorado Pet Pantry Event at EFAA - Boulder
- Monday October 2nd: Colorado Pet Pantry Event at EFAA Weld Food Bank - Greeley
- Tuesday, October 3: Streetdog Coalition/Annie and Millie's Event at TGTHR- Boulder
- Wednesday, October 4th: Colorado Pet Pantry Event at SECOR at Grace Baptist Church - Parker
- Wednesday, October 4th: Colorado Pet Pantry Event at Mountain Resource Center - Conifer
- Tuesday October 10th: Colorado Pet Pantry Event at We Don't Waste - Denver
- Wednesday October 11th: Roice Hurst Humane Society Low Cost Vaccine Clinic- Grand Junction
- Saturday, October 14th: Colorado Pet Pantry Event at Kids at Their Best, Log Lane Village- Fort Morgan

Surveying at these events involved one of the members of our research team approaching as many attendees as possible and asking them if they would like to complete the survey while waiting in line for services. We had available to participants a version of the survey in both Spanish and English. We also gave potential respondents a postcard with a QR code to the survey that they could use to take the survey online if they preferred.

Both the online representative public survey and the in person survey asked questions about how many and what type of pets respondents owned, whether respondents had taken their pets to a veterinarian, reasons why they had/had not taken their pets to a veterinarian, whether there has been a time in the past two years respondents had tried to take their pets to a veterinarian but couldn't, what barriers prevented them from taking their pet to a veterinarian, whether they ever had to give away a pet and why, and whether a series of programs would be useful for increasing access to veterinary care in their community. The online representative public survey also included questions related to grooming, pet food, pet insurance, and whether respondents

would be interested in using telemedicine or seeing different types of veterinary professionals besides a DVM. We used a couple of questions to screen participants in both surveys to pet owners; specifically, both surveys asked if respondents currently owned or cared for a dog or cat or had owned or cared for a dog or cat in the past two years; if they selected "no," their survey was terminated.

Representative Public Survey- Description of the Sample:

We received a total of 919 responses from the Qualtrics panel. 279/919 (30.4%) of respondents were from the West Slope, 526/919 (57.2%) of respondents came from the Front Range, and 114/919 (12.4%) came from the Eastern Plains. According to 2020 Census Data, 12% of the Colorado population lives on the Western Slope, 3% live in the Eastern Plains, and 85% live in the Front Range. The following table displays the sample proportions of three demographic variables used to target a representative sample of Colorado compared to 2022 American Community Survey Census estimates for those variables.

Demographic	Online Sample	Census Estimates
Gender Man Woman Nonbinary	431/914 (47.2%) 478/914 (52.3%) 5/914 (0.5%)	51% 49% <1%
Age 18-34 35-54 55+	263/919 (28.6%) 327/919 (35.6%) 329/919 (35.8%)	32% 34% 35%
Household Income Less than $50,000 $50,000-$100,000 Over $100,000	296/919 (32.2%) 282/919 (30.7%) 341/919 (37.1%)	27% 29% 44%

427/919 (46.5%) of the sample had a bachelor's degree or higher amount of education and 378/916 (41.3%) reported receiving or having a family member receive government benefits/assistance (SNAP, Medicaid, unemployment insurance, housing assistance, SSI, SSDI, etc.) in the last year. According to 2022 American Community Survey data, 45.9% of people over 25 years old in Colorado have received a bachelor's degree or higher degree of education, 7.1% of families have received Supplemental Security Income (SSI) and/or cash public assistance income in the past twelve months, and 8.9% live below the poverty level.

A total of 494/919 (53.8%) of respondents currently owned or regularly cared for a cat, 730/918 (79.5%) currently owned a dog, 305/918 (33.2%) had owned or regularly cared for a cat in the past two years that they no longer had, and 443/919 (48.2%) had owned a dog in the past two years that they no longer had. On average, respondents reported currently owning or caring for 2.0 cats and 2.3 dogs and having 1.6 cats and 1.8 dogs over the past two years. The average

age of respondents' dogs was 6.3 years old and the average age of respondents' cats was 6.2 years old.

Representative Public Survey- Results:

General Pet Care Behaviors and Beliefs

When asked where respondents got their pets from, the most common answers selected were "Adopted from an animal shelter" 346/991 (37.6%), "Received from a friend or family member" 298/919 (32.4%), and "Bought from a breeder" 211/919 (23.0%). The least common answers were "Other" 38/919 (4.1%), "Internet," 34/919 (3.5%) and "Unsure" 4/919 (<1.0%). A total of 718/919 (78.1%) reported that all of their pets were spayed or neutered while 129/919 (14.0%) reported that some of their pets were spayed or neutered. When asked where they got their pets spayed or neutered the most common response was "Veterinarian's office or clinic" (reported by 510/847 or 60.2%) followed by "Pet was already spayed/neutered when I got the pet" (reported by 213/847 or 25.1%).
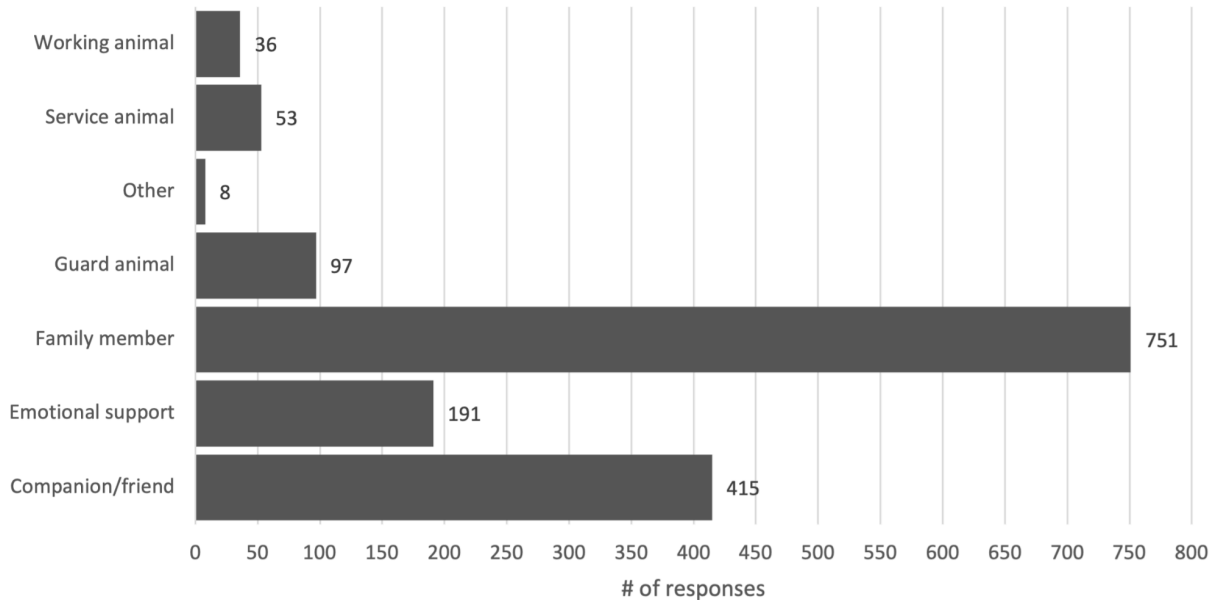
A total of 246/914 (26.9%) reported having to give away one of their pets before to another person or animal shelter. When asked why they had to give their pets away, "Moved to a location that didn't allow pets" was the most common answer (reported by 84/246 or 34.1%), followed by "Pet behavioral issues" (reported by 65/246 or 26.4%), "Experienced housing instability" (reported 44/246 or 17.9%) and "Didn't have time due to change in job/family situation" (reported by 43/246 or 17.5%). Respondents who did have to give away their pet reported most often giving their pet away to a " Friend or family member" (reported by 148/244 or 60.7%) followed by an "Animal shelter" (reported by 86/244 or 35.2%).

Respondents were asked what best describes how they view their pet. "Family member" was the most commonly selected answer 751/919 (81.7%) followed by "Companion/friend" 415/919 (45.2) and "Emotional support" 191/919 (20.8%). "Other" was the least commonly selected answer (8/919 <1.0%).

Which of the following best describes how you view your pet? (check all that apply)

197/246 (80.1%) of respondents who reported having to give away one of their pets in the past describe their pet as a family member.

A total of 498/919 (54.2%) of respondents reported using a grooming service. Those who didn't use a grooming service most commonly reported that they didn't because they do their pet's grooming themself 227/421 (53.9%) or their pet doesn't need it (e.g., their dog's hair is short) 172/421 (40.9%).

A total of 162/918 (17.6%) of respondents reported having trouble getting food for their pet in the past two years. Those that reported having trouble most commonly selected "Food is too expensive" 116/162 (71.6%) or "Difficulty finding/affording prescription or quality food" 35/162 (21.6%) as reasons for why they had trouble getting food for their pet.

A total of 234/919 (25.5%) of respondents reported having pet insurance. Those that reported not having pet insurance most commonly selected "Can't afford monthly costs" 280/685 (40.9%), "Don't think it's worth the monthly costs" 245/685 (35.8%), and "Haven't heard about it or don't know enough" 143/685 (20.9%) as reasons for why they did not.

Current/Past Veterinary Care Behavior

When asked if they had ever taken their pet to a veterinarian for any reason 842/919 (91.6%) reported "yes" and 77/919 (8.4%) reported "no." When weighing the data to be representative in terms of geography, we found similar results, 93.0% reported "yes" and 7.0% reported "no."
  ● Western Slope: 250/279 (89.6%) reported "yes" and 29/279 (10.4%) reported "no"
  ● Front Range: 493/526 (93.7%) reported "yes" and 33/526 (6.3%) reported "no"
  ● Eastern Plains: 99/114 (86.8%) reported "yes" and 15/114 (13.2%) reported "no"

Respondents who had never taken their pet to a veterinarian were asked why they had not, and the most common reason was it is "too expensive" 34/77 (44.2%) and the next was that respondents provide their own care for their pets 28/77 (36.4%).

What are some reasons why you have not seen a veterinarian? (check all that apply)
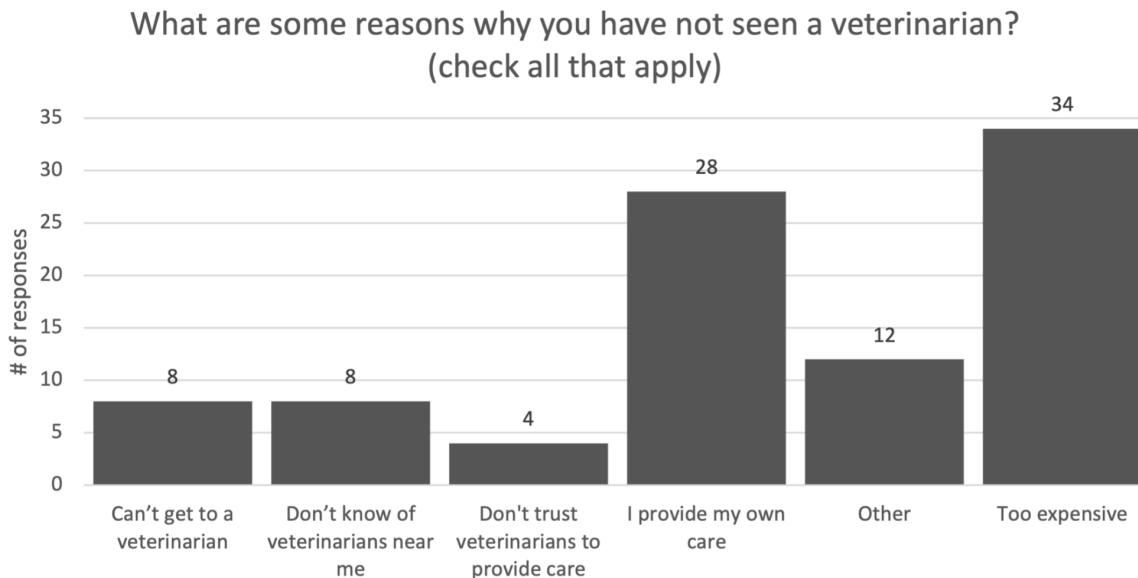
Respondents were asked how they decide when to get veterinary care for their pet, and the most common response was that they "get care when pet is sick or hurt" 570/919 (62.0%) followed by "veterinarian's recommendation" 391/919 (42.5%) were the most common answers. Those who had taken their pet to a veterinarian were asked how they choose which veterinarian to go to; "closest veterinarian" 347/842 (41.2%) followed by "recommendation from friend/family" 332/842 (39.4%) were the most common responses. Respondents who had taken their pet to a veterinarian were also asked how often they go to the veterinarian: in response, 270/841 (32.1%) reported going every 6 months or more often, 357/841 (42.4%) reported yearly, 49/841(5.8%) reported every two years, 146/841 (17.4%) reported only when their pet is sick, and 19/841 (2.3%) reported having been just once.

Respondents who had been to a veterinarian most often reported going to a veterinarian for "vaccinations or shots" 663/842 (78.7%), followed by "annual checkup" 615/842 (73.0%) and "spay/neuter" 385/842 (45.7%).

What services have you visited a veterinarian for? (check all that apply)
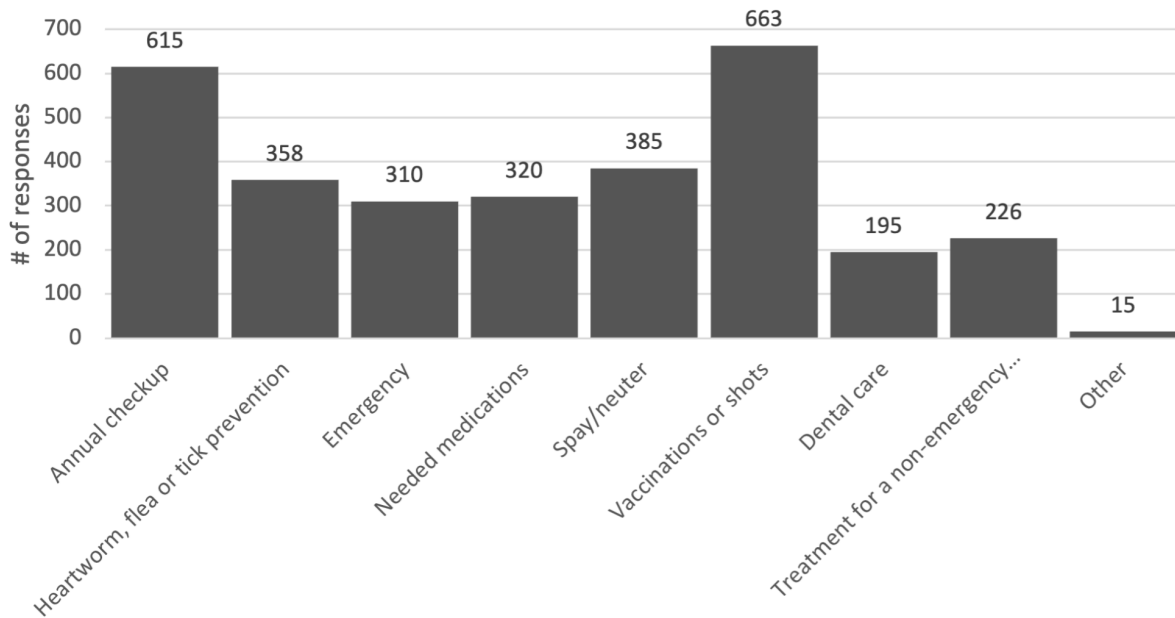
When asked what type of veterinarian they went to, 781/841 (92.9%) reported a "veterinary clinic or hospital," 95/841 (11.3%) reported an "animal shelter or humane society", 89/841 (10.6%) reported a "pet superstore or pet store," 57/841 (6.8%) reported a "mobile facility or van," 46/841 (5.5%) reported a "community event with veterinarian", and fewer reported "telemedicine" (31/841 or 3.7%) or "other" (4/841 or <1.0%).

Respondents who had been to a veterinarian were asked if it was harder, easier, or about the same to find an appointment to see a veterinarian compared to 3 years ago. In response, 319/842 (37.9%) reported "much" or "slightly" harder, 397/842 (47.1%) reported "about the same," 67/842(8.0%) reported "much" or "slightly" easier, and 59/842 (7.0%) reported that they were unsure.

Barriers to Veterinary Care

Respondents were asked if there has been a time in the last two years where you tried to see a veterinarian but have been unable to. A total of 261/919 (28.4%) reported "yes" and 658/919 (71.6%) reported "no." When weighing the data to be representative in terms of geography, we found similar results, 29.6% reported "yes," and 70.4% reported "no."
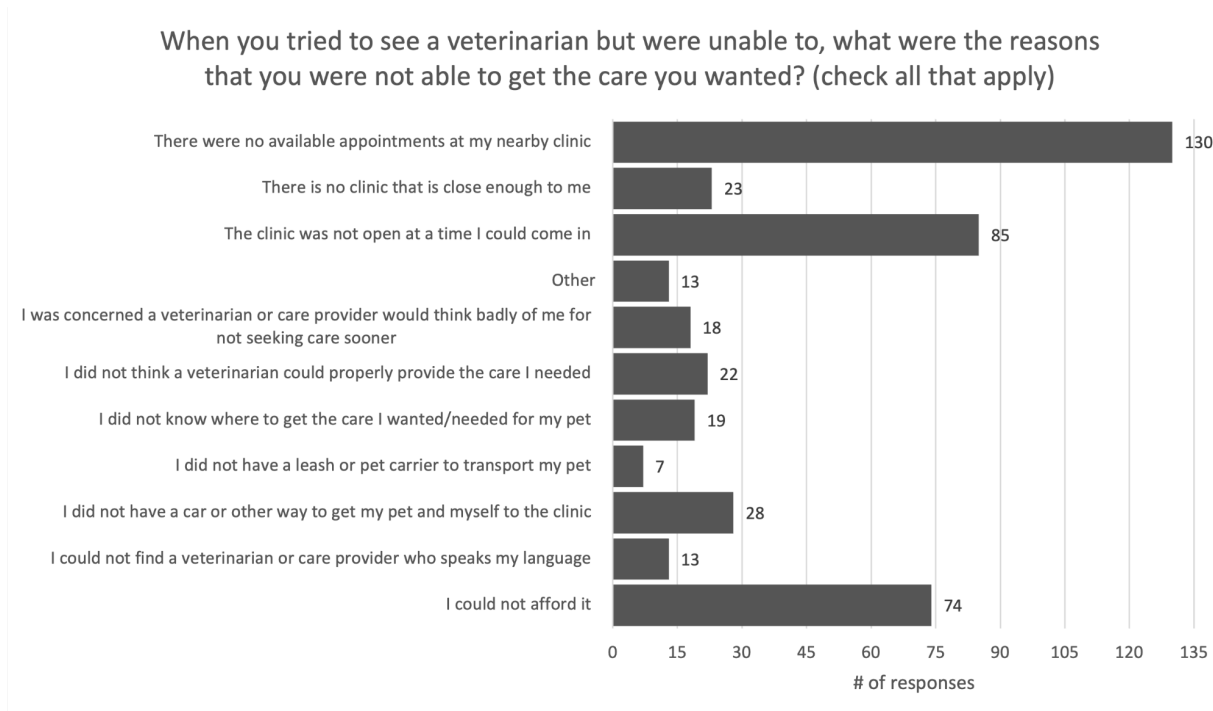
- Western Slope: 66/279(23.7%) reported "yes" and 213/279 (76.3%) reported "no"
- Front Range: 160/526 (30.4%) reported "yes" and 366/526 (69.6%) reported "no"
- Eastern Plains: 35/114 (30.7%) reported "yes" and 79/114 (69.3%) reported "no"

Those who reported "yes" were most often trying to get "emergency care" 84/261 (32.2%), followed by "annual checkup" 78/261" (29.9%), and "vaccinations or shots" 63/261 (24.9%).
- Western Slope: Respondents were most often trying to get "emergency care" 23/66 (34.8%), and "treatment for a non-emergency illness, physical injury, or behavioral problem" 14/66 (21.2%).
- Front Range: Respondents were most often trying to get an "annual checkup" 54/160 (33.8%), and "emergency care" 46/160 (28.8%).
- Eastern Plains: Respondents were most often trying to get "emergency care" 15/35 (42.9%) and an "annual checkup" 11/35 (31.4%)

These respondents were also asked the reasons why they were not able to get the care they wanted. The most common response was there were "no available appointments at my nearby clinic" 130/261 (49.8%), followed by "the clinic was not open at a time I could come in" 85/261 (32.6%), and "I could not afford it" 74/261 (28.4%).

When you tried to see a veterinarian but were unable to, what were the reasons that you were not able to get the care you wanted? (check all that apply)

By income level:
- Less than $50,000
  - 39/81 (48.1%) reported "There were no available appointments at my nearby clinic"

- - 38/81 (46.9%) reported "I could not afford it"
  - 20/81 (24.7%) reported "The clinic was not open at a time I could come in"
- $50,00 to $100,000
  - 36/77 (46.8%) reported " There were no available appointments at my nearby clinic"
  - 28/77 (36.4%) reported "I could not afford it"
  - 23/77 (29.9%) reported "The clinic was not open at a time I could come in"
- Over $100,000
  - 55/103 (53.4%) reported "There were no available appointments at my nearby clinic"
  - 42/103 (40.8%) reported "The clinic was not open at a time I could come in"
  - 12/103 (11.7%) reported "I did not think a veterinarian could properly provide the care I needed"

Respondents were then given space to share more information about any difficulties they have experienced trying to see a veterinarian for their pet. Responses included:
- Paying for it and the location of the office
- It is hard to find appointments at new vets when I move. We move frequently and I always have to call around to a few places before I can find one with appointments available within about 6 months
- My dog woke up with a severe abscess tooth bulging through her cheek, we called every vet within a 25 mile radius... #1 no one had any er appts and #2 if they did, the cost was 2 mortgage payments!
- Just the cost. The low cost clinic fills up fast so you have to be available when they have a slot. I have had to take to a regular vet before which was so expensive because the clinic was full
- Have to wait a lot longer for an appointment than in the past
- Most problems concern that I live on a fixed income and the charges are far too high
- Have to wait a lot longer for an appointment than in the past
- It may be a few days longer than I want before I can get an appointment with my regular vet
- They are constantly booked out months in advance. I try to be proactive and schedule a routine check up in advance.
- The cost is the biggest problem. And the vet always wanting payment in full at the end of the visit, with no option to be billed. And no sliding scale fee for those who need it or understanding I'm in times of emergency when your pets life is at risk and you are short on funds at the time.
- Vet prices have gone up
- Times available are limited
- No access to free vaccinations

- The distance/too far away
- The primary difficulties that have arisen from trying to see a veterinarian is attempting to schedule an appointment at a time that is convenient.
- Trying to get an emergency or quick appt when I'm not working is hard.
- Appointments have been backed up, when I call appointments are 3-4 weeks out
- Dog needs an allergy med once a month. I push it out to every 3 months as its so expensive. My dog does well until the third month and then she has to get her med
- You can rarely get an appointment right away. Usually the closet appointment is 1-2 weeks out. And not in the city you're in.
- No difficulties, but my friends and neighbors have had difficulty. They are being told they are only making appointments for customers who have been in within the last three years. This was due to a staff shortage.
- Finding places that take new patients is difficult so I drive 2 hours to see my vet. They are very recommended and I love them. But getting one closer to home is hard because it takes 2 to 3 months to get them in with the closer clinics
- The cost is always an issue. Thank goodness our cats are healthy!
- Many of the local veterinarians are too busy and cannot accept new clients
- No emergency vets in the area
- Price cost to much just like human hospitals how can any one afford to take any one or any animal anywhere when it cost to much to take them
- The local options are limited on who to see, they have very limited hours and are super expensive
- The vet was closed so I had to go to another one but they wanted me to wait a few hours however it was an emergency
- They could not help my dog at the clinic near us have to drive 3 hours away from home and they have no appointments
- Lack of after hours or weekend emergency services
- Getting an appointment quickly has been tough, and there's usually a long waitlist for non-urgent cases.
- We used services that would come to our home. This has become more difficult and we have had to take our pets to a local veterinarian clinic
- I also have trouble getting a large animal vet for my horses. Local vets are small animal only and have part time hours and rotating fill in vets
- It is so much more expensive than it used to be. I have no family, my dog is my family, so I have spent much more than I can afford because he has a chronic illness.
- A family dog was hurt and try to take it to the vet. But they wouldn't see him. We didn't have the money to pay.
- Went to a new clinic/vet near my home - they started to become unavailable when we kept refusing all the high-cost unneeded tests, procedures, special diet

food only sold by them, etc. Went back to our original clinic which has been around over 3 decades and they agreed our pets did not need what the "newly minted vet" recommended

- Transportation
- We had a 20 year old cat that went downhill really quickly and we wanted to have her put to sleep as she was suddenly not eating, drinking or able to walk. Our usual vet had no appointments for a week and she was miserable. We found a shelter/animal hospital that was able to see her the next day.
- You cant make payments to the vet. You have to pay 100% on the spot.
- There's not enough around to be seen quickly during an emergency and it's difficult to know what is available and has time to see you
- My dog was sick and seemed to have eaten something bad and I wanted to see a veterinary clinic immediately, but I was unable to schedule something in that immediate timeframe and I was unable to find someone that would help for a reasonable rate
- Difficult to get a vet to make a farm call.
- Both vets that I use were booked when I needed help.
- Not only are they insanely expensive and therefore not accessible for most, but they're also booked out 1-6 months.
- Vet dermatologists were booking 7 months out for new patients
- I had to pay for an emergency visit even though it wasn't an emergency because they had no other appointments.
- We had a new kitten who became ill very suddenly. We called and called but either there were no appts. or the cost to walk in the door was astronomical! Our kitten passed away at home before we could get her to see a vet! So very sad!
- Our small country town of La Junta is a farming town. This town has a lot of farmers and several veterinarian practices available. However, these vets are geared more towards large animal care (i,e, cows, horses, farm animals, etc). Due to there not being a large amount of vets in the area they tend to run at, or near, capacity all year long. [...] We are still looking for a replacement vet that we can afford and that is close enough. Until then we call around desperately looking for care we can afford and go with the cheapest rate that is close enough to drive to.
- Two to three years ago I could not get an appointment at any clinic within a one hour drive. My two dogs got several months behind on annual shots and then we got behind on tags and city licenses as a result also.
- Limited availability of resources for palliative or end-of-life care for pets.
- Concerns about the ethical treatment of animals at certain veterinarian clinics.

Perspectives on Potential Programs/Policies to Increase Access to Care:

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All survey respondents were asked to what extent the following services would be helpful to them or others in their community facing problems getting the care they want or need for their pet. Below are responses.

Proposed Program/Policy	*Number and % Selected "Very" or "Extremely" Helpful*	*Number and % Selected "Not at All" Helpful*
More mobile (traveling)/pop-up veterinary clinics providing preventative care services (e.g., vaccines or shots, dental care) and spay/neuter services in your community on certain days of the month	469/917 (51.1%)	38/917 (4.1%)
A new low-cost clinic in your community that can provide preventative care services for pet owners	639/916 (69.8%)	27/916 (2.9%)
A new low-cost clinic in your community that can provide sick and emergency care for pet owners	684/917 (74.6%)	22/917 (2.4%)
Allowing pet owners to bring pets on public transportation for a scheduled or emergency veterinary appointment	488/916 (53.3%)	91/916 (9.9%)
Ride-shares (e.g, uber, lyft) allowing pets in cars with their owners when going to a veterinary appointment	478/916 (52.2%)	86/916 (9.4%)
A program that provides income-qualified pet owners with vouchers to receive a discount on veterinary services at a nearby clinic.	628/916 (68.6%)	38/916 (4.1%)
A program for income-qualified pet owners that pays 80% of the costs of veterinary visits, and pet owners pay only 20%	653/915 (71.4%)	38/915 (4.2%)
Easy access to information on and help with signing up for pet insurance	505/915 (55.2%)	53/915 (5.8%)
Funds that you can apply for to cover a portion of the costs of your veterinary visit	631/918 (68.7%)	33/918 (3.6%)
Affordable pet health insurance options	636/913 (69.7%)	33/913 (3.6%)
Vaccine clinics at your local animal shelter	632/917 (68.9%)	33/917 (3.6%)

Information on where to access veterinarians that speak languages other than English	384/916 (41.9%)	131/916 (14.3%)
More availability of pet food pantries in your community	525/917 (57.3%)	53/917 (5.8%)
Vouchers for income-qualifying pet owners to purchase quality pet food at a discounted price	581/915 (63.5%)	47/915 (5.1%)
Guidance on where to shop for low cost pet foods and free pet food delivery	541/918 (58.9%)	54/918 (5.9%)
Availability of telemedicine options, where you can meet with a veterinarian on a phone/video rather than going to a clinic in person	514/917 (56.1%)	55/917 (6.0%)
More availability of veterinary appointments in general	562/916 (61.4%)	33/916 (3.6%)
More availability of veterinary appointments outside of traditional working hours (8-5, Monday through Friday)	640/917 (69.8%)	29/917 (3.2%)

Respondents were asked "What other resources or programs could help you and/or people in your community be able to get the veterinary care you/they want or need for your/their pet?" Responses included:

- More affordable options for low income people/Financial assistance programs for low-income pet owners to help cover the cost of veterinary services
- Medicare for service animals
- TeleVet that can prescribe medications such as heartworm
- Veterinarians who will treat pets other than dogs and cats
- Allow payment plans/installment payments
- Help with the cost of euthanasia, at home euthanasia, counseling for losses
- More pet sitters
- Emergency care for nights and weekends
- To get an allowance for your pet when on social security or disability
- Payment help for nail trimming
- More mobile vets who can come to your house/House visits for old or difficult pets
- Free pet food/ SNAP for animal food/more pet food at food banks
- More veterinarians/clinics closer to where I live
- Veterinarians being open hours outside of normal work week (on Saturdays, evenings during the week)

- More low cost clinics in small communities
- TNR, veterinary care for community cats
- More services offered by local animal shelter
- Low cost grooming/bathing options, grooming that is mobile
- Informational resources/online guidance on what is needed for veterinary care annually at different life stages and how to notice when something is wrong with your pet and you need veterinary care
- Free/lower cost spay and neuter
- Help phone line where pet owners can get all the resources or direction on where to go and what to do for their pet/Nurse hotline similar to what human health insurances have
- Housing for people with pets who go to jail
- More affordable options for treatments and medications
- Working with senior organizations to hold occasional seminars on the value of owning/adopting a pet, resources available, choosing a pet, caring for a pet, etc
- Discount to those who adopted a pet from a rescue or inherited the animal
- For an area with no public transportation gas vouchers so people can get to one of the bigger towns that has a vet
- Funds to help low income people with emergency and surgical help
- More 24 hour urgent care facilities/more emergency vets during nights and weekends
- Renters not discriminating if you have proof that the dog is a legit emotional support and service animal
- Transparency in costs prior to the appointment
- Low or no cost transportation to vet clinic
- Allowing public transportation or ride share for pets that are in travel crates or muzzled
- Lower cost emergency care
- Just being able to go to make an appointment soon & not 6 months down the road
- Dog walker vouchers for short term due to medical reasons
- Discounted high quality food especially for senior pets
- Outreach and resources to people experiencing homelessness with pets
- After hours clinic and place to fill prescriptions after hours
- Access to pet dental insurance for teeth cleanings at an affordable cost
- More access to pet insurance
- Initiate a no animal left behind policy where they need to provide the services regardless if they can't pay
- Emergency pet care funding for pet owners when they can't afford it
- Veteran service animal training assistance
- Online forum/website to access specific pet needs

- "I would be overjoyed if these things were available. My dog is like my child, and it is very difficult currently to provide for all his needs."
- Dental and teeth cleaning clinics would be a great service at a reduced price
- More availability and outreach about pet insurance
- Grooming that is mobile
- Have all veterinary students provide community service to low-income areas so they learn how to provide good low-cost pet care/treatments without all the high-tech high-cost high profit procedures that only the wealthy can afford
- Monthly mobile veterinary access at scheduled times
- Free/income based microchipping
- Access to a pet ambulance
- Pet health check up events in the community
- Free care for injured strays brought it
- I have heard an interesting proposal to allow vet techs to be trained to do some of the tasks a licensed veterinarian have been responsible for in the past
- In general I don't want to see the state government get involved with paying for pet care, but I wouldn't mind if it covered limited services such as spaying and neutering and perhaps for emergency services.
- More specialized veterinarians
- More knowledge on telehealth because that seems to be the way of the future where you do not have to bring your animal in, and a licenced veterinary can assist with any specific questions
- Make it more widely known that pet owners can go to CSU Vet school for treatment
- Having more boarding options available, and support for low income household to pay for it. If someone is in the hospital they often have no one who can care for their pet, and boarding is expensive.
- Collaboration with veterinary schools for reduced-cost services.
- Monthly clinics to assist pet owners with how to apply for pet insurance and what pitfalls they present with coverage etc

Comfort with Different Veterinary Professionals Performing Procedures:

All respondents were given the following information:

"The next few questions ask about your opinion on a few ideas that have been suggested as solutions for increasing the availability of veterinary care to more pets. People may have different opinions on these ideas, so we'd like to know what you think about each.

One possible/suggested solution for increasing access to veterinary services when they are wanted is to add different kinds of veterinary professionals. These professionals would be trained to provide some of

the services that veterinarians usually provide while under the supervision of a veterinarian. These include: Registered Veterinary Technicians (RVTs), Veterinary Technicians Specialist (VTSs), and Veterinary Professional Associates (VPAs).

Registered Veterinary Technicians (RVTs) are similar to a registered nurse (RN) in human healthcare. To become a registered veterinary technician, most people graduate from a 2 or 4-year veterinary technology program, are trained in the care and handling of animals, their normal and abnormal life processes, medical and surgical nursing, anesthesiology, diagnostic imaging, and clinical laboratory procedures, pass a minimum competency exam, are licensed by the state of Colorado, and work under the supervision of a veterinarian.

Veterinary Technician Specialists (VTSs) are registered veterinary technicians who have additional training in a specified field of veterinary medicine (e.g., dermatology, dental care) and pass an additional competency exam. They are similar to a nurse practitioner in human healthcare.

Veterinary Professional Associates (VPA) are a new type of veterinary professional that some have proposed creating. VPAs would be similar to a physician's assistant (PA) in human healthcare and would graduate from a Masters of Veterinary Clinical Care degree program, would be trained in clinical case management, and would work under the supervision of a veterinarian.

Some advocate for these professionals to be able to provide some of the services that veterinarians usually provide. They say that having these professionals provide services instead of veterinarians can lead to lower cost of care and the ability for clients to get into appointments faster. Others say that these professionals should not be able to provide some of the services that veterinarians usually provide. They say that these professionals won't have the same expertise as veterinarians so they will not be able to provide care in complex situations."

Respondents were then asked which services, if any, they would feel comfortable having these professionals provide for their pet instead of a veterinarian. Respondents were told to check if they would feel comfortable only having a veterinarian provide the service or if they would feel comfortable having a Registered Veterinary Technician, a Veterinary Technology Specialist, or a Veterinary Professional Associates perform each [check "Veterinarian only," "RVT," "VTS," or "VPA", or "Not sure" for each below]. Below are the number and percentage of respondents who checked each (out of the total number completing the question):

Service	*# and % Selecting Registered Veterinary Technician (RVT)*	*# and % Selecting Veterinary Technician Specialists (VTS)*	*# and % Selecting Veterinary Professional Associate (VPA)*	*# and % Selecting Only Veterinarian (DVM)*	*# and % Selecting "Not Sure"*

Annual exam/check-up	446/918 (48.6%)	361/918 (39.3%)	379/918 (41.3%)	288/918 (31.4%)	110/918 (12.0%)
Vaccine administration	529/911 (58.1%)	467/911 (51.3%)	425/911 (46.7%)	204/911 (22.4%)	88/911 (9.7%)
Spaying	193/911 (21.2%)	169/911 (18.6%)	214/911 (23.5%)	533/911 (58.5%)	78/911 (8.6%)
Neutering	184/911 (20.2%)	168/911 (18.4%)	205/911 (22.5%)	540/911 (59.3%)	81/911 (8.9%)
Dental care (e.g., cleaning dirty teeth)	420/911 (46.1%)	453/911 (49.7%)	424/911 (46.5%)	231/911 (25.4%)	89/911 (9.8%)
Dental surgery (e.g., removing teeth)	188/905 (20.8%)	200/905 (22.1%)	219/905 (24.2%)	500/905 (55.2%)	84/905 (9.3%)
Treatment of non-urgent sickness/medical conditions (e.g., skin rashes, ear infections, lameness)	474/909 (52.1%)	451/909 (49.6%)	452/909 (49.7%)	244/909 (26.8%)	75/909 (8.3%)
Treatment of urgent sickness/medical conditions (vomiting, not eating)	279/889 (31.4%)	247/889 (27.8%)	340/889 (38.2%)	444/889 (49.9%)	79/889 (8.9%)

Respondents were then asked, "What information would help you decide whether you would feel comfortable having a VPA, RVT, or VTS provide services for your pet instead of a veterinarian?" "Knowing that the professional is licensed" 609/919 (66.3%) was the most common response, followed by "Knowing their hands-on technical trainings" 537/919 (58.4%), and "Cost difference in getting treatment from these professionals instead of a veterinarian" 389/919 (42.3%).

Perspectives on Telemedicine:

Respondents were told, "To increase the number of pets that veterinary professionals can care for, some have suggested increasing the use of telemedicine. Telemedicine is the practice of medicine using technology (like a phone or computer) to provide appointments at a distance. A telemedicine appointment would involve a video chat with a veterinarian..." They were then

asked, "Would you feel comfortable seeing a veterinarian through a telemedicine appointment for your pet?" In response 666/919 (72.5%) selected "Yes" and 253/919 (27.5%) selected "No." When weighing the data to be representative in terms of geography, we found similar results, 72.3% reported "Yes" and 27.7% reported "No."

Those who reported "No" were then asked why they did not feel comfortable seeing a veterinarian through a telemedicine appointment. The most common responses were "Concerned about the quality of care versus an in person appointment" 163/253 (64.4%) followed by "I don't know if the care my pet might need can be done with telemedicine" 121/253 (47.8%).

Those who reported "Yes," they would feel comfortable seeing a veterinarian through telemedicine, were then asked "Would you feel comfortable seeing a veterinarian for the first time via a virtual telemedicine visit?" In response 493/665 (74.1%) selected "Yes" and 172/665 (25.9%) selected "No." When weighing the data to be representative in terms of geography, we found similar results, 73.4% reported "yes," and 26.6% reported "no."

All respondents were then asked "What information would help you feel more comfortable seeing a veterinarian through a telemedicine appointment for your pet?" The most common responses were "A list of services that are able to be done through telemedicine versus services that can only be done in person" 658/915 (71.9%) followed by "Cost of a telemedicine appointment versus an in person appointment" 491/915 (53.7%), and "A guide on what is needed and how to use the technology for a telemedicine appointment" 361/915 (39.5%).

Finally, all respondents were asked "Please select the effect that access to telemedicine would have on whether you contact a veterinarian about concerns you have about your pet(s)." In response, 588/919 (64.0%) reported that it would somewhat or greatly increase their likelihood of contacting a veterinarian, 59/919 (6.4%) reported that it would somewhat or greatly decrease their likelihood of contacting a veterinarian, and 272/919 (29.6%) reported that it would have no impact on whether or not they would contact a veterinarian.

In Person Public Survey- Description of the Sample:

We received a total of 290 responses from in person surveying at the 11 pet pantry or shelter events. 19 (6.6%) responses came from an event in the West Slope region, 200 (69.0%) came from an event in the Front Range region, and 12 (4.1%) came from an event in the Eastern Plains region. 231 (79.7%) were taken in person while 59 (20.3%) were taken online. 261 (90.0%) were taken in English, while 29 (10.0%) were taken in Spanish.

Responses by Zipcode
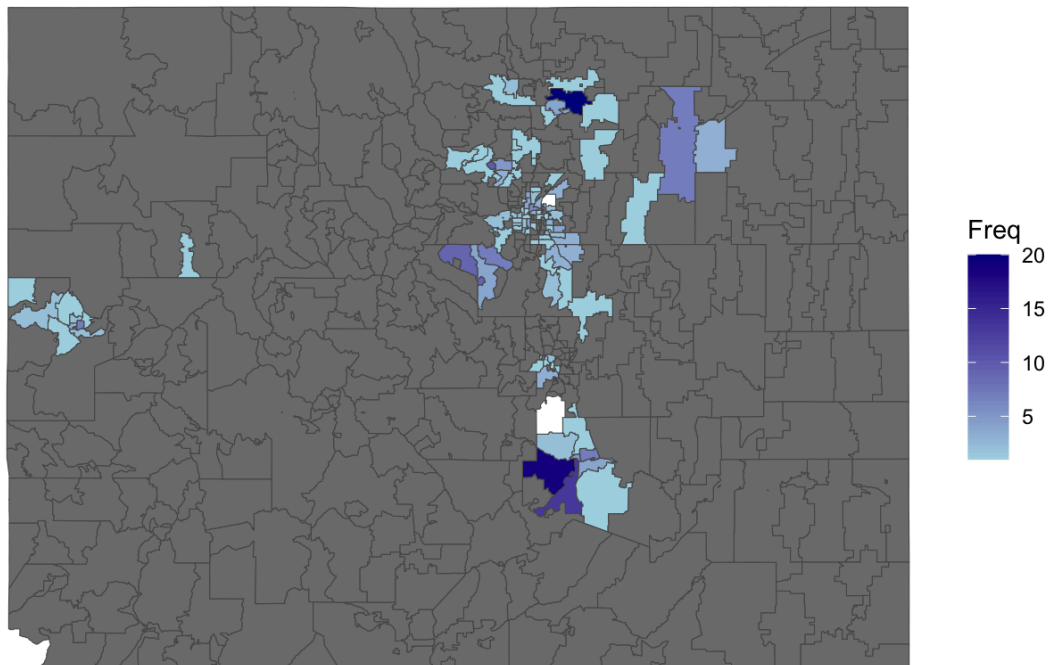
A total of 161/282 (57.1%) of respondents currently owned or regularly cared for a cat, 245/283 (86.6%) currently owned a dog, 104/276 (37.7%) had owned or regularly cared for a cat in the past two years that they no longer had, and 151/274 (55.1%) had owned a dog in the past two years that they no longer had. On average, respondents reported currently owning or caring for 1.4 cats and 1.9 dogs and having 0.8 cats and 1.2 dogs over the past two years.

In Person Public Survey- Results:

A total of 79/285 27.7% reported having to give away one of their pets before to another person or animal shelter. When asked why they had to give their pets away, "costs of veterinary care" was the most common answer (reported by 31/85 or 36.5%), followed by "pet behavioral issues" (reported by 21/85 or 24.7%) and "cost of pet food" (reported by 20/85 or 23.5%).

When asked if they had ever taken their pet to a veterinarian for any reason 245/285 (86.0%) reported "yes" and 40/285 (14.0%) reported "no." Respondents who had never taken their pet to a veterinarian were asked why they had not, and the most common reason was it is "too expensive" 134/154 (87.0%) and the next was "I provide my own care" (18/154 or 11.7%).

Respondents who had taken their pet to a veterinarian were also asked how often they go to the veterinarian: in response, 52/254 (20.5%) reported going every 6 months or more often, 84/254 (33.1%) reported yearly, 16/254 (6.3%) reported every two years, 83/254 (32.7%) reported only when their pet is sick, and 27/254 (10.6%) reported having been just once.
Respondents who had been to a veterinarian most often reported going to a veterinary for "vaccinations or shots" (169/242 or 69.8%), followed by "annual checkup" (131/242 or 54.1%), "emergency" (108/242 or 44.6%), and "spay/neuter" (101/242 or 41.7%).

Respondents were asked if there has been a time in the last two years where you tried to see a veterinarian but have been unable to. A total of 134/264 (50.8%) reported "yes" and 130/264 (49.2%) reported "no."

Those who reported "yes" were most often trying to get "emergency care" (75/179 or 41.9%) followed by "vaccinations of shots" (67/179 or 37.4%), and "annual checkup" (44/179 or 24.6%). These respondents were also asked the reasons why they were not able to get the care they wanted. The most common response was "I could not afford it" (164/198 or 82.8%) followed by "there were no available appointments at my nearby clinic" (41/198 or 20.7%).

Survey respondents were asked to what extent the following services would be helpful to them or others in their community facing problems getting the care they want or need for their pet. Below are responses.

Proposed Program/Policy	Number and % Selected "Very" or "Extremely" Helpful	Number and % Selected "Not at All" Helpful
More mobile (traveling)/pop-up veterinary clinics providing preventative care services (e.g., vaccines or shots, dental care) and spay/neuter services in your community on certain days of the month	207/266 (77.8%)	31/266 (11.7%)
A new low-cost clinic in your community that can provide preventative care services for pet owners	244/273 (89.4%)	9/273 (3.3%)

A new low-cost clinic in your community that can provide sick and emergency care for pet owners	244/267 (91.4%)	6/267 (2.2%)
Allowing pet owners to bring pets on public transportation for a scheduled or emergency veterinary appointment	183/262 (69.8%)	41/262 (15.6%)
Ride-shares (e.g, uber, lyft) allowing pets in cars with their owners when going to a veterinary appointment	178/262 (67.9%)	37/262 (14.1%)
A program that provides income-qualified pet owners with vouchers to receive a discount on veterinary services at a nearby clinic.	245/270 (90.7%)	10/270 (3.7%)
A program for income-qualified pet owners that pays 80% of the costs of veterinary visits, and pet owners pay only 20%	241/272 (88.6%)	16/272 (5.9%)
Easy access to information on and help with signing up for pet insurance	194/268 (72.4%)	36/268 (13.4%)
Funds that you can apply for to cover a portion of the costs of your veterinary visit	231/256 (90.2%)	10/256 (3.9%)
Affordable pet health insurance options	203/255 (79.6%)	21/255 (8.2%)
Vaccine clinics at your local animal shelter	212/249 (85.1%)	17/249 (6.8%)
Information on where to access veterinarians that speak languages other than English	156/243 (64.2%)	51/243 (21%)
More availability of pet food pantries in your community	217/252 (86.1%)	12/252 (4.8%)
Vouchers for income-qualifying pet owners to purchase quality pet food at a discounted price	220/252 (87.3%)	14/252 (5.6%)
Guidance on where to shop for low cost pet foods and free pet food delivery	214/249 (85.9%)	16/249 (6.4%)
Availability of telemedicine options, where you can meet with a veterinarian on a phone/video rather than going to a clinic in person	189/252 (75.0%)	25/252 (9.9%)
More availability of veterinary appointments in general	185/247 (74.9%)	27/247 (10.9%)

More availability of veterinary appointments outside of traditional working hours (8-5, Monday through Friday)	202/247 (81.8%)	25/247 (10.1%)

Respondents were asked "What other resources or programs could help you and/or people in your community be able to get the veterinary care you/they want or need for your/their pet?" Responses included:

- More food banks for animals
- Need grooming with discounted nails etc
- Vouchers for pet check ups
- More than anything, make costs more accessible
- More free vaccine clinics
- Low cost emergency care
- More low cost clinics
- Low cost care for disabled and people who have little income
- Finance/payment plans
- Large corporate donations for meds/food/trimming services
- Rx help/discounts
- Pop up clinics, mobile free services
- Have more angel funds for clinics
- The only rideshare in my neighborhood is pet-free - so is useless to me
- 24 hour emergency phone resource for medical options
- Used to be pet aid = 1/2 price with snap card. Now CSU Spur - much more expensive, no appts
- Pet pantries after hours for workers
- Free pet care for seniors on limited income that need the lifeline
- Lower cost dental care, Quoted $3500 for teeth extraction
- Animal care when I'm in the hospital or ill
- Info on common symptoms of common conditions
- if there were more low income clinics people wouldn't have to put animals down cause they cant afford it
- More emergency clinics in Park County - Bailey Area
- Cremation/end of life financial aid
- Need reasonable prices/let partial payments
- Pet insurance that does not have such rigid stipulations. Even when a pet owner is financially inept and are looking for any organizations that can assist them when, for example, their pet is sick or injured, the pet can be disqualified because they were unable to keep up on normal care thru the years.
- Vet clinics taking new clients or a new clinic
- More feral cat assist
- More low cost programs for dog dental work

- Low cost training for pets
- Pet insurance for low income earners
- Spay and neuter clinic at free or very low cost
- A nurse hotline just for any questions we might have
- More emergency veterinary clinics 24/7

Finally, respondents were then given space to share more information about any difficulties they have experienced trying to see a veterinarian for their pet. Responses included:

- Today my pet is sick I don't know where to bring him that won't charge too much
- Currently I'm not able to afford care due to no income, the high cost [of care] prohibits being able to go to a vet when needed.
- We are not able to get our cats teeth fixed because it would cost over $500 and another has another gum disease she was born with that's painful. we are not able to afford to help them.
- Vet hospitals not being honest about the cost of emergency care, or saying not to worry about the cost we would work it out before care, then after care demanding payment in full, saying the don't take payments + turning it over to collection even though I am paying as much as I can.
- Main thing is cost; it's so very expensive, especially emergencies. Cost up front is hard for most low income [families]
- Not enough vet clinics near me
- Need services for low income + the disabled
- It has all been cost. A shot is so expensive + the cheap clinics don't have availability or are only [available] certain times. We got our cat fixed but no shots because she was too young + now it's pricy.
- Mine is all about the cost + have watched vet costs rise astronomically & required services to have a healthy pet increase also
- Had to put down [my pet] due to way more money then I could afford.
- I am educated and working but need help. Many places treat people with condemnation or as if we are stupid.
- Emergencies and not being seen because there is no payment plan
- More vets should take care of ferals re: spay/neuter/vaccines, injuries [...] I have a hard time finding anyone to help with feral cats. Last year I trapped 23 adult cats - had them spay/neuter & vaccinated. 71 kittens found forever homes. But still am taking care of 15 ferals.
- I had to take out a loan to pay for veterinary care for my dog - took me a long time to pay it off.
- My dog was recently badly injured by another dog, and she needed 1000+ in care. I didn't have the money and also couldn't qualify for their carecredit/other options. Thanks for caring about the fur-babies :)
- If I don't have money they won't see my baby

- We're in survival mode and so are they
- My Great Dane got parvo had to 1) surrender to Humane Society to save his life 2) Dane cut his leg vet wanted 2600$ to treat him then they called humane society claiming abuse because we could not afford 2600$.
- Homeless people are not only financially indigent, they are scared to see a vet for fear the animal will be confiscated when an address cannot be provided, and the clinic assumes a homeless situation. I am constantly getting photocopies of flyers I see in the library so I can bring them back to the street where a lot of my homeless friends live. I wish there were "outside bulletin boards" created that: could fill up and display all the fantastic info I come across. A way for indigent people to pay off their debt, by volunteering or working in exchange for vet care.
- Have to wait to see a veterinarian, more places with 24/7 emergency, can't get help right away for a animal in need
- I couldn't get anyone to come to my house to see my dog cuz we could not move her. We ended up loosing her
- [Clinics are] not accepting new patients
- No appointments and no payment plan for us low income people
- Had to go 60 miles to get large dog spayed.
- My dog was bit by a spider or something and I could not get her into a vet until 4 days. Her whole face was swollen. They just told me to call back if she quit breathing. What good would they be then. :(
- Have had to drive to Springs for emergency life saving care only to have euthanize due to cost
- I lost a beautiful 150 pound german shepard that got denied help due to not be able to afford it. it was devastating
- Cost and availability of vets, worried we would get denied voucher support due to income
- My dog once dislocated his hip no one would see him because [there were] no appointments, I had to reset it [myself]
- No problem seeing a vet - paying is a different story
- I have a diabetic cat that was diagnosed just this month, just for this month I am $2k in debt to try to get him the care he needs.