

SICK TO DEATH: THE FALSE TENSION BETWEEN PROVIDING CARE AND SAVING LIVES

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“I am suggesting, then, that crowding is becoming one of the predominant social and ecological forces of our times, and that it will most certainly increase in the future. It behooves us to learn as much about it as we can.”

These prophetic words appeared in an article entitled "The Biology and Psychology of Crowding in Man and Animals", published in the Ohio Journal of Science way back in 1971. From where I sit, it seems that these words hold profoundly true in animal shelters in the United States here in the early part of the 21st century. In spite of its importance, I haven't written much about the issue of crowding directly, though I've mentioned it often as a risk factor for disastrous disease outbreaks. To be honest, part of my hesitation to tackle this particularly thorny problem stemmed from fear that my words would be misunderstood – there is a tendency to equate a plea against over-crowding with a mandate to increase euthanasia. However, I've experienced many scenarios now where the opposite was true: where a reduction in crowding not only lowered the risk of disease and improved animal welfare for every animal in the shelter's care, but also – sometimes to everyone's surprise – resulted in an increased live release rate and a reduction in euthanasia, often even coupled with a decrease in overall costs. If such win-win scenarios are possible, it certainly does “behoove us to learn as much about it as we can.” Just as we have with issues such as euthanasia and adoption programs, we need to carefully examine some long held assumptions, discard those that no longer serve us (or the animals), and develop new strategies to reach our goals more effectively. In this column, I will ask you to join me in re-thinking the relationship between crowding, welfare, euthanasia, and other aspects of achieving our mission as compassionate sheltering professionals.

What is at stake?

In her recent column in Animal Sheltering magazine, Dr. Lila Miller challenged us to think about the Five Freedoms which have been proposed as minimum requirements for farm animal care: freedom from hunger and thirst; pain and illness; discomfort; distress or fear; and the freedom to express normal behaviors. Miller asked us to consider whether and how shelters could meet and even go beyond these standards.

On the surface, it doesn't seem so much to ask. When we take an animal into shelter care, we are depriving it of virtually all other freedoms, even if - we hope - in the animal's best interest. Isn't protecting animals from illness and suffering while in our care the least we can then do? Is it unreasonable to expect that a homeless cat be confined in such a way that it is able to stretch to its full length, walk a few steps, choose between cuddling up on a soft surface or cooling off on a smooth resting place, maybe even exercise its athletic prowess by leaping to an elevated perch? Too much to hope that a shelter dog could enjoy a comfortable bed, a few toys, the opportunity to defecate and

urinate away from its eating and sleeping area, freedom from bullying by kennel-mates, and perhaps even regular walks and interaction with a friendly human or other dogs? Can we ask that animals become safer in our care, day by day, rather than increasingly likely to succumb to shelter-acquired disease or stress-related behavioral problems?

Though these may not seem like overly lofty goals to someone outside of our profession, as I travel the country visiting shelters, it is rare that I run across one that manages to meet all these goals consistently for *all* the animals in their care. Certainly we didn't quite meet these standards in any of the shelters where I've personally worked, though we made progress in many areas over time. Our common failure to meet the Five Freedoms seems to hold particularly true for those animals who are most vulnerable and often most stressed, those that have just been admitted to the shelter and are so often held in bleak, cramped, stray or quarantine areas.

Worse still are those situations where not only are the Five Freedoms far from met, but the level of crowding is such that stress and disease become almost inevitable. The most severe examples make for dramatic (and heartbreaking) headlines describing what Dr. Miller identified in her column as blatant cruelty or hoarding. Thankfully, these egregious examples are limited to a tiny minority of shelters. However, I increasingly hear from caring shelter personnel who are struggling somewhere in the middle. Animals may not be starving in their care, but sometimes less dominant dogs in crowded runs don't get enough to eat, or cats in cramped cages are simply too stressed to take in enough to maintain their weight in the first few difficult days of shelter life. Housing is nothing like the filthy conditions reported in newspaper headlines, but neither is it ideal as cats cower in litter pans or linger for weeks in cages too small to allow them even to lie down at full length. Veterinarians struggle with seemingly intractable – and sometimes increasingly frequent and severe - respiratory disease or diarrhea amongst their charges. When space runs out in isolation areas, sick animals get treated in the general population, frantic staff aren't always able to keep up with cleaning and vaccination, and sometimes a negative spiral of increasing illness ensues. I've described some of the devastating outbreaks that resulted in previous articles.

Can we take better care of shelter animals?

Why does this happen? Do the people who work in these shelters simply not care that animals are stressed, suffering, getting sick and sometimes dying or getting euthanized as a result? Of course not. Few of us choose to work in animal sheltering because we want to look the other way when we see animals suffering, right? The vast majority of people I encounter are deeply concerned about the well-being of the animals in their care and are striving to do the right thing even in the face of daunting circumstances.

Many would say these situations result from a lack of resources: there just isn't enough money, staffing or space to go around for all the unwanted animals clamoring for our attention. In some cases, that's certainly true. Some shelters and budgets are too small to even hold animals in safe and humane circumstances for legally required holding periods, let alone give them a reasonable chance for adoption. But in many cases, at least part of the problem goes beyond a simple lack of resources. Rather, it results from a tendency to *overextend* the resources available to care for so many animals at any given time that it becomes impossible to provide reasonable welfare for each one. Often, no

matter how many animals shelters house, there is a sense that if they are not constantly at or beyond capacity, they are not trying hard enough. There is a deeply held belief that we can save more lives by holding ever more animals in shelters, even if the circumstances under which they are held are increasingly less than ideal – for each and every animal. Even when those working in shelters understand this not to be true, there is sometimes intense public pressure to maintain an appearance of crowding. This is particularly true at shelters that sometimes euthanize animals “for space,” in the vain hope that crowding will eliminate this need.

Crowding and compromises in animal care are often exacerbated when a commitment is made not to euthanize “healthy, adoptable animals” in a shelter where neither intake nor live release can be precisely controlled. If more healthy and behaviorally sound animals are admitted than placed into homes, the default alternative all too often becomes ever-increased crowding until some of those animals that started out healthy become ill or succumb to stress-related behavioral problems.

Simply swapping euthanasia of healthy animals with euthanasia of animals that started out healthy but got sick in shelter care is not a victory for anyone. Infectious disease is a terrible judge of character, and those animals “selected” by a virus or bacteria are often the youngest and friendliest – those that are the most vulnerable and get the most exposure through handling. Infectious disease is also bad at math. While a compassionate shelter manager can choose to limit intake or euthanize only the absolute minimum number to make up the difference between intake and live release, infectious disease knows no such boundaries. Whether the toll is measured by dozens or hundreds, animals that could otherwise have easily found homes may fall victim to rampant infections in overcrowded facilities. It’s unimaginable that this outcome was the intention of such policies, nor that such practices would continue if we truly recognized the implications for welfare or life-saving capacity of an organization.

Do we really have to choose?

Dr. Miller wrote in her column “*Shelters that want to decrease euthanasia must still provide conditions that support wellness and compassionate animal care.*” Is there really tension between these two goals? Must we choose between wellness and life? Must we abandon hope of compassionate care in order to minimize euthanasia? If we provide every cat in a shelter with a space big enough to stretch all the way out, does that mean more cats will have to die? In my experience, the answer to all these questions is a resounding NO. This is probably the most important thing I can possibly say right now, so I’ll go ahead and say it again: insisting on providing good care, a safe haven, adequate housing, and protection from illness *in no way contradicts the goal of reducing or eliminating euthanasia of unwanted animals.* In fact, over-crowding and all the attendant problems can substantially slow or even reverse progress towards this goal.

I have admittedly encountered shelters in which over-crowding occurred *at the same time as* positive programs to increase live release and decrease shelter intake, with a concurrent drop in euthanasia. However, I have yet to see a convincing example where compromises in animal care *resulted in* these positive developments: holding an increasing number of animals in progressively more crowded circumstances is unlikely to drive many people to get their animals spayed and neutered in a timely fashion, nor is it likely to inspire most folks to come down to the shelter and provide a lifelong home for

an animal in need. True, adoption specials that include a call to help with desperate crowding often draw a response, but if the situation is chronic, this response quickly fades.

In the worst case scenario – unfortunately all too common – overcrowding can blunt the benefits of otherwise excellent adoption, outreach and rescue programs or even drive a decrease in live release rate. I've watched overwhelmed adopters overlook an adorable dog cowering in the corner of a cage containing four other bouncing, barking big dogs. I've seen cats euthanized after they contracted URI in pre-adoption areas while awaiting space to move them into adoption, and I've seen the accompanying statistics that triumphantly report "no euthanasia for space." I've heard from desperately frustrated rescuers and transfer shelters no longer able to assist a shelter over-run with canine distemper. Many of us have heard stories from would-be adopters scared off by a shelter's reputation for unhealthy pets – I experienced this first hand when, as a ten year old, I fell in love with a little grey fluff ball at our local shelter. By the time his stray holding period was up, we had been warned by a "helpful" neighbor that we shouldn't adopt from this shelter because "all their cats are sick." Unsophisticated about animals at the time, my family took their advice. I still wonder what happened to that kitten.

Even more heartbreaking are the scenarios where outreach and prevention programs falter as staff and resources are increasingly directed towards containing the messy results of shelter overcrowding. Overcrowding often results in inefficient use of space and housing, such that not only are there more animals to care for, cleaning and care become increasingly time consuming. For instance, it takes more than twice as long (and is neither as safe nor effective) to remove two animals from each side of a double-sided run which has been forced to accommodate one animal on each side than it does to clean and disinfect such runs when correctly used. The movement and germ spread that goes along with this practice adds to the toll by increasing stress and disease. If staff need to be redirected from education/outreach or customer service activities to keep up with an increased animal care work load, opportunities to keep animals from coming in (through education) or get out alive (through good customer service) may be lost. Veterinarian time spent on treating countless animals for increasingly severe or frequent illness can not be spent on the spay/neuter activities that remain key to definitively solving the problem of overpopulation in many communities. It's true that the energy and enthusiasm sparked by a drive to reduce euthanasia can increase the overall amount of resources available to a sheltering organization and thus partially offset the detrimental effects of crowding, but as mentioned above, progress *in spite of* crowding should not be confused with progress *because of* crowding.

So what does this mean?

The intersection between crowding, animal welfare, and shelter population management is a tricky one. In some ways the math is simple: the number of animals euthanized, or conversely the number of lives we can save, is determined by the number admitted minus the number released to permanent homes. Reducing euthanasia can only happen if the number coming in goes down or the number going out alive (through reclaim, rescue or adoption) goes up. No matter what happens in between – how long each animal is held, how many are held at once, how small the cages are – we can not outwit this basic principle. However, the issues are so emotionally and politically loaded

that it can rapidly come to seem more complex. I'm not naïve enough to tell you to "just say no to overcrowding." I only have to take a quick look at my bloated to-do list to remind myself how difficult "population control" can be even when I'm only trying to make decisions between what tasks to take on and which to set aside for now. It's hard to say "no" today even though I know tomorrow I'll be less effective and ultimately disappoint some people if I bite off more than I can chew. The stakes are much higher and the emotions much more powerful when living beings are at issue.

If we're going to solve the problem of shelter crowding and resultant compromises in animal welfare, we need a comprehensive plan. Of course we need to let our emotions play a role when making management decisions. But if we do not balance our emotional response (or that of our volunteers and public) with a reasoned analysis, animals may suffer or lives may be un-necessarily lost – even if, paradoxically, we feel better. We need to be careful not to lose sight of our control over what we might later like to deem "fate." We need to be clear about *all* our goals, including those that pertain to animal and community welfare as well as euthanasia and adoption. And we need to deeply understand how decisions made for each animal – or failure to consciously make any decision - impact our ability to reach those goals. We need to define the problem and the solution, just as we have with intake, adoption and euthanasia in many communities. This means defining what overcrowding means for your shelter, but as importantly, deciding on shelter animal welfare standards to strive for rather than just accepting whatever level we can achieve or what has been the norm in the past.

Once we've got our baseline and goals set, we need to develop methods to track progress and implement a warning system to identify problems as they develop and before disaster strikes. We also need to put safety systems in place so that if a new animal management plan does produce an unintended consequence of increasing euthanasia or reducing live release, we can catch and correct that rapidly. Finally, we need to figure out how to communicate all this to our stakeholders – shelter volunteers, employees, supporters and community members.

Perhaps most importantly, we need to accept *as communities* that we can not solve the problem of overpopulation and shelter euthanasia simply by keeping ever more animals in shelters, no matter how fancy or forlorn the circumstances in which they are held. There are certainly times when larger, better designed or more shelters are needed. There are even times – yes, I admit it – when making space for a few more animals will lead to increased reclaims or adoptions, even if this means exceeding the ideal capacity of a facility *short term*. However, if this is a long term reality, the solution should be increasing the capacity of the shelter for humane housing, rather than chronically tolerating an overcrowded situation. Ultimately, the benefits of this line of investment will reach a plateau as long as the number of unwanted or abandoned animals continues to outpace the number reclaimed, rescued or adopted. In order to save more lives, we need to get more animals *out* of shelters – or keep them from becoming unwanted in the first place - rather than squeezing more in. Most of us know this in our heads, but in order to act on it, we need to believe it in our hearts as well.

What's next?

In her column on the Five Freedoms, Dr. Miller described the evolution of shelter medicine as one of the positive developments she's seen in her thirty year career. As a

beneficiary of this phenomenon, I've been able to devote my professional life to understanding how we can keep shelter animals healthy. Now I'm beginning to realize that in many cases, we already have all the knowledge we need– but in order to put that knowledge to work, we need to eliminate policies that guarantee that a certain number of animals will become ill in order to make up the difference between uncontrolled intake and outflow – sickness should not replace time/space euthanasia as a means for population control. We need to combine our new-found knowledge with a commitment to provide each shelter animal with the minimal building blocks of health and well being. We can do that if we give ourselves the tools to limit the number of animals in our care to those we can care for sufficiently without compromising the number of lives we can save.

I know that all this is easier said than done. I recognize the difficulty of “population management” when you're up to your neck in kittens in the summertime. For all its difficulty though, I consider this a profoundly hopeful discussion to have as a profession. We've dared to imagine a future in which no animal is euthanized for lack of a home. Let's also dare to imagine a future in which every homeless animal, from the moment of admission to a shelter, receives at least the level of care proposed for farm animals in confinement. Let's imagine meeting the Five Freedoms and going beyond, such that animals become safer and healthier every day they are in our care.