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SYSTEMATIC REVIEW

The physical and psychological health effects of pet ownership among children in China: A systematic review

Xiaoshan Yin*o, Paul Graham Morriso, Fangqing Liu and Joanne M. Williamso

Abstract

Research to date in Western contexts has indicated various physical and psychological health effects of pet ownership among children, but less is known about the role pets play in the health of children in China. The aim of this systematic review was to evaluate the evidence on the effects of pet ownership on physical and psychological health among children in China. A literature search was performed in eight databases for studies that investigated the health and psychological effects of pet exposure on children (operationalized as birth to 20 years) in China, and a quality assessment and a narrative synthesis of results were conducted. Fifty-nine studies published between 2002 and 2021 were included in this review, of which 57 focused on children's physical health issues including asthma and allergy symptoms, *Toxoplasma gondii* infection, animal induced injuries, low birth weight and hypertension, while only two studies focused on children's psychological health. Overall, pet exposure was most often studied as a risk factor for respiratory health, injuries, and *T. gondii* infection among children in China but was also seen as a protective factor for cardiovascular health and for the association between environmental pollution and children's respiratory function. In addition to physical health effects, two studies focused on psychological factors: post-traumatic stress following animal-induced injuries and benefits of reading following a canine-assisted activity. Findings underscore the need for further research examining the effects of pet ownership on children's development and psychological health in China.

Keywords: pets, children, adolescent, physical health, psychological health, systematic review

Introduction

Since interactions between humans and other animals are pervasive in everyday life across time, culture, and history, Human-Animal Interaction (HAI) has gained increasing research attention (Beck et al., 2018). A systematic review (Purewal et al., 2017) found that companion animal ownership has a positive impact on children's and adolescents' emotional development in terms of lower levels of loneliness and higher self-esteem (e.g. Van Houtte and Jarvis, 1995; Rew, 2000; Rhoades et al., 2015); as well as increased cognitive development such as perspective-talking abilities and problemsolving skills (e.g. Maruyama, 2010). Evidence indicates that pet ownership can be a protective factor for children's and adolescents' development, though most research has been carried out in Western contexts and less research has been conducted in China (Melson, 2003; Su and Martens, 2017). Recently, there has been a rapid increase of pet ownership in China, so the influence of companion animals on Chinese children's and adolescents' physical and psychological health is worthy of investigation (Headey et al., 2008).

Pet ownership has the potential to promote children's physical health in various ways (Matchock, 2015). Both adults and children owning pets, especially dogs, are more likely to be physically active than those without pets (Parslow and Jorm, 2003; Timperio et al., 2008). In a study with healthy workers and homemakers aged 18-59 years, there was a positive association between dog ownership and walking duration, with dog owners walking an additional 180 min per week on average (Giles-Corti and Donovan, 2003). However, the actual benefits of pet ownership were also influenced by how much time and how much effort a person spends caring for or playing with pets in the family (Mathers et al., 2010). Additional benefits of pet ownership for adults include lower systolic blood pressure (Friedmann et al., 2013), higher levels of oxytocin (Curry et al., 2015), higher sleep quality, less risk for heart disease (McHarg et al., 1995), and better survival rates among patients with coronary artery disease (Friedmann and Thomas, 1995).

Despite the potential health benefits, there are health risks to interactions between children and companion animals. Previous

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studies have shown mixed findings on associations between childhood pet exposure and asthma and allergic symptoms (Apelberg *et al.*, 2001; Almqvist *et al.*, 2003; Carlsen *et al.*, 2012). A meta-analysis of 32 studies found that cat exposure had a slight preventative effect on asthma whereas exposure to dogs increased risk of asthma (Takkouche *et al.*, 2008). A large-scale UK study reported that childhood pet ownership reduced risks of childhood aeroallergen sensitization and atopic asthma among children at 7 years old and increased risks of non-atopic asthma (Collin *et al.*, 2015). However, another study of 22,000 children aged 6–10 found pet ownership in early life was neither related to increased nor reduced risk of asthma or allergic rhinitis (Carlsen *et al.*, 2012).

Another common risk of pet companionship is childhood physical injuries induced by pets. Compared with adults, there is a higher incidence of dog-bite injuries in the paediatric populations (Shen et al., 2017). In 2013, there were an estimated >133,000 cases of dog-bite injuries among children under 18 years in the USA (Centers for Disease Control and Prevention, 2015). Studies also report higher incidences of dog-bite injuries among children and adults in some countries (Georges and Adesiyun, 2008; Si et al., 2008). There are multiple reasons why children are at a greater risk of such injuries than adults. First, due to physical development (including weak strength and short stature), children are more likely to become injured and are especially at high risk of facial injuries when playing with dogs (Bernardo et al., 2002; Hon et al., 2007). Furthermore, children's lack of safety knowledge may lead to impulsive behaviour when interacting with dogs, which may heighten the risk of injury (Shen et al., 2013). More dog bites occur between 4 PM and 8 PM when children could be hurt by others' dogs on their way back from school or interacting with their family dogs alone at home (Bernardo et al., 2002). Even though evidence highlights the risk of injuries children face from some pet animals, there is a lack of effective practices to reduce paediatric dog-bite injuries, especially in lowand middle-income countries (Shen et al., 2017).

Countering some of the evidence of risks, there has been a growing focus on the psychological impact of companion animals, especially on potential benefits (Bennett, 2011; McConnell et al., 2011). For instance, interacting with animals is beneficial to adults' and children's emotional and behavioural development (O'Haire, 2010; Purewal et al., 2017). Companion animals can have a positive effect on human mental, social, and physiological health (Friedmann and Son, 2009; Wells, 2009). Pets can facilitate positive social engagement and can also be calming and non-judgemental (Kruger and Serpell, 2010). It is plausible that companionship from animals creates a positive environment through the activation of the oxytocin system, which explains the reduction of negative emotions including stress and anxiety, as well as the promotion of social interaction and empathy (Beetz et al., 2012). Pets, especially the emotional attachments children form with their pets, create a positive impact on their development and wellbeing (Purewal et al., 2017; Muldoon et al., 2019). Companion animals have also been found to influence children's social and cognitive development (Poresky, 1996), form a social buffer for children with autism in socially stressful situations (O'Haire et al., 2015), and enhance

communication between children and their families and friends (Marsa-Sambola *et al.*, 2017).

Research to date, Western literature has indicated various physical and psychological health effects of pet ownership among children, but less is known about the role of companion animals play in the health and development of children in China. As pet ownership increases in China (Chan, 2018), it is time to systematically review and synthesize existing evidence and identify research gaps. The aim of this systematic review was to examine the health (including psychological health) effects of pet ownership among children in China for the first time. The review questions are:

- 1. What are the effects of interacting with companion animals on Chinese children's physical health?
- 2. What are the effects of interacting with companion animals on Chinese children's psychological health?

Methods

PROTOCOLS AND SEARCH STRATEGY

The systematic review was developed following The Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (Page *et al.*, 2021). Literature search of journal articles covering all dates up to 27th October 2021 was conducted in the following eight databases: Ovid EMBASE, MEDLINE, PsycINFO, Global Health (CABI), CAB Abstracts, Scopus, Web of Science, and China Academic Journals (CNKI). The search terms for all listed databases are provided in Table 1. Search terms for this systematic review were formulated through a comprehensive analysis of commonly used key terms in other systematic reviews pertaining to health and wellbeing impacts of HAI (Davis *et al.*, 2015; Purewal *et al.*, 2017; Gee and Mueller, 2019). Reference lists of reviewed studies were screened to identify further potentially eligible studies.

STUDY ELIGIBILITY CRITERIA

The following inclusion criteria were adopted to select relevant articles for review: (a) publication in either English or Chinese in a peer-reviewed journal, (b) original and empirical research topically focused on human-animal interaction among children in China. The Youth Population in China (2018) defines childhood as including adolescence (ages 10–19), while people in China usually use age one year older than their actual age. The current review included children as individuals up to 20 years old (see also Norbäck *et al.*, 2007), (c) measuring relations between pet exposure and children's physical and/or psychological health, (d) sufficient information about the study could be accessed to enable quality appraisal. Studies focusing on children's interactions with wild animals were excluded in this review. Other review studies, grey literature, and duplicates were also excluded.

STUDY SELECTION

Data manager software (Rayyan QCRI) was used to collate articles and remove duplicates. Initial screening of titles and abstracts was

| Table 1. Search terms used to identify the literature | Э. |
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|---|----|

| Category | Search terms |
|----------------------------|--|
| Age | "preteen*" OR "pre adolescen*" OR "infan" OR "minor*" OR "subteen*" OR "child*" OR "youth" OR "young*" "schoolchild" OR "juven*" OR "adol*" |
| Pet ownership/interactions | "pet" OR "pets" OR "dog" OR "dogs" OR "cat*" OR "cats" OR "canine*" OR "feline*" OR "equine*" OR "horse*" OR "bird*" OR "fragrant pig*" OR "pet pig" OR "aquarium*" OR "dolphin*" OR "goldfish*" OR "rabbit*" OR "hamster*" OR "corn snake*" OR "tortoise*" OR "animal assisted activit*" OR "animal assisted intervention*" OR "animal assisted therap*" OR "companion animal*" OR "service animal*" OR "interspecies interaction" OR "pet* ownership" OR "human-animal bond*" OR "human-animal interaction" OR "human-animal relationship" |
| China | "China" OR "Chinese" OR "Hongkong" OR "Macau" |

completed by one reviewer (XY). Full-text papers were obtained and then assessed for eligibility by two reviewers (XY and JW), with conflicts being discussed and resolved or further discussed with PGM. The initial literature search resulted in 9731 papers from eight databases. First, the listed inclusion and exclusion criteria were used to assess the titles and abstracts. The health outcomes were not listed as search terms in the review process because we decided to include all kinds of effects of pet ownership on children's physical and psychological health. However, the reviewers applied the process of checking inclusion criteria of health outcomes in all the studies. Epidemiological studies on bacterial diseases from animals were excluded if the animals were wild animals or livestock animals rather than pets. After the primary eligibility assessment, 81 papers were included.

In the screening of full-text articles, the inclusion criteria were further checked, and disagreements were discussed by two reviewers (XY and JW). In this process, nine review studies, four studies involving wild animals, eight studies with the wrong population group, and one single case study were excluded. After discussion,

we included studies on children's health primarily reported by their parents. Fifty-six studies met the eligibility criteria after the fulltext screening and their reference lists were checked for further potentially relevant studies, which led to a further three studies being included. These 59 studies were selected for detailed data extraction. The process of study selection is listed in Fig. 1.

DATA EXTRACTION AND EVALUATION

Data was extracted with a purpose-developed data extraction form. The following data was extracted and summarized in Table 2: research topics, types of animals involved in the study, participant information (sample size, age, gender), study design, measurement of outcomes, and key findings of animal impacts on children's health.

Of all the selected studies, the risk of bias was assessed by two reviewers (XY and FL). The 14-item Quality Assessment Tool for Observational Cohort and Cross-Sectional Studies (NIH) (National

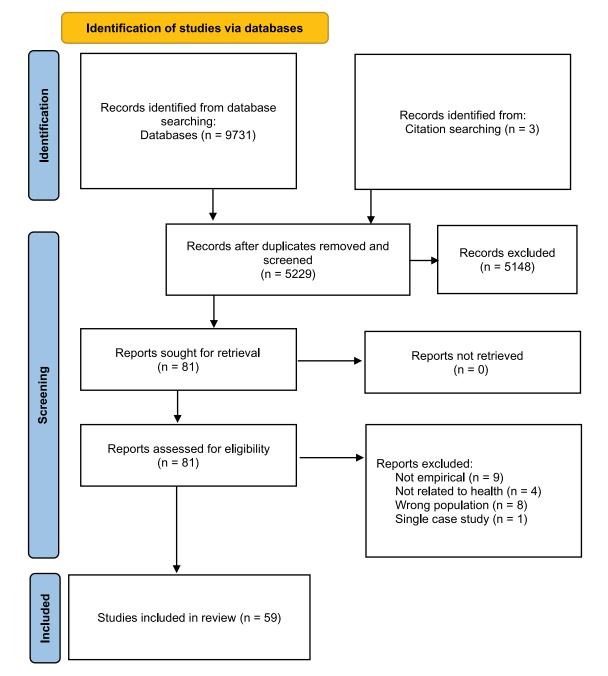


Fig. 1. PRISMA flow diagram of studies for inclusion in the systematic review to assess the psychological and health effects of pet ownership among children in China.

Heart, Lung, and Blood Institute, 2021) was used to assess the quality of the studies, with studies rated as good (over 60%), fair (being 50–60%), and poor (under 50%). The initial consistency rate of quality assessment from the two reviewers was 76.37%, with disagreements then discussed and agreed by those two reviewers (XY and FL). The results of the quality assessment are outlined in Tables 2 and 3.

Results

DESCRIPTIVE INFORMATION

The initial search identified 9731 publications (Fig. 1). After duplicates were removed, there were 5229 studies for screening and 5148 of them were removed during title and abstract screening. At full-text screening, 22 studies were excluded. Reference lists of the remaining studies were searched, and three additional studies were added. Full-text articles were available for 59 studies.

Articles included in this review were published between 2002 and 2021 (Fig. 2). Age of participants across all included studies ranged from 0 to 20 years. All the studies included both male and female participants (Table 2). In this review, 57 of 59 studies were devoted to children's physical health including asthma and allergic symptoms, *Toxoplasma gondii* infection, animal induced injuries, low birth weight and hypertension, and only two studies focused on children's psychological health. Findings are synthesized below in terms of different health outcomes.

PHYSICAL HEALTH OUTCOMES

Respiratory and allergic symptoms

Forty-seven publications investigated the impact of pet exposure on children's respiratory and allergy health, and the most frequently reported clinical health outcomes were asthma, wheezing, persistent cough or phlegm, rhinitis, eczema, common cold, fever, and allergens (Table 2). Six of these studies were unable to undergo quality appraisal because of their descriptive design and low quality of data analysis (Yang and Tan, 2006; Duan *et al.*, 2011; Dong *et al.*, 2012a; Lao and Pan, 2013; Qi *et al.*, 2015; Xu *et al.*, 2016). For study design, the remaining 41 included 35 crosssectional studies, 4 case-control studies, 1 cohort study and 1 random controlled trial (RCT) study.

For the primary outcomes, 3 of 41 studies (Wang et al., 2016b; Cai et al., 2017; Fan et al., 2017) did not observe any association between pet keeping and respiratory symptoms and infections, allergic rhinitis, and eczema respectively. Twenty-six studies reported companion animals as potential risk factors for children because pet exposure increased the prevalence of respiratory and allergy symptoms including asthma, wheezing, phlegm, coughing, rhinitis, and allergens, as well as the common cold (Norbäck et al., 2017). In contrast, another three studies found pet exposure decreased the prevalence of allergic asthma cough, and even acted as a protective factor between environmental pollution and children's respiratory functions (Guo, 2013; Qian et al., 2014; Hu et al., 2020). Hu et al. (2020) reported in a cohort study with a strong methodology that although a child's parents owning a pet while the child was in utero increased the effect of environmental tobacco smoke (ETS) exposure on children's lung function impairment (e.g. with pets: OR=3.13; without pets: OR=1.07), current pet exposure reduced the lung function impairment induced by ETS exposure (e.g. with pets: OR=1.02; without pets: OR=1.10).

The reported associations between pet exposure and the prevalence of respiratory health and allergic diseases were not consistent across studies. The remaining nine studies, with more complex research designs examining pet effects on children's respiratory health at different stages of exposure (such as utero exposure, children's first-year exposure, early exposure, and current exposure), reported mixed outcomes. Two studies reported that there was no association between children's utero exposure to pets and lung function impairment, while current pet exposure

was found to worsen children's lung function impairment (Hu *et al.*, 2017; Yang *et al.*, 2017). Hu *et al.* (2017) also reported that having more than one pet was associated with severe lung function impairment. Three studies agreed that long-term pet keeping decreased the prevalence of allergic rhinitis (Liu *et al.*, 2013; Zhang *et al.*, 2013; Lu *et al.*, 2020a). It was reported that children's pet exposure at birth acted as a risk factor for wheezing and coughing, but early and current pet exposure acted as a protective factor doctor-diagnosed asthma (Luo *et al.*, 2018) and diagnosed hay fever (Huang *et al.*, 2013). However, one study reported that current exposure to furry pets was a protective factor for wheezing, and a risk factor for asthma (Huang *et al.*, 2020), while another study reported that both current pet exposure and pet exposure in children's first year was associated with increased childhood eczema (Shi *et al.*, 2021).

Animal induced injury

There were five studies exploring animal-induced injuries. Of the four cross-sectional studies investigating the impact of pet-induced injuries among Chinese children, two of them were at high risk of bias due to their unclear data recruitment strategies and descriptive study design (Liu et al., 2010; Song et al., 2014b). The other two studies were rated 'high quality' and consistently reported that pet exposure was associated with a higher risk of animal-induced injury, with dogs and cats being the main risk factors for children's pet-induced injuries in China (Shen et al., 2014; Chen et al., 2016). One study reported that exposure to cats was a risk for scratches on hands, while bite injuries were commonly caused by dogs (Chen et al., 2016). Chen et al. (2016) also reported that dog bites were usually caused by others' dogs, while cat-related injuries were caused by the victim-owned cat. Two studies found that most animal-induced injuries happened in spring and summer, especially from June to August (Liu et al., 2010; Shen et al., 2014). Shen's research team (Shen et al., 2014) also mentioned that children's dog bites tended to occur in the daytime, especially during the period when children travelled to or from school, and at times when children were unsupervised by adults.

One high-quality case-control study compared children with disabilities and those without and found that for children with pet cats and/or pet dogs, those with disabilities were more likely to be injured than children without impairments (Zhu *et al.*, 2012). Along with the finding that companion animal-induced injuries are a health risk for children, a potential negative psychological health outcome is that children who had experienced dog bite injuries were subsequently less willing to approach dogs and were more fearful of dogs (Shen *et al.*, 2014).

Toxoplasma gondii infection

Two studies focused on *T. gondii* infection-related factors including pet ownership. Results showed that contact with cats was a risk factor for increasing the prevalence of *T. gondii* infection among children (Duan *et al.*, 2019; Wang *et al.*, 2020). One high-quality study reported that although cats were risk factors for *T. gondii* infection among children, no association was found between *T. gondii* infection and contact with dogs (Duan *et al.*, 2019).

Environmental health indicators

One cohort study reported that pet (dog) exposure during pregnancy was not associated with children's low birth weight (Lu *et al.*, 2020).

Two cohort studies assessed the effects of pet ownership on blood pressure and hypertension of children in China. One study examined the interactive effects of pet exposure and air pollutants on hypertension and found that children exposed to pets during both utero and postnatal periods had lower blood pressure and lower prevalence of hypertension (Lawrence *et al.*, 2018). However, this protective effect of pet exposure is more obvious among younger children (Lawrence *et al.*, 2018). The other study observed that pet ownership was a protective factor for children

| | | F | – | Participants | ints | | | | |
|---------------------------------|--|---|----------------|--------------|----------------------|--------------------------|--|---|-----------------------|
| First Author (Year) | Research topic | rypes or animals (% ownership) | Sample size | Age | Gender (% female) | _ Study design | Outcome measure | Outcome | Quality assessment |
| Zheng (2002) | Physical health (asthma) | Dog, cat, and others | 806 | 6-10 | 41.0% | Case-control study | Questionnaire (The International Study of Asthma and Allergies in Childhood Questionnaires) (ISAAC) | Having both a dog and a cat at home was associated with a higher risk of childhood asthma (OR = 1.5; 95% Cl, 1.0–2.3). | Good |
| Salo <i>et al.</i> (2004) | Physical health (indoor allergens and asthma) | Dog, cat, farm animals, and other animals (chicken, duck, cow, and pig) | 4145 | 13–15 48.4% | 48.4% | Cross-sectional study | Questionnaire (American Thoracic Society question- naire) (ATS) | Current pet exposure was associated with increased prevalence of cough (OR = 1.54 ; 95% Cl, $1.12-2.11$) and wheeze (OR = 1.41 ; 95% Cl, $1.03-1.94$), but not with ever-diagnosis of asthma (OR = 1.10 ; 95% Cl, $0.76-1.58$). Exposure to pets before the age of 6 was associated with increased cough (OR = 1.42 ; 95% Cl, $1.04-1.94$), wheeze (OR = 1.85 ; 95% Cl, $1.34-2.55$), and doctor-diagnosed asthma (OR = 1.61 ; 95% Cl, $1.00-2.58$). Associations of cough/wheeze and pet exposure were stronger among children who allowed animals to enter bedrooms. | Good |
| Yang and Tan (2006) | Physical health (asthma) | Dog (20.7%), cat (20.7%) | 98 | 2–14 | 44.9% | Cross-sectional study | Insertion test on skin | 20.7% of children reported dog as an allergen and 20.7% children reported cat as allergen. | Poor |
| Zhao <i>et al.</i> (2006) | Physical health (asthma and allergy) | Cat, dog, and furry pets | 1993 | 11-15 | 49.3% | Cross-sectional study | Questionnaire (ISAAC) | In Chinese junior high school students, 1.2% reported cat allergy and 1.3% reported dog allergy. Compared with boys, girls reported higher prevalence of cat allergy (OR = 1.34; 95% CI, 0.61–2.79) and dog allergy (OR = 1.29; 95% CI, 0.87–2.41). | Good |
| Norbäck <i>et al.</i> (2007) | Physical health (asthma, eczema, and cat allergy) | Cat and dog | 2116 | 9-20 | 50.0% | Cross-sectional study | Questionnaire (The European Commu- nity Respiratory Health Survey) (ECRHS) | 1.7% reported cat allergy, and none reported dog allergy. | Good |
| Dong <i>et al.</i> (2008a) | Physical health (asthma) | Dog (10.1%), cat 16789 (3.2%), birds (6.8%), farm animals (4.7%), Other animals (5.1%) | | 2-13 | 49.5% | Cross-sectional study | Questionnaire (ATS) | Exposure to pets was associated with increased risk of doctor diagnosed asthma (adjusted OR = 1.49 ; 95% Cl, $1.30-1.70$), wheezing (adjusted OR = 1.37 ; 95% Cl, $1.18-1.60$), persistent cough (adjusted OR = 1.71 ; 95% Cl, $1.52-1.91$), and persistent phlegm (adjusted OR = 2.26 ; 95% Cl, $1.94-2.64$). | Good |
| Dong <i>et al.</i> (2008b) | Physical health (respiratory health) | Dog, cat, and farm animals (bird, chicken, duck, and goose) | 14729 | 1-13 | 50.4% | Cross-sectional study | Questionnaire (ATS) | Pet exposure was associated with increased prevalence of persistent cough, persistent phlegm, doctor-diagnosed asthma and current wheeze among both boys and girls, while exposure to cat was more associated with the asthma-related symptoms among girls. | Good |

Table 2. Evidence for the psychological and health effects of pet ownership among children.

| õ |
|------------|
| Table 1.2. |

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| | Quality assessment | Good | Good | air | Good | Poor | Good |
|--------------|--------------------------|---|---|---|--|---|---|
| | Qu Outcome as: | Pet exposure was associated with increased prevalence of Gc persistent cough (OR = 1.93; 95% Cl, 1.46–2.54), persistent phlegm (OR = 2.82; 95% Cl, 1.9–4.02), and doctor-diag- nosed asthma (OR = 1.45; 95% Cl, 1.03–2.06). Exposure to dogs was strongly related to doctor-diagnosed asthma (OR = 2.57; 95% Cl, 1.31–5.02). | Pet exposure during mothers' pregnancy was associated with higher prevalence of doctor-diagnosed asthma (OR = 1.86 ; 95% Cl, 1.35 – 2.57), current asthma (OR = 3.06 ; 95% Cl, 1.35 – 4.81), wheeze (OR = 2.91 ; 95% Cl, 2.10 – 4.03), and persistent phlegm (OR = 1.50 ; 95% Cl, 1.01 – 2.26). Exposure to animals in the first year of life was associated with increased prevalence of current asthma (OR = 2.50 ; 95% Cl, 1.73 – 3.04). Current pet exposure was associated with increased prevalence of persistent cough (OR = 2.01 ; 95% Cl, 1.73 – 3.04). Current pet exposure was associated with increased prevalence of persistent cough (OR = 2.01 ; 95% Cl, 1.72 – 2.33), persistent phlegm (OR = 2.59 ; 95% Cl, 1.72 – 3.14), and doctor-diagnosed asthma (OR = 1.53 ; 95% Cl, 1.22 – 1.84). Associations between the respiratory symptoms and animal exposure were stronger among children who allow pets to enter bedrooms. | Pet exposure was associated with increased prevalence of Fair persistent cough (OR = 1.89; 95% Cl, 1.30–2.76) and persistent phlegm (OR = 2.01; 95% Cl, 1.22–3.33). | Pet exposure during mothers' pregnancy was associated with increased current wheeze (OR = 1.80; 95% Cl 1.17–2.77) and allergic thinitis (OR = 2.52; 95% Cl 1.43–4.44). Exposure to animals in the first year of life was associated with increased prevalence of doctor-diagnosed asthma (OR = 1.80; 95% Cl, 1.19–2.73), current asthma (OR = 2.39; 95% Cl, 1.41–4.08), and asthma-related symptoms. Current animal exposure was associated with increased persistent cough. Children with two or more animals were more likely to report persistent phlegm than were those who had only one animal. | For children with asthma, 47.1% reported dog as allergens Po and 32.8% reported cat as allergens. | Cat and/or dog exposure was associated with increased Gc prevalence of asthma and asthma-related symptoms |
| | Outcome measure | Questionnaire (ATS) | Questionnaire (ATS) | Questionnaire (ATS) | Questionnaire (ATS) | Skin prick test (SPT) | SPT test |
| | Study design | Cross-sectional study | Cross-sectional study | Cross-sectional study | Cross-sectional study | Cross-sectional study | Cross-sectional study |
| ants | Gender (% female) | 49.9% | 50.3% | 50.5% | 49.3% | 28.9% | 41.0% |
| Participants | Age | | 7-13 | 8.15– 11.73 | 2.2- 6.7 | 5-13 | 5-18 |
| | Sample size | 3945 | 12910 | 3244 | 8819 | 180 | 115 |
| Tynee of | animals (% ownership) | Dog, cat, and farm animals (bird, chicken, duck and goose) | Dog (10.9%), cat 12910 (4.9%), birds (5.8), farm animals (4.6%), other animals (5.0%) | Dog, cat, bird, chicken, duck, goose, and others | Dog (5.5%), cat (4.9%), bird (4.6%), farm animal (3.5%) others (5.0%) | Dog and cat | Dog and cat |
| | Research topic | Physical health (respiratory health) | Physical health (asthma) | Physical health (asthma) | Physical health (respiratory health) | Physical health (asthma) | Physical health (asthma) |
| | First Author (Year) | Dong <i>et al.</i> (2008c) | Dong et al. (2009) | Xie <i>et al.</i> (2010) | Dong <i>et al.</i> (2011) | Duan <i>et al.</i> (2011) | Leung <i>et al.</i> (2011) |

| Poor | Good | Good | Good | Fair | Fair |
|---|---|--|---|---|---|
| Cat allergy was associated with increased prevalence of asthma (P=0.030). | For children without allergic predisposition, pet exposure during pregnancy was associated with increased prevalence of persistent phlegm (OR = 1.53; 95% Cl, 1.04–2.26), doctor-diagnosed asthma (OR = 1.58; 95% Cl, 1.12–2.24), current asthma (OR = 2.27; 95% Cl, 1.04–2.26), and current wheeze (OR = 2.27; 95% Cl, 1.62–3.17). Moreover, pet exposure in the first year was associated with increased doctor-diagnosed asthma (OR = 1.59; 95% Cl, 1.19–2.13), current asthma (OR = 3.05; 95% Cl, 1.74–3.07). Current pet exposure was associated with increased doctor-diagnosed asthma (OR = 1.59; 95% Cl, 1.19–2.13), current asthma (OR = 2.31; 95% Cl, 1.74–3.07). Current pet exposure was associated with increased doctor-diagnosed asthma (OR = 1.60; 95% Cl, 1.43–1.78), persistent phlegm (OR = 1.86; 95% Cl, 1.22–1.50). For children with allergic predisposition, pet exposure in the first year was associated with increased persistent phlegm (OR = 1.82; 95% Cl, 1.06–3.53) and current wheeze (OR = 1.62; 95% Cl, 1.06–3.53) and current wheeze (OR = 1.82; 95% Cl, 1.06–3.53) and current wheeze (OR = 1.62; 95% Cl, 1.06–3.53) and current wheeze (OR = 1.62; 95% Cl, 1.06–3.53) and current wheeze (OR = 1.62; 95% Cl, 1.06–3.53) and current wheeze (OR = 1.62; 95% Cl, 1.06–3.53) and current wheeze (OR = 1.62; 95% Cl, 1.02–2.57). Current pet exposure was associated with increased persistent cough (OR = 1.96; 95% Cl, 1.17–1.78) and persistent phlegm (OR = 1.62; 95% Cl, 1.02–2.57). Current pet exposure was associated with increased persistent cough (OR = 1.96; 95% Cl, 1.17–1.78) and persistent cough (OR = 1.64, 95% Cl, 1.17–1.78) and persistent cough (OR = 1.96; 95% Cl, 1.17–1.78) and persistent cough (OR = 1.96; 95% Cl, 1.17–1.78) and persistent cough (OR = 1.64, 95% Cl, 1.17–1.78) and persistent cough (OR = 1.64, 95% Cl, 1.17–1.78) and persistent cough (OR = 1.64, 95% Cl, 1.17–1.78) and persistent cough (OR = 1.64, 95% Cl, 1.17–1.78) and persistent cough (OR = 1.64, 95% Cl, 1.17–1.78) and persistent cough (OR = 1.64, 95% Cl, 1.17–1.78) and persiste | Pet exposure was associated with increased prevalence of chronic cough (<i>P</i> =0.012). | Pet exposure was associated with increased prevalence of persistent cough, persistent phlegm, and allergic rhinitis, but presented no association with childhood asthma and doctor-diagnosed asthma. Sleeping with pets was associated with increased prevalence of asthma (P<0.05). Pet exposure at mothers' pregnancy and at before 2 was associated with increased prevalence of allergic rhinitis and wheeze. | In children with allergic rhinitis, 7.03% of all reported cat allergy and 11.98% of all reported dog allergy. | Pet ownership was associated with decreased allergic asthma cough (OR = 0.391; 95% Cl, 0.223–0.688). |
| SPT test | Questionnaire (ATS) | Clinical diagnoses | Questionnaire (ATS) | SPT test | Questions asking |
| Case-control study | Cross-sectional study | Random controlled trial (RCT) | Cross-sectional study | Cross-sectional study | Case-control study |
| 49.3% | 49.5% | 43.3% | 40.2% | 49.0% | 43.5% allergic group, 42.9% control group |
| 4-10 | 13.2- | 3-14 | 2-14 | 4-14 | 2-5 |
| 402 | 31049 | 245 | 6278 | 626 | 225 |
| Dog and cat | Dog (6.0%), cat (5.0%), birds (3.1%), farm animals (2.1%), other pets (3.4%) | Pets | Pets | Dog and cat | Dog and cat |
| Physical health (allergens and asthma) | Physical health (respiratory disease) | Physical health (chronic cough) | Physical health (asthma) | Physical health (allergic rhinitis) | Physical health (allergic asthma) |
| Dong <i>et al.</i> (2012a) | Dong <i>et al.</i> (2012b) | Huang (2012) | Liu <i>et al.</i> (2012) | Wang <i>et al.</i> (2012) | Guo (2013) |

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| First Author (Year) | Research topic | animals (% ownership) | Sample size | Age | Gender (% female) | , Study design | Outcome measure | Outcome | Quality assessment |
| Huang <i>et al.</i> (2013) | Physical health (asthma and allergies) | Dog, cat, rodent, rodent, fish, and others | 13335 | 4-6 | 49.1% | Cross-sectional study | Questionnaire (ISAAC) | Persistent furry pet keeping (pet keeping at birth and currently) was associated with decreased thinitis (OR = 0.91; 95% CI, $0.77-1.10$) and eczema (OR =0.85; 95% CI, $0.67-1.07$). Current furry pet keeping was associated with decreased doctor-diagnosed asthma (OR = 0.64; 95% Cl, $0.47-0.88$), and diagnosed hay fever doctor-diagnosed asthma (OR = 0.64; 95% Cl, $0.47-0.88$), and diagnosed hay fever doctor-diagnosed asthma (OR = 0.61, 95% Cl, $0.47-0.88$), and diagnosed hay fever doctor-diagnosed asthma (OR = 0.71; 95% Cl, $0.54-0.93$). Early pet exposure at birth was associated with increased wheeze (OR = 1.40; 95% Cl, $1.16-1.69$) and cough during night (OR = 1.32; 95% Cl, $1.07-1.62$). Fish keeping was significantly associated with increasing all symptoms. | Good |
| Lao and Pan (2013) | Physical health (respiratory symptoms) | Pets | 250 | 20 | 47.2% | Case-control study | Clinical diagnoses | Pet exposure was associated with increased prevalence of respiratory infection (<i>P</i> =0.01). | Poor |
| Liu <i>et al.</i> (2013) | Physical health (respiratory health) | Dog, cat, bird, chicken, duck, or goose | 6730 | 3-7 | 46.6% | Cross-sectional study | Questionnaire (ATS) | Pet exposure was a protective factor for persistent cough (OR = 0.85), asthma symptoms (OR = 0.97), current asthma (OR = 0.81), wheeze (OR = 0.89), and allergic rhinitis (OR = 0.90), but risk factor for persistent phlegm (OR = 1.08). | Good |
| Ma <i>et al.</i> (2013) | Physical health (asthma) | Furry pets | 8733 | 0-12 | 49.4% | Cross-sectional study | Questionnaire (ATS) | For children susceptible to asthma, keeping pets was associated with increased prevalence of persistent cough (OR = 1.6; 95% Cl, 1.2–2.1) and persistent phlegm (OR = 2.2; 95% Cl, 1.6–3.1). For non-susceptible children, keeping pets was associated with increased prevalence of asthma (OR = 1.6; 95% Cl, 1.1–2.3), persistent cough (OR = 2.6; 95% Cl, 1.1–2.0), persistent phlegm (OR = 2.1; 95% Cl, 1.5–2.9), and wheeze (OR = 1.4; 95% Cl, 1.1–1.7). | Good |
| Zhang e <i>t al.</i> (2013) | Physical health (asthma and rhinitis) | Pets | 2193 | 1- 8 | 47.3% | Cross-sectional study | Questionnaire with combined questions from ISAAC, Dampness in Buildings and Health (DBH) and Bulgarian ALLHOME study questions) | Pet exposure was not associated with doctor-diagnosed asthma (<i>P</i> =0.927), while pet exposure was associated with increased prevalence of doctor-diagnosed allergic rhinitis (adjusted OR = 1.60; 95% Cl, 1.20–2.13). | Good |
| Zhao et al. (2013) | Physical health (respiratory disease and symptoms) | Furry pets | 8798 | 5-11 | 49.4% | Cross-sectional study | Questionnaire (ATS) | Pet exposure during mothers' pregnancy was associated with an increased prevalence of allergic rhinitis (OR = 2.30; 95% CI, 1.54–3.44). Current pet exposure was associated with increased prevalence asthma (OR = 1.62; 95% CI, 1.54–1.30–2.02), persistent cough (OR = 2.48; 95% CI, 1.96–3.14), and allergic rhinitis (OR = 1.34; 95% CI, 1.03–1.70). | Good |
| Zhou <i>et al.</i> (2013) | Physical health (asthma) | Pets | 3473 | 8.06– 11.44 | 49.5% | Cross-sectional study | Questionnaire (ATS) | Pet exposure was associated with increased prevalence of persistent cough (OR = 1.08; 95% Cl, 0.73–1.61). | Fair |

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|---|---|---|--|--|--|--|---|--|---|
| Good | Good | Good | Good | Poor | Good | Good | Poor | Good | Good |
| Exposure to pet in home was associated with increased prevalence of persistent cough (OR = 1.73 ; 95% Cl, $1.55-1.93$), persistent phlegm (OR = 2.04 ; 95% Cl, $1.77-2.35$), diagnosed asthma (OR = 2.04 ; 95% Cl, $1.77-2.35$), current asthma (OR = 1.44 ; 95% Cl, $1.26-1.64$), and current wheeze (OR = 1.22 ; 95% Cl, $1.05-1.41$). | Dog ownership was associated with lower prevalence of childhood current asthma and wheeze among children under impacts of air pollution. There was no effect of cat ownership and air pollution interaction. | Pet exposure was associated with increased wheezing with exercise (OR = 1.6 ; 95% Cl, 1.2 – 2.0), rhinitis (OR = 1.6 ; 95% Cl, 1.4 – 1.8), and chronic rash in the past year (OR = 1.4 ; 95% Cl, 0.7 – 2.6). | Pet exposure was associated with increased prevalence of childhood asthma (OR = 3.362). | In children with allergic rhinitis, 62.31% of all reported cat allergy and 43.16% of all reported dog allergy. | No association was found between current furry pet exposure and allergic rhinitis (OR = 1.04; 95% Cl, 0.91–1.91) and rhinitis symptoms (OR = 1.08; 95% Cl, 0.98–1.18). | Pet exposure was reported as allergen (OR = 6.854; 95% Cl, 1.065–44.110). | Pet exposure was associated with increased the prevalence of asthma (<i>P</i> =0.013). | No association was found between furry pet exposure and eczema in the past year before the survey or eczema in lifetime. | No association was found between keeping a cat ($P=0.717$) or a dog at home ($P=0.848$) and respiratory symptoms or respiratory infections. |
| Questionnaire (ATS) | Self-designed questionnaire | Questionnaire (ISAAC) | Clinical diagnoses | SPT test | Questionnaire (ISAAC) | Clinical diagnoses | Questionnaire with combined questions from ISAAC and National Epidemiol- ogy study of Asthma and Allergies in China (NEAAC) | Questionnaire (ISAAC) | Questionnaire (not mentioned) |
| Cross-sectional study | Cross-sectional study | Cross-sectional study | Case-control study | Cross-sectional study | Cross-sectional study | Cross-sectional study | Cross-sectional study | Cross-sectional study | Cross-sectional study |
| 49.7% | 55.9% | 50.7% | 46.7% | 42.0% | 49.1% | 50.0% | 36.7% | 49.2% | 50.6% |
| 6-13 | 2-12 | 6–18 | 2–13 | 3–14 | 46 | 02 | 0-14 | 46 | 11–15 |
| 23326 | 31049 | 10338 | 122 | 412 | 13335 | 330 | 13877 | 13335 | 2134 |
| Dog, cat, bird, chicken, duck, and goose | Dog (5.4%), cat (4.5%) | Dog and cat | Pets | Dog and cat | Furry pets | Pets | Dog, cat, bird, pig, horse, and cow | Furry pets | Dog and cat |
| Physical health (asthma) | Physical health (respiratory health) | Physical health (asthma, rhinitis, and eczema) | Physical health (asthma) | Physical health (allergic rhinitis) | Physical health (rhinitis) | Physical health (asthma and related symptoms) | Physical health (asthma) | Physical health (atopic eczema) | Physical health (asthma) |
| Liu <i>et al.</i> (2014) | Qian <i>et al.</i> (2014) | Song <i>et al.</i> (2014a) | Huang <i>et al.</i> (2015) | Qi <i>et al.</i> (2015) | Wang <i>et al.</i> (2016b) | Wang <i>et al.</i> (2016a) | Xu <i>et al.</i> (2016) | Cai <i>et al.</i> (2017) | Fan <i>et al.</i> (2017) |

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| Table | |

| | | | Participants | ints | | | | | |
|---------------------------------|--|--|----------------|----------|----------------------|--------------------------|--|--|-----------------------|
| First Author (Year) | Research topic | rypes or animals (% ownership) | Sample size | Age | Gender (% female) | Study design | Outcome measure | Outcome | Quality assessment |
| Hu <i>et al.</i> (2017) | Physical health (lung function) | Dog, cat, bird, farm animal, and others | 6740 | 7–14 | 49.8% | Cross-sectional study | Electronic spirometers | No association was found between children's pet exposure in utero and lung function impairment. Current pet exposure was associated with increased lung function impairment (OR = 1.43 ; 95% Cl, $1.18-1.74$), especially exposure to dogs (OR = 1.72 ; 95% Cl, $1.29-2.29$) and birds (OR = 1.78 ; 95% Cl, 1.31-2.41). Having more than 1 pet was associated with severe lung function impairment (OR = 1.78 ; 95% Cl, 1.31-2.41). Girls had higher prevalence of lung function impairment with pet exposure. | Good |
| Norbäck <i>et al.</i> (2017) | Physical health (common cold) | Dog (4%) cat (2%) | 39782 | 9 - 0 | 48.0% | Cross-sectional study | Self-designed questions | Perinatal dog keeping was associated with increased prevalence of common cold duration (OR = 1.22; 95% Cl, 1.06–1.41), and perinatal cat keeping (OR = 1.31; 95% Cl, 1.09–1.78) and current cat keeping (OR = 1.31; 95% Cl, 1.02–1.68) were associated with more frequent common cold in southern China. | Good |
| Yang <i>et al.</i> (2017) | Physical health (lung function) | Dog, cat, bird, chicken, duck, goose, pig, lizard, and snake | 6280 | 7–14 | 50.5% | Cross-sectional study | Questionnaire (ATS) | Utero exposure to pets was not related to children's lung function impairment (OR = 1.09), However, Pets ownership impaired lung function of children without asthma (OR = 1.32). | Good |
| Luo <i>et al.</i> (2018) | Physical health (asthma and allergy) | Dog (14.7%), cat (4.0%), rodent (2.0%), bird (2.5%), fish (3.2%) | 7360 | 0-8 | 48.1% | Cross-sectional study | Questionnaire with combined questions from ISAAC and DBH | Pet keeping in early childhood was associated with in- creased prevalence of current wheeze (OR = 1.70 ; 95% Cl, 0.77-1.10), current dry cough (OR = 1.32 ; 95% Cl, $0.96-1.84$), and diagnosed rhinitis (OR = 1.06 ; 95% Cl, $0.71-1.57$), but associated with decreased diagnosed asthma (OR = 0.85 ; 95% Cl, $0.48-1.53$). | Good |
| Hu e <i>t al.</i> (2020) | Physical health (lung function) | Dog, cat, farm animals, and other animals | 6740 | 7-14 | 48.8% | Cohort study | Electronic spirometers | Pet ownership in utero was associated with increased effect of environmental tobacco smoke (ETS) exposure on children's lung function impairment (e.g. with pets: OR=3.13; without pets: OR=1.07). Current pet exposure was associ- ated with reduced lung function impairment induced by ETS exposure (e.g. with pets: OR=1.02; without pets: OR=1.10). | Fair |
| Huang <i>et al.</i> (2020) | Physical health (asthma, rhinitis, and wheeze) | Furry pets | 2214 | 3–0 2 | 49.2% | Cross-sectional study | Questionnaire (DBH) | Furry pet exposure was a protective factor for wheeze (OR = 0.70 ; 95% Cl, 0.44 - 1.12), and a risk factor for asthma (OR = 2.12 ; 95% Cl, 1.15 - 3.9) and rhinitis (OR = 1.27 ; 95% Cl, 0.74 - 2.20). | Good |
| Lu <i>et al.</i> (2020a) | Physical health (wheeze and rhinitis) | Cat and dog | 39782 | 3–6 | 48% | Cross-sectional study | Questions on clinical diagnoses | Cat keeping (OR = 1.62; 95% Cl, 1.12–2.37) and dog keeping (OR = 2.28; 95% Cl, 1.79–2.89) were risk factors for furry pets related respiratory symptoms, while cat keeping (OR = 0.73 ; 95% Cl, 0.50 –1.05) and dog keeping (OR = 0.78 ; 95% Cl, 0.62 –1.00) were protective factors of other diagnosed rhinitis. | Good |

| Fair | Good | Fair | на. Н | Poor | Good | Good | Poor |
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| Only dog keeping was associated with increased prevalence of wheeze (OR = 1.69 95% Cl, 1.09–2.65) and eczema (OR = 2.14; 95% Cl, 1.06–4.36). | Current pet exposure (OR = 1.23; 95% CI, 1.01–1.51), and pet exposure at children's first year was associated with increased childhood eczema (OR = 1.45; 95% CI, 1.14–1.85). | Pet exposure was associated with increased prevalence of F allergic rhinitis (OR = 2.075; 95% Cl, 1.029–4.109). | Cat keeping was associated with increased risk of persistent F cough (OR = 1.77 ; 95% Cl, 1.03 – 3.05). Sleeping with pets was associated with increased prevalence of persistent toough (OR = 3.32 ; 95% Cl, 1.01 – 10.91), persistent phlegm (OR = 5.22 ; 95% Cl, 1.24 – 21.99), doctor-diagnosed asthma (OR = 3.57 ; 95% Cl, 1.47 – 8.65), and current asthma (OR = 4.27 ; 95% Cl, 1.02 – 17.96). Exposure to pets before 2 was associated with increased prevalence of current asthma (OR = 1.84 ; 95% Cl, 1.07 – 3.14) | Children's inappropriate interactions with dogs and cats was F associated with increased prevalence of rabies (9.22%). Boys presented higher prevalence on rabies than girls (P=0.0319). | Children with disabilities whose family raised cat/dog(s) were (more likely to be injured (OR = 1.76; 95% CI, 1.02–3.02). For children without disabilities, those whose family had cat/dog(s) were over three times more likely to having injuries comparing with those whose family did not have any cat/dog. | Children's dog bites often occurred during daytime, especially in spring and summer, and occurred most often when children were alone with peers. Dog that bites children were often unleashed. Caregivers attributed the injury to children's behaviour (children were naughty or careless, had poor knowledge about safety interaction with dogs. | The rabies cases in children accounted for 21.3% of the total F number of rabies cases in China, 97.0% of these cases occurred in rural areas, mainly caused by dogs (81.5%), and were primarily level III exposure (47.7%). Furthermore, 25.4% of cases adopted incorrect treatments such as extruding bleed and wound closure, cases vaccinated with 5 injections accounted for only 22.5%. |
| Questionnaire (ISAAC) | Questionnaire with questions combined from DBH and previous study | Clinical diagnoses and SPT test | Questionnaire (ATS) | Questions | Questions | Structured interview | Questions |
| Cross-sectional study | Cross-sectional study | Case-control study | Cross-sectional study | Cross-sectional study | Case control study (interview) | Cross-sectional study (interview) | Cross-sectional study |
| 48% | 48% | Allergic rhinitis (40%), control group (36.36%) | 47.6% | 51.1% | 32.8% | 34.7% | Not reported |
| 3–6 9 | 2-8 | 3–6 1 | 9 Ю | 6-14 | 1-14 | 2-17 | 0-15 |
| 3606 | 8153 | 284 | 11611 | 2408 | 2402 | 101 | 5088 |
| Dog (7.5%) and cat (1.9%) | Pets | Pets | Cat, dog, bird, and poultry (chickens, ducks, and geese) | Dog and cat | Dog and cat | Dog | Dog, cat and others |
| Physical health (wheeze, rhinitis & eczema symptoms) | Physical health (eczema) | Physical health (allergic rhinitis) | Physical health (asthma and asthma-related symptoms) | Physical health (animal induced injuries) | Physical health (non-fatal injuries) | Physical health (dog-bite injuries) | Physical health (rabies cases) |
| Norbäck <i>et al.</i> (2021) | Shi <i>et al.</i> (2021) | Zhang e <i>t al.</i> (2021a) | Zhang <i>et al.</i> (2021b) | Liu <i>et al.</i> (2010) | Zhu <i>et al.</i> (2012) | Shen <i>et al.</i> (2014) | Song <i>et al.</i> (2014b) |

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| Table |

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|------------------------------|--|--|--------------------|--------------|----------------------|----------------------------------|---|---|-----------------------|
| First Author (Year) | Research topic | iypes of animals (% ownership) | Sample size | Age | Gender (% female) | Study design | Outcome measure | Outcome | Quality assessment |
| Chen <i>et al.</i> (2016) | Physical health (dog and cat induced injuries) | Dog (8.1%) and cat (7.4%) | 6308 | 6–19 | 49.5% | Cross-sectional study | Questionnaire | Previous pet ownership was associated with higher risk of animal induced injuries (OR = 1.33 ; 95% Cl, $1.10-1.61$). Current cat exposure usually caused scratches on hand (OR = 3.32 ; 95% Cl, $2.59-1.51$), while bites were commonly caused by current dog exposure (<i>P</i> =0.505) (OR = 1.11 ; 95% Cl, $0.82-1.51$). | Good |
| Duan <i>et al.</i> (2019) | Physical health (<i>Toxoplasma</i> <i>gondli</i> infection) (<i>T. gondli</i>) | Dog and cat | 628 | 0-14 | 63.3% | Case control study | The enzyme immunoassay kits (ELISA) | Cat was associated with increased prevalence of <i>T</i> gondii infection both in children with lymphoma (OR = 2.5 ; 95% Cl, $1.4-4.5$) and children without lymphoma (OR = 2.5 ; 95% Cl, $1.2-5.4$). | Fair |
| Wang <i>et al.</i> (2020) | Physical health (<i>T. gondii</i>) | Cat | 2451 | 6-11 | 47.4% | Cross-sectional study | ELISA kits | Cat was associated with increased prevalence of <i>T. gondii</i> infection (12.23% among children who contacted with cats and 7.66% among children who had not contacted with cats). | Poor |
| Lu <i>et al.</i> (2020b) | Physical health (Low birth weight) | Dog (5%) | 3509 | 0-7 | 46.0% | Cohort study | Questionnaires | No association was found between lower birth weight and household pet exposure (dogs) during pregnancy (<i>P</i> =0.102). | Good |
| Lawrence et al. (2018) | Physical health (hypertension) | Pets | 9354 | 5-17 | 48.7% | Cohort study | Blood pressure measure equipment | Pet ownership modified the association between air pollutants on elevated arterial blood pressure and hyperten- sion in children and was acted as a protective factor on hypertension. | Good |
| Xu <i>et al.</i> (2020) | Physical health (hypertension) | Dog, cat, bird, farm animal and others | 9354 | 5-17 | 49.0% | Cohort study | Blood pressure measure equipment | Pet exposure is a protective factor on the effects of environ- mental tobacco smoke on children potentially acts as a factor to protect against the development of hypertension in children. | Good |
| Ji <i>et al.</i> (2010) | Mental health (PTSD) | Dog (82.1%), cat (7.0%), rabbits (5.3%), guinea pig (3.4%), and rat (2.2%) | 358 | 6.6– 12.2 | 60.9% | Cohort study | Questionnaire | Pet induced injuries was risk factor for the development of post-traumatic stress disorder (PTSD). | Good |
| Fung (2019) | Mental health (reading ability and physiological response) | Dog | , נט | | 13.3% | Pre-test and post-test design | Different reading assessment | Pet companions increased reading speed and speeded reading accuracy and decreased stress level. | Good |

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| Overall | Good | Good | Poor | Good | Good | Good | Good | Good | Good | Fair | Good | Poor | Good | Poor | Good | Good | Good | Fair | Fair | Good | Poor | Good |
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| Statisti- cal analyses | ≻ | ≻ | z | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | z | ≻ | z | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ |
| Follow up rate | R | NR | z | NR | z | R | NR |
| Blinding of outcome assessors | z | z | z | ≻ | z | z | z | z | z | z | z | z | ≻ | z | z | ≻ | z | z | z | z | z | z |
| Outcome mea- sures | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ |
| Repeated exposure assess- ment | ≻ | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z |
| Exposure measures and assess- ment | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ |
| Different levels of the expo- sure of interest | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | z | ≻ | ≻ | ≻ |
| Sufficient timeframe to see an effect | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z |
| Exposure assessed prior to outcome measure- ment | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z |
| Sample size justification | ≻ | ≻ | z | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | z | ≻ | z | ≻ | ≻ | ≻ | z | ≻ | ≻ | ≻ | ≻ |
| Groups recruited from the same popula- tion and uniform | ≻ | ≻ | z | z | ≻ | ≻ | z | ≻ | ≻ | ≻ | ≻ | z | ≻ | z | ≻ | z | ≻ | ≻ | ≻ | ≻ | z | ≻ |
| Study population (participation rate) | ~ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ | ≻ |
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| Sufficient timeframe to see an effect | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z |
| Exposure assessed prior to outcome measure- ment | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z | z |
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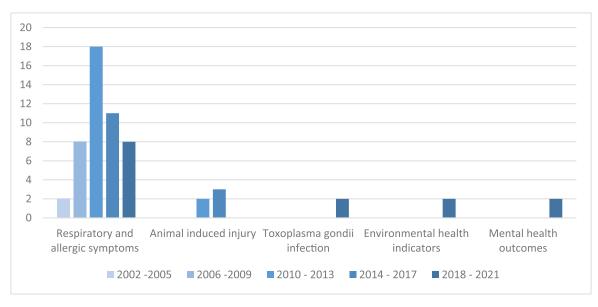


Fig. 2. Bar chart of studies published timeline: The change of studies amounts on different outcomes in each period.

experiencing strong effects of environmental tobacco smoke (Xu *et al.*, 2020). To be more specific, the negative impacts of environmental tobacco smoke exposure on children in utero only happened in children without pets, and the modified impacts of pet ownership were more robust for girls than boys, for younger children than older ones (Xu *et al.*, 2020).

Psychological health outcomes

Only two studies, which were both rated as high quality, reported the impacts of pet ownership on children's psychological health and development (Ji et al., 2010; Fung, 2019). One study investigated post-traumatic stress disorder in children who had experienced animal-induced injuries and found that children with autism spectrum disorder (ASD) were more likely to experience severe injuries compared to other children (Ji et al., 2010). It was also found that children were at risk of post-traumatic stress disorder after experiencing severe animal attacks and that psychological support for those with animal-induced injuries is needed (Ji et al., 2010). The other study was a pilot study designed to assess the effectiveness of a canine-assisted intervention on children's reading ability and other psychological outcomes in Hong Kong, China (Fung, 2019). The results showed that a canine-assisted read-aloud programme improved children's reading speed and speed-reading accuracy but had no effect on children's current reading accuracy (Fung, 2019).

RISK OF BIAS

Risk of bias was appraised using The Quality Assessment Tool for Observational Cohort and Cross-Sectional Studies (NIH), the results of which are listed in Table 2 and the risk of bias assessment has been listed in Table 3. Fifty-nine studies were all independently assessed by two reviewers. The consistency rate of independent quality assessment from two reviewers is 76.37%, and disagreements were discussed and reunified by two reviewers (XY and FL) with a total agreement of 100%.

Most studies were judged to be at high risk of bias in terms of blinding between outcome and exposure assessment due to their use of self-reported questionnaire measurements. Fourteen studies did not meet the criteria of groups recruited from the same population and uniform eligibility because their participants were not recruited during the same time period. Moreover, there was a high risk of bias in terms of exposure assessed prior to outcome measurement, sufficient timeframe to see an effect, repeated exposure assessment, and the follow-up rate for all cross-sectional studies and some of the cohort studies.

Nine studies were assessed to be of poor quality because they did not meet the quality criteria due to their descriptive study design and low-quality of data analysis. Nine studies were assessed as of fair quality. Forty-one studies were appraised to be of good quality. All these studies clearly stated and specified their research aim or research questions and study population. Most studies provided sample size justification, power description, or effect estimates. Moreover, the exposure and outcome measures are clear in most of the studies assessed as good quality.

Discussion

To the best of our knowledge, this is the first systematic review to synthesize published research on the effects of interactions with companion animals on children's physical and psychological health in China. Meta-analysis was not possible due to the heterogeneity of measures across a wide variety of health outcomes. To be more specific, outcome measures across these studies included different types of questionnaires, interviews, skin prick tests, clinical diagnoses which were not specified, electronic spirometers, and other biological testing tools, as shown in Table 2. Therefore, it was not feasible to conduct a meta-analysis in this study. Most current studies assessed the impact of pets on Chinese children's physical health, including respiratory and allergy symptoms, pet-induced injuries, and T. gondii affections, along with one study reporting no association between pet exposure and children's low birth weight. However, there was evidence of an emerging trend in Chinese studies to examine the potential psychological effects of pet exposure.

The potential risks of pet exposure to children were respiratory and allergy outcomes, animal-induced injuries, and *T. gondii* infection. However, the impact of companion animals on children's respiratory and allergy outcomes is complicated depending on the timing of exposure and types of pets. For respiratory symptoms, this review found that pet exposure could be a risk factor for wheezing and coughing, but a protective factor for doctor-diagnosed asthma (Luo *et al.*, 2018) and hay fever (Huang *et al.*, 2013). Bornehag *et al.* (2003) argued that this kind of protection comes along with one's avoidance behaviour after knowing the potential risks of contact with animals. For allergens, pet-induced allergies from children's direct and indirect contact with pets' fur and dander were found in this review (see also Apfelbacher *et al.*, 2016). Even though it

was mentioned in one study that canine exposure during perinatal stages could support the development of infants' immune system tolerance due to exposure to mixed aeroallergens at early ages (Chen *et al.*, 2010), most studies in this review reported that current pet exposure increased the prevalence of respiratory and allergy symptoms, as well as the common cold (Dong *et al.*, 2012a, b; Norbäck *et al.*, 2017).

It is important to note that although pet exposure was viewed as an environmental risk in most studies, in some studies, it was also reported as a protective factor between environmental pollution such as air pollution and environmental tobacco smoke, and children's respiratory function (Qian *et al.*, 2014; Hu *et al.*, 2020). In addition to exposure timing and pet type, potential behaviours such as having more than one pet, allowing pets into the bedroom, and sleeping with pets also increased the risks to respiratory health (Salo *et al.*, 2004; Dong *et al.*, 2009, 2011). Instead of limiting children's contact with companion animals, it is more important for children and parents to consider the timing of introducing pets into the family and the types of pets involved. Moreover, another suggestion of this review is to keep pets in communal living areas of homes and decrease instances of direct skin contact such as sleeping with pets, to minimize risks to respiratory health.

Children's interactions with animals and parental monitoring of these interactions can also impact the potential risks of pet-induced injuries. It was found in the review that pet exposure is a potential risk factor for animal-induced injuries in China, especially among younger children. One of the reasons that led children to become vulnerable to animal-induced injuries and rabies was inappropriate behaviour when playing with dogs and cats (Liu et al., 2010). It was also suggested that caregivers failure to recognize the importance of educating children on safety behaviours was a factor in animalinduced injuries, which was also mentioned in a Canadian study of parenting style and children's injuries (Morrongiello et al., 2006). Moreover, an increased risk of pet-induced injuries also occurs when children are alone or with peers and not supervised by caregivers (Shen et al., 2014). It was also noted in this review that boys had more instances of animal-induced injuries than girls (Chen et al., 2016), which might be because boys are more impulsive than girls with higher frequencies of sensation-seeking (Balan and Lingam, 2012). Another behaviour that increased the risk of bites among pet owners in China was dogs being unleashed, both at home and in public (Shen et al., 2014). In this case, more education for pet owners on dog care and canine behaviour management is needed to prevent potential injuries to children. A 36 min video-based intervention that displayed scripted testimonials of actual dog-bite experiences was found to be effective in reducing paediatric dogbite injury risks in rural China (Shen et al., 2016). However, a gap may exist between videos of human-dog interactions and children's actual interactions with pets, so further research is needed to develop educational and therapeutic interventions to prevent and promote recovery from animal-induced injuries (Ji et al., 2010).

One of the most important findings in this review is that within HAI studies in China, there has been an emerging trend from focusing on children's physical health to considering children's psychological health. Two cohort studies focused on physical health reported that pet exposure was a protective factor against the effects of environmental pollutants on elevated arterial blood pressure and hypertension in children and decreased the prevalence of hypertension (Lawrence et al., 2018; Xu et al., 2020). Although blood pressure is a physiological indicator, a potential mechanism could be that pet companions act as an inhibitor of sympathetic nervous system activity and decrease psychological distress (Nagengast et al., 1997; Hansen et al., 1999). Future studies should focus on exploring the psychological mechanisms involved in associations between pets and cardiovascular health. Another pilot study in Hong Kong, China tested the effects of canine-assisted read-aloud programmes on children's reading abilities such as reading speed and speed-reading accuracy

(Fung, 2019). Children's psychological factors were also examined in this study and stress reduction was found in the reading process (Fung, 2019). A systematic review on the effects of reading to dogs programmes found that they can improve children's reading confidence and reading performance (Hall *et al.*, 2016).

This review had limitations including: (1) Only studies published in English and Chinese were included due to limited resources; (2) Studies with low quality were included and data extracted in order to be inclusive, however, the results of these studies were not emphasized in the narrative synthesis of findings due to the low quality of evidence; and (3) A meta-analysis was not possible due to the heterogeneity of included studies. The strengths of this review are: (1) This is the first systematic review to assess the impact of pets on Chinese children's and adolescents' physical and psychological health; (2) A research gap in studies on the impacts of pets on children's psychological health was identified; (3) Quality assessments were conducted in this review; and (4) The review and narrative synthesis included a wide range of health outcomes.

In conclusion, pet exposure in Chinese children was studied more as a potential risk factor for respiratory health and allergies, animal-induced injuries, *T. gondii* infection, and additionally as a protective factor between environmental pollution such as environmental tobacco smoke and children's respiratory function. Two studies focusing on cardiovascular health found pet ownership as a protective factor. Only two studies focused on children's psychological health: one focused on the negative psychological effects of animal-induced injuries; the second focused on the cognitive benefits of children reading to dogs. Further research is required to determine the potential impact of pet ownership on children's psychological health in China.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

ETHICS STATEMENT

The authors confirm that the research meets any required ethical guidelines, including adherence to the legal requirements of the study country.

AUTHOR CONTRIBUTIONS

All authors contributed equally in the development of this article.

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