ANIMALS ARE NOT THE ONLY VICTIMS

Can We Afford the Human Cost of Humane Euthanasia?

By Kris Rerecich
Editor, Alley Cat Allies

IN THE UNITED STATES, EUTHANASIA* IS THE accepted method of disposing of unwanted companion animals.

- The District of Columbia’s animal control contractor killed 5,900 animals in 2004 alone. More than 4,000 were cats.

- In six Texas cities, 194,000 animals were destroyed in shelters during the same time period.

- The National Animal Control Association’s 2004 statistical survey of representative animal control agencies reported euthanasia rates as high as 80 percent.

In all, 5 to 6 million healthy companion animals are killed in our nation’s shelters and animal control facilities every year.

Animal advocates and rescue groups who are working to bring these numbers down focus on saving animals’ lives. But there is another aspect of massive euthanasia that remains largely hidden from public view. It is the disturbing psychological toll that killing so many healthy animals takes on the shelter and agency personnel who must perform the deed.

Although the public knows little about the issue, the harmful effect of euthanasia-related work has been observed in the sheltering field for at least 30 years. The largest body of studies and articles on this subject, however, dates from 1990 through last year, a period in which public and industry awareness of the need to improve conditions and upgrade shelter procedures was rising.

Who is Harmed
Shelter workers generally take their jobs because they love and want to help animals, and they often experience considerable emotional anguish from participating in animal euthanasias. In 1996, researchers Debra White and Ruth Shawhan reported the reactions to euthanasia work of 200 shelter workers who had been in their jobs in 86 shelters for periods of less than one year to considerably more than five years. Some had little or no emotional feelings toward euthanasia:

“It doesn’t bother me. I’ve been at it too long.”
(16 years)

“I have been here long enough to know not to get attached to the animals, but sometimes I still do.”
Others were profoundly affected.

“To make a decision to end a life is the hardest decision I have ever made.”

“I overeat, am stressed, have high blood pressure and an ulcer. Also, I have difficult relationships with others.” (veterinarian)

“I entered therapy in the beginning of June and am being medicated for severe depression. Much of my anger, guilt, frustration, and outright sadness is connected to my work and my passion for wanting to save the animals I kill.” (kennel manager)

“I sometimes go home thinking I am a murderer.”

The White/Shawhan study focused on how shelter workers learned to cope with their reactions to killing. Learning to cope is the standard theme in studies on this subject.

In 2000, the American Veterinary Medical Association’s panel on euthanasia warned that “constant exposure to, or participation in, euthanasia procedures can cause a psychologic state characterized by a strong sense of work dissatisfaction or alienation....” The report states that this is a principal reason for employee turnover and suggests that coping strategies be adopted to prevent, decrease, or eliminate the problem.

Additional research focused on coping mechanisms was published in 2004. Funded by the Humane Society of the United States, researchers Charlie Reeve, et al., worked with attendees at the HSUS Animal Care Expo 2002. This study asserts that “thousands of people charged with performing animal euthanasia...are an at-risk population...at risk for a variety of psychological, emotional, and physical ailments such as high blood pressure, ulcers, unresolved grief, depression, substance abuse, and suicide.” To take part in the study, participants must have been in their jobs for at least two years. These people were categorized as “survivors”:

“...the highest degree of turnover occurs within the first year of experience. Thus, two years of experience seems reasonable as a cutoff to distinguish those who ‘survived’ at least the initial confrontation with euthanasia from those who did not.”

**Turning Points**

The Reeve study identified specific turning-point events that influence adjustment to euthanasia-related work. Of the 10 events specified, nine pertain directly to euthanizing animals, e.g., a first or a difficult euthanasia experience, or euthanasia of healthy animals (all “downturn” events). Upturn events, that is, events that made the person feel better about the job, included “reduced number of animals euthanized at a shelter” and “reduced amount of euthanasia for [the] individual.”

A notable fact about the Reeve study and its predecessors is that none of them suggests a change in policy—that is, taking in and killing fewer animals—as a way to reduce the impact of euthanasia on shelter workers.

“The authors confuse the symptoms of disease (dis-ease) with the disease itself,” says Alley Cat Allies general counsel Wendy Anderson. “They assume that the sole issue is how to treat the psychological distress—the symptoms—and they ignore whether that distress merely manifests another, more profound problem, namely that euthanasia of healthy animals is toxic to those involved.

“If most shelter employees leave before two years, as the authors state,” Anderson continues, “and if the very few who stay struggle to cope and never fully habituate to euthanasia, why do the authors focus on developing better coping skills? Aren’t they missing the fundamental issue? If 100 people are hired at a shelter and two years later only 5 are left, isn’t the question, why did 95 leave, and not why did 5 stay?”
Feral Cats Don’t Belong in Shelters

By Becky Robinson
National Director, Alley Cat Allies

FERAL CATS ARE KILLED IN SHELTERS because they do not fit into a shelter’s objectives. Shelters strive to find homes for adoptable animals—that is, companion animals that are lost, abandoned, or stray, and that can be put up for adoption. Feral cats are not stray cats. They are wild and are never candidates for adoption. Whether it is immediately or after a holding period, feral cats are killed in shelters.

What does this accomplish? It has no effect on reducing the number of feral cats in the community. Other cats move in; survivors reproduce quickly. If anything, their numbers grow. Stopping reproduction is the only way to reduce feral cat numbers.

It does not lessen complaints about cats or stop nuisance behaviors. Sterilizing the cats does both.

It does not protect public health. Studies show that the health of feral cats is on a par with owned cats. Vaccinating, sterilizing, and returning healthy feral cats to managed colonies is the best way to protect the public from wildlife diseases.

It does nothing to improve the overall welfare of cats. Cats outdoors are a fact of life. As many as one in five U.S. households feeds outdoor cats. We can reduce cat numbers and improve their welfare—and our own—through spay/neuter and humane management.

It adds to the stress, the work, and the potential liability that shelters and shelter personnel deal with daily.

There is a simple solution.

Every shelter can reduce the stress of euthanasia-related work on shelter personnel, lower its euthanasia rate, and help bring cat numbers down by stopping the intake of feral cats and offering the public help with Trap-Neuter-Return (TNR) and low-cost spay/neuter services.

Experience has shown that communities adjust to and then embrace this policy change. Calls about cats are now routinely categorized as “complaints,” but records show that most people call to ask for help with nuisance behaviors or to get the cats sterilized. They do not want to have the cats killed. And true complaints drop off sharply when the cats have been sterilized and vaccinated.

Euthanasia is the leading cause of death among cats and dogs in the United States. Working together, we can conquer one aspect of it. We can stop killing healthy feral cats.

Alley Cat Allies is the foremost expert on feral cats. We want to help every shelter and animal control agency to make this transition. For information and assistance, go to www.alleycat.org, e-mail alleycat@alleycat.org; or call 240-482-1980, ext 330.
Solutions

“I had a mama and three little kittens, and I euthanized the mama and just laid her there in the cage. Then I injected one of the little babies and laid it next to her, and it got up and crawled over onto its mama—and that was it. I was done. Doing that isn’t why I got into this work.”

Kent Robertson (in California, 1980)

Robertson quit the job. He later returned to the animal control field in the administrative end and is now Executive Director of Dallas Animal Services, Dallas, Texas.

“In our little world, it is hard to go home and tell your spouse or anyone else how you feel about some of the stuff we have to see,” says Robertson. “Beyond the euthanasia, there’s the cruelty, the neglect. Animal control groups are constantly beaten up by being called killers, murderers, and all this kind of thing. That has an effect on folks.”

The vast majority of workers in one study felt criticized and misunderstood. Many hid the fact that they performed euthanasia to avoid these reactions. “One worker, for instance, said she has learned to tell people that she ‘drives an animal ambulance.’”

“You don’t have to be a euthanasia tech to be affected by euthanasia,” says Maryland clinical psychologist Dr. Carol A. Brothers. “Anybody who cares about or is involved with animals in our country is affected by overpopulation…and it’s heartbreaking for everyone.”

Keeping feral cats out of shelters helps the psychological impact problem enormously, says Dr. Brothers. “People in shelters feel that they end up with the dirty work of having to do the euthanizing. I think [Trap-Neuter-Return] is a very responsible way to care for feral cats. It is humane in all the senses of the word, which includes both animals and humanity.”

*Clarification: The term “euthanasia” has been adopted by the shelter and animal control community to describe the killing not only of untreated sick or injured animals, but also of those deemed to be in excess or unadoptable. We use the term in this context for this article. However, true euthanasia is only “the act or practice of ending the life of an individual suffering from a terminal illness or an incurable condition” (American Heritage Dictionary, Fourth Edition).

**Carol A. Brothers, PhD, is president of Support Services for Animal Care Professionals, a nonprofit organization that conducts compassion fatigue and burnout workshops for animal control officers and shelter personnel in the United States and Canada. 410-451-8882; carol_ab@juno.com.

ENDNOTES


3Ibid.


RELATED RESEARCH


White D. It’s a dog’s life—animal shelter workers share the psychological impact of having to euthanize animals as part of their daily routine. Psychology Today, Nov-Dec 1998.

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