

Speaking the Language: Practical Guide to Canine and Feline Communication

Ellen M. Lindell, VMD, DACVB
Veterinary Behavior Consultations, PC
Pleasant Valley, NY

Let's face it: veterinarians and technicians are highly skilled at reading body language. Otherwise, being bitten and clawed would be an everyday experience. The subtle postural threats of our patients routinely trigger subconscious shifts in our own behavior as we keep safety a priority.

Subconscious reactions are important but not sufficient. The veterinarian is often in the position of teaching staff members how to recognize that a bite is imminent. Clients also need to be educated, whether in order to safely administer a medication or to manage aggressive behavior within the household.

Accurate diagnosis and treatment of behavior problems requires an accurate assessment of communication. The observed interactions between household dogs will suggest which pet is the aggressor and which is the victim. The pattern and type of vocalization heard during departures will determine whether the diagnosis is separation related anxiety or territorial barking. The location of urine marks can be used to identify the underlying trigger and therefore the ideal treatment for the marking behavior.

The first step then is to learn to interpret the language of our patients. Also remember that communication involves at least two participants. It assumes a sender and a recipient. Consider not only the behavior as exhibited but whether that response is appropriate in the context. Does the animal exhibit the behavior in a repetitive manner or does the behavior change in response to the behavior of the other individual(s)?

Visual communication

Visual signaling can be done rapidly. It is a communication done in a moment and gone in a moment. We can recognize many grades of visual displays, from subtle to intense. Due to conformation, different dog breeds differ in their ability to send visual messages. They may differ in their ability to interpret visual messages as well.

It can be challenging to notice, recognize and identify the subtle postures that dogs and cats exhibit as they attempt to communicate with us and with each other. There are many pictorial guides to canine and feline communication. These references are of course helpful.

But pictures are static. Visual communication is fluid. Pictures don't reflect the posture immediately before or after. And they don't reflect the context. It is important to examine behavioral sequences. This can best be done by observing animals in action and by studying video recordings as will be demonstrated.

Auditory

Auditory signals have the advantage of being transmissible over a great distance. Vocalization is also fluid. The nature of a vocalization will change as the situation changes. For instance, the pitch of an alerting bark may become more rapid as the threat approaches. If a dog is fearful, the intensity of the bark may decrease with the approach, suggesting reduced confidence and perhaps an intention to retreat.

Veterinary staff members are too-well aware of the assortment of vocalizations that our patients exhibit. Common canine auditory signals are the bark, the growl, the howl and the whine. Whines often suggest distress or pain. Howling is of course used to call to others—we have all heard the lonely dog caged in an isolated ward.

Growling can be heard during play but we know it best as a threat. A growl suggests that we might want to keep our distance. Clinically, growling can be our friend—it offers us an opportunity to rethink the way to proceed in a given interaction. By the way, for just that reason, it is best not to punish a growl. That could be an invitation for a bite!

Barking may be the most studied of the canine auditory signals. Much information is conveyed by the frequency, volume, and intensity of a bark. Monotonous barks suggest distress or anxiety. Rapidly changing barks may reflect a more dynamic communication is underway, and that a response by the receiver is expected.

Many vocal patterns have been described in the cat. Clinically, we are most familiar with the growl and hiss as distance increasing behaviors. Most people recognize a soft meow that suggests friendliness. Purr often but don't always reflect contentment. Veterinarians are familiar with the moaning that precedes regurgitation. Cats that vocalize in the night sometimes create a similar sound.

When a client seeks advice about curbing an undesirable vocalization in their cat or dog, it is essential to identify the nature of the vocalization. Treatment for moaning will not be the same as treatment for meowing. Barking is due to separation related anxiety will be managed differently from territorial barking.

It is tempting to try to stop pets from vocalizing without considering that most patients are offering this communication for a reason. Determining the motivation for the behavior is critical or treatment may fail AND patient welfare will be compromised.

Olfactory and pheromones

Our patients' perception of the scented universe is much different from our own. They gain much useful information from things that we can only describe as "gross". We spray air fresheners and light scented candles. Dogs press their noses into urine and feces. Cats gape and dogs tongue as they presumably attempt to transfer material into their vomeronasal organs for processing. We are limited to evaluating pheromones in the laboratory, or by observing the responses of animals when they are deliberately exposed to synthetic pheromones.

Practically speaking, the pheromonal communication that is most significant clinically is urine marking. When evaluating behavioral problems ranging from aggression to housesoiling, it is helpful to consider the location and timing of urine marks. As long as the deposits are made outside the home, it can be fascinating to watch urine-based conversations!

Clinical communication

A discussion of practical communication would not be complete without a reminder that the behavior of the human affects the response of the patient. Staff members need to be aware of how their movements and voices are perceived. When managing cases of aggression, particularly aggression toward people in the household, it is also important to counsel clients regarding which of their seemingly innocuous behaviors might be perceived as threats by a dog or cat.

Communication is complex. Miscommunication is dangerous. We are obliged to look at, listen to, and do our best to understand our patients. Though we are often obliged to smell them as well, most of us are not quite ready to join in pheromonal conversations.