THE WELFARE BASIS FOR EUTHANASIA OF DOGS AND CATS AND POLICY DEVELOPMENT
International Companion Animal Management Coalition
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The International Companion Animal Management Coalition

The International Companion Animal Management (ICAM) Coalition is made up of representatives from the World Society for the Protection of Animals (WSPA), the Humane Society International (HSI), the International Fund for Animal Welfare (IFAW), the international arm of the Royal Society for the Prevention of Cruelty to Animals (RSPCA International), the World Small Animals Veterinary Association (WSAVA) and the Alliance for Rabies Control (ARC).

This group was set up to fulfil several objectives, including the sharing of information and ideas on companion animal population management, with a view to coordinating and improving member organisations’ recommendations and guidance. Each organisation has agreed that it is important to strive to improve our mutual understanding through collaboration. We have a responsibility as funding and advisory bodies to ensure we are offering the most accurate guidance, based on the latest available data and concepts, to those involved with dog and cat population management in the field. We also believe it is important that we endeavour to be transparent and to document our opinions and philosophy whenever possible. It is to this end that this document has been produced – it represents our recommendations at the time of writing, based on the knowledge we have accrued to date, and will be subject to updates when appropriate.

If you have any comments or suggestions about this guidance please contact the ICAM Coalition at info@icam-coalition.org.

Who is this guidance for?

This guidance has been developed for use by any public, private or charitable organisation, agency or individual with responsibility for a programme of work involving dogs or cats, including:
- animal shelters
- re-homing centres
- veterinary clinics
- animal health programmes.

All of these services are responsible for the welfare of the animals in their care and as such may have to make difficult decisions about the future of individual animals. This guidance has been produced in consultation with a number of experts in veterinary science, animal welfare management and animal management practitioners from countries around the world. As such it is hoped that it will be relevant and applicable in any country. For the rest of this document we will use the term ‘organisation’ to encompass all of the people who may use this guidance.

What is euthanasia?

The term euthanasia comes from the Greek ‘eu’ meaning ‘good’ and ‘thanatos’ meaning ‘death’. Thus we should strive to provide as humane a death as possible for an individual animal where euthanasia is considered the best option, based on a range of criteria. These criteria should be primarily related to the current and future welfare state of the animal.

There are four primary criteria that ensure death caused by methods of euthanasia is humane. The method must:
1. minimise pain and discomfort
2. achieve rapid unconsciousness followed by death
3. minimise animal fear and distress
4. be reliable and irreversible.

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1. Input was received from government bodies, non-government organisations and individual experts in the following countries: Brazil, Costa Rica, Croatia, Cyprus, India, Italy, Nepal, the Philippines, Serbia, Thailand, United Kingdom, USA, and Zambia.
3. Rapid can be defined as usually no more than five to seven seconds to loss of consciousness.
Why consider euthanasia?

The decision to euthanase is just one possible outcome of an animal welfare assessment. An organisation does not set out to decide whether or not to euthanase, but rather to identify if any welfare problems exist and what can be done to help. If an animal that you are responsible for (i.e. an animal that is in your care, that is directly affected by your work programme, or is within the potential scope of your work programme) is suffering physical, behavioural and/or psychological problems or will unavoidably suffer such problems if no action is taken, then you are responsible for deciding on the best course of action to help that animal.

Death is inevitable for all animals. However, suffering in the period leading up to death is not always inevitable and can be avoided by human intervention. From an animal welfare perspective, when the suffering of an animal cannot be effectively reduced or prevented, humanely ending the life of the suffering animal may be considered the best course of action for the animal. This decision is not an easy one and if euthanasia is to be used effectively there needs to be a clear evidence-based policy and process to ensure it is selected appropriately and carried out humanely.

Euthanasia as a welfare tool

Deciding if and when to euthanase can be extremely difficult. In some situations the decision is clear, for example when the law states that a rabid animal must be euthanased in order to prevent spread of disease. However, in most situations the decision won’t be so clear. Every organisation functions within a different set of circumstances and therefore it is up to each to consider carefully under which conditions euthanasia is appropriate or not.

Your decision regarding when and why to euthanase will depend on a wide range of factors, in particular whether your organisation has sufficient financial resources, staff resources, facilities and veterinary expertise to maintain a reasonable quality of life for a particular animal. Quality of life is a subjective term; it can therefore be helpful to think about animal needs in terms of the ‘five welfare needs’.

Five welfare needs

- Need for a suitable environment.
- Need for a suitable diet.
- Need to be able to exhibit normal behaviour patterns.
- Need to be housed with, or apart from, other animals.
- Need to be protected from pain, suffering, injury and disease.

It should be noted that simply providing an animal with ‘access’ to the five welfare needs may not ensure that it will enjoy good welfare. This is solely a framework by which to consider welfare needs. However, if these minimum needs cannot be met, you should consider how standards can be improved to meet these needs. If this is not possible then it may become necessary to consider euthanasia as a welfare option. The five welfare needs may be compromised sufficiently to justify euthanasia under a range of circumstances. For example:

**In the community:** animals may suffer if they are not looked after responsibly, for example if they become injured when roaming the streets or if they become malnourished through lack of an appropriate diet. In some communities there may be a lack of affordable, accessible veterinary services, which means that illnesses and injuries are left untreated and can result in serious suffering.

**In shelters:** animals kept long term in shelters may suffer from disease and sometimes neglect and may become increasingly difficult to re-home because their behaviour deteriorates over time as a result of being kept in unsuitable conditions.

Whatever your position on euthanasia, it is important to have thought through your decision in an informed and consultative manner. It is also vital to be able to justify and explain your decision in terms that are consistent with your policies and mandates as an organisation with responsibility for a programme of work involving dogs or cats. If euthanasia is not considered the best option for a particular animal, you will need to take alternative action to protect the welfare of that animal.

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4. The five welfare needs are listed in the Animal Welfare Act (2006) for England and Wales. They have been developed specifically for companion animals from the widely recognised ‘five freedoms’. For further information about the five freedoms see [www.fawc.org.uk](http://www.fawc.org.uk)

Why is it important to have a euthanasia policy?

The ICAM Coalition believes that it is essential that organisations working with animals have fully considered and agreed a policy for the euthanasia of animals in their care so that an informed and supported decision can be made when the time arises. We understand that animal care, rescue and population management programmes operate in a wide range of contexts and it is not possible to provide a set of euthanasia criteria to fit every situation. Therefore this guidance does not tell you exactly what your euthanasia policy should contain, but it will help you to develop a euthanasia policy that is founded on principles of animal welfare and that is suitable for your situation.

Why a euthanasia policy is beneficial.

- All stakeholders involved in the development of the policy agree and understand the reasons for euthanasia and are therefore able to consistently provide the best service for animals in their care.
- It ensures the euthanasia decision is applied in the right situation, at the right time and using the correct methods, therefore enabling the best welfare possible.
- It decreases the need for subjective decision making and therefore reduces stress for those involved in the decision-making process and the potential for conflict between staff.
- It can be made available in writing so that management, staff and members of the public can refer to it at all times.
- It provides a standard to which staff can be trained.
- It provides a standard that can be regularly reviewed and updated – the policy should be a ‘living’ document that staff are encouraged to develop initially and continue to be involved in by monitoring its implementation and development if necessary.

Case studies

Croatia
An animal shelter reported that it experienced problems when a veterinarian advised euthanasia but some staff members disagreed with him. The veterinarian argued that it was an act of cruelty to keep a dog alive if it was suffering, but the staff felt that ‘humans should not decide whether animals live or die’. This conflict could have been avoided if the organisation had written a clear euthanasia policy that all had read and understood.

Cyprus
An animal welfare organisation found that ‘many people believed bringing an animal to a rescue centre guaranteed it a home for life. However, given the number of animals taken in, it would have been impossible for us to give lifelong sanctuary to them all. This misunderstanding resulted in negative media coverage, verbal and physical abuse and complaints that we killed all animals brought to us’. The organisation found that by explaining their decisions and reasons for euthanasia the criticism was reduced.

Brazil
The staff at an animal shelter found that having a euthanasia policy enabled them to work ‘with reason and not only with emotion’.
Creating a multi-stakeholder committee

A number of individuals and organisations may have an interest in being involved in the development of your organisation’s euthanasia policy. It is preferable to include them from the early stages of the process so that their views can be taken into consideration and ultimately they are more likely to be supportive of the final policy. These might include (* indicates essential):

- organisation trustees*
- organisation management*
- organisation staff* – those involved directly in euthanasia decision making and practice, but also other staff who will have an interest in the organisation’s policy (to include those who choose animals for euthanasia, euthanasia technicians, animal caretakers, foster staff, field staff, veterinary staff, adoption staff, communications staff)
- veterinarians* – will be able to advise on the practicalities of the policy and relevant science
- welfare advisers* – may be a vet, but could also be a professional trained in animal welfare
- government – usually local, but you might also want to consult with central government if it is involved in your programme of work or if contentious issues might be raised
- non-governmental organisations – other organisations working on similar issues or programmes of work; if you can reach a consensus it will help joint working and you can share good practice
- legal advisors* – it is essential to ensure that your policy complies with the law in your country
- local community leaders/representatives – members of the public will have an interest in the activities of your organisation and it is best that they are involved in the process so that they understand any decisions made
- religious leaders/representatives – particularly if euthanasia is a religious issue in your community.

Following the initial review this working group can then evolve into a formal committee with representation from each relevant stakeholder. This committee should at least have ‘terms of reference’, a list of membership and outline of roles for members, a commitment to regular meetings, action plan updates and a clear aim. It may be possible to base this committee on similar models in the country, for example those created for improving human health.

- Each member within the committee is responsible for representing the needs of their stakeholders with regards to animal welfare and the use of euthanasia (e.g. veterinary staff would raise medical considerations, management would raise financial and organisational considerations, staff would raise operational considerations etc.).
- Based on the issues raised by the initial review, a shared understanding of welfare issues can be developed, and the needs of each stakeholder should be understood. From this proposed policy and implementation measures can be drafted.
- The actions required by each stakeholder, both in the short- and long-term, should be discussed and agreed by the committee. This should include measures for further research and consultation if necessary, writing of the policy, training staff in the new policy, communicating the policy to a wider audience if necessary and ongoing monitoring, evaluation and review of the policy.
- Once the new policy is implemented regular meetings may be required to update on progress and discuss the results of monitoring and evaluation and hence any changes needed to the policy.

The following are suggestions for improving the functioning of the committee.

- Seminars or workshops can be used in the planning stage to encourage input and sharing of ideas, this sort of event can also draw on expertise not normally present in the committee.
- Clarity of roles including details such as administrative issues (e.g. minutes, meeting arrangements etc.) will help create realistic expectations. These should also be regularly reviewed and rotated if suitable.
- As much as possible the committee should be transparent to encourage wider confidence in the policy development.
- The committee will inevitably experience differences of opinion; clear guidance and an understanding of how such situations will be managed will help maintain cohesion.
Developing your policy

There are three stages to developing a comprehensive euthanasia policy.

1. **Initial review – understanding your situation and the need for euthanasia.**
2. **Developing an overarching euthanasia policy.**
3. **Developing a detailed assessment tool for the euthanasia of individual animals.**

**Participatory techniques**

Euthanasia is a sensitive topic and sometimes staff or stakeholders strongly disagree with each other about when it should be used. Although there will always be a need to consider cases on an individual basis, a decision-making structure can help staff to analyse the situation objectively. To ensure maximum support for the resulting decisions the approach towards creating a decision-making structure should be participatory. Participatory techniques can help to keep discussions objective and enable everyone's opinion to be included. They will help staff to understand the reasoning behind recommendations and procedures.

Examples of such techniques or exercises have been included within the following section. It is beneficial to use a suitably skilled facilitator to run these exercises, preferably someone who is impartial to the outcome.

**Initial review – understanding your situation and the need for euthanasia**

One of the first roles of the multi-stakeholder committee will be to review the current situation in order to come to a shared understanding of what you are trying to achieve and the challenges you face. To achieve this it may help to go through the following processes together.

**Participatory discussions about animal welfare and your programme’s aims**

It is important to begin with general discussions so that all stakeholders start from a shared understanding of the aims of your work programme and the context you are operating in.

**Questions you might consider**

- What are the ethical principles of your organisation?
- What does ‘welfare’ mean to you?
- What is the role of your work programme? What welfare issues are you seeking to address?
- How are your activities affecting the lives of animals?
- What responsibilities does your organisation have to the animals in its care?
- What is the scope of the welfare challenge you are dealing with? Think about how many animals need help annually in the community and how many of these animals does your organisation typically care for in a year?
- What do you hope to achieve in the long term?
Participatory exercise 1

“Thought showering” is a technique, generally used in a group setting, to quickly generate a large number of ideas about a specific problem or topic. It can help you:
- encourage creative thinking and generate enthusiasm
- encourage participation and building on the ideas of others
- avoid over analysing by not evaluating ideas.

It can be helpful to use an impartial facilitator.

Method: Write down the question for discussion where everyone can see it, e.g. on a flip chart.
- Structured thought shower – participants are encouraged to contribute one at a time and their input is written unedited on the board. If they run out of ideas they can state ‘pass’. When no more ideas are forthcoming the input is reviewed together; questioning is encouraged but criticism is not.
  - Advantages – everyone has an equal chance to contribute.
  - Disadvantages – can feel rigid and restrictive.

- Unstructured thought shower – participants contribute ideas as they come to mind.
  - Advantages – participants can build on each other’s ideas. Relaxed atmosphere.
  - Disadvantages – less assertive participants may not contribute.

- Anonymous thought shower – participants individually write ideas on sticky-back notes or small slips of paper. Collect the papers and display them for all to see.
  - Advantages – provides confidentiality so that participants may feel more confident about revealing ideas. Avoids disruptive analysis by other participants during the process. It can help prevent a group from being unduly influenced by a single participant or common flow of ideas.
  - Disadvantages – the group may lose the synergy that comes from open discussions.

It is often best to use a combination of methods. Once ideas have been generated:
- reduce your list to the most important items
- combine items that are similar
- discuss each item, in turn, on its own merits
- give each person one final chance to add items.

Output: This exercise will help produce an agreed understanding of the role of your organisation, its impact on animals and on what welfare means to your stakeholders. This will be an essential starting point when considering how and when you might use euthanasia.

Identifying the capacity of your programme

The committee needs to define the limits of the service that you can realistically and effectively provide and to identify where weaknesses may occur in service provision. The focus should be on feasibility; many things might be possible in theory, but not in practice, and you will have to prioritise the use of resources. Consider the below questions.

a) What are the welfare needs of animals in your work programme?
- What are the needs of the animals you are dealing with? For example, adequate food, accommodation, water, exercise, humane handling, health care, hygiene, socialisation.
- What standards do you expect to meet? Are you achieving these standards?
b) What are the signs of and reasons for poor welfare in the animals you deal with?

As a group you might want to consider what indicators you can look for to determine the welfare state of animals in your work programme, whether that is an animal on the street, in someone’s home or in a shelter. There is a range of approaches to determining the welfare state of animal. On a simple level, you can assess the level of welfare by monitoring simple indicators such as: the level of food and water available; the incidence of injury, disease and mortality; and behavioural signs of suffering.

Participatory exercise 2
Exploring animal welfare and suffering

Some behavioural understanding will be required for this exercise. It might be beneficial to invite a behavioural expert to be involved and to refer to existing research on this subject.

What does a ‘happy’ dog look like and do? Draw the outline of a dog on paper and by each body part write the signs of a dog enjoying good welfare. Discuss behaviours that can be misinterpreted, e.g. a wagging tail can indicate stress rather than a greeting.

What does an ‘unhappy’ dog look like and do?
Discuss how dogs cope with things differently. Some dogs might withdraw and offer a reduced range of behaviours in response to stress, sleeping for most of the time and not reacting to stimuli. Other dogs might be over-active as a result of stress. Discuss behaviours associated with good and bad welfare. Consider if the behaviour is normal, normal but out of context, or abnormal. For example if a dog is licking the wall, this is abnormal. If a dog is barking excessively, this could be normal but out of context.

Discuss the most common clinical conditions of animals in your care. Is there any way to categorise levels of suffering, for example by severity and duration? (Note: there is no easy answer to this but it is useful to discuss it). Which conditions are treatable? Of those, which are feasibly treatable? Consider the financial implications – if treatment for an ongoing or complicated condition is expensive, what effect does this have on the ability to treat other animals?

Output: This exercise will help you to produce an agreed set of indicators of the state of welfare of animals in your work programme. If the indicators show that animals are not experiencing a good state of welfare, you will need to investigate further to identify the causes of poor welfare, the degree to which it is occurring (severity and duration), and whether and how welfare can be improved.

Participatory exercise 2

As a committee you could produce a cobweb chart to consider the needs of a cat or dog and how well this can be met in your work programme or facility.

Method: Ask the group what a dog or cat needs. You might want to use the five welfare needs (discussed earlier) as a starting point. On a card draw a symbol to represent that need and write criteria that fulfil that need (e.g. Need = water, Criteria = freely available, clean, in a clean container, changed regularly, unspillable). Repeat for as many needs as you can think of. Place the cards in a large circle. Find a marker for the centre of the circle. Then for each need consider how well this can be met in the specific context of that programme/situation. If the need can be met well place a mark towards the outside of the circle, if the need cannot be met well place a mark towards the centre of the circle. It is important not to confuse how well the need could be met with how well it is met. If the needs are not being met as well as they should be this should be discussed and solutions suggested.

It might be beneficial to repeat the exercise for specific categories of animal that you deal with, such as a young puppy or an elderly dog.

Output: This exercise should stimulate discussion about what a cat or dog needs and provides a starting point from which to discuss welfare issues and needs. It will highlight which animal needs your programme is currently struggling to meet. It could be repeated in three months’ time to see if progress has been made.

It is extremely difficult to classify levels of suffering in animals and as a result organisations often use vague terms, such as ‘extreme suffering’. This can lead to confusion when welfare decisions have to be made and it is often left up to the interpretation of the individual person. It is helpful if you can remove some of this subjectivity by discussing and agreeing as a group what exactly you mean by such terms. You can use indicators or scales, with definitions to clarify what you mean by different levels of suffering.

**Participatory exercise 4**

**Welfare matrix:** Create a matrix like the one below on a large scale. In the left-hand column list the welfare issues that are relevant to your work programme (e.g. poor diet, not enough exercise, disease). Along the top create columns for suffering, number of animals affected, duration (whole life, minutes or hours, regular or not), how easy it is to solve the problem using existing resources, and alternative options. Then decide together what mark to give each issue in each category on a scale of 1 to 10 (1 is low and 10 is high – you will need to decide as a group how to allocate scores against the scale) and come up with suggestions for how to deal with the problems. This can be done through discussion or by giving individual marks and taking an average.

**Output:** Together you should reflect on the outcomes. Some welfare problems might involve high levels of suffering, affecting many animals and taking place over a long period of time, but be easy to solve; others might be difficult to solve, but not involve many animals. By going through this process it can help the group to prioritise where to focus on making improvements.

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<table>
<thead>
<tr>
<th>Suffering</th>
<th>Number of animals</th>
<th>Duration</th>
<th>Ability to deal</th>
<th>Alternative options</th>
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<tbody>
<tr>
<td>Health</td>
<td></td>
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<tr>
<td>Mange</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Injury (from cars)</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Injury (from people)</td>
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<tr>
<td>Venereal tumours</td>
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<td>Pregnancy and lactation</td>
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<tr>
<td>Behavioural challenges</td>
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<tr>
<td>Aggression</td>
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<tr>
<td>Feral (unowned/uncared for?)</td>
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<tr>
<td>Tied up all day</td>
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<tr>
<td>Kept in social isolation</td>
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<td></td>
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<tr>
<td>Constant tail chasing</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
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c) Under normal circumstances how many animals at one time or during a certain time period can your programme effectively handle using existing resources? How will you know that you have reached capacity? How often do you exceed capacity?

- What resources are needed to maintain your desired welfare standards? Are these available? List and quantify the physical, financial and trained human resources required.
- Which diseases/injuries/behavioural issues are you able to treat and which are you unable to treat, given existing resources?
- What other factors might affect your capacity? For example, a sudden influx of animals, spread of disease, natural disaster, staffing changes, changes in your financial situation.
- Is your programme of work being pushed beyond its ideal operating capacity?
- What are the implications of exceeding this capacity – for staff and animals? Which aspects of the five welfare needs are compromised?
- How will you know when you have reached capacity? What indicators could you use? What records do you need to keep and who will be responsible for reviewing them?

Planning to meet welfare needs – do you need a euthanasia policy?

Now that you have discussed and agreed the welfare needs of animals in your care and your programme’s capacity you should explore the options available to you when you are working under pressure or at capacity. It is important to agree in advance how you will deal with animals whose basic welfare needs cannot be met and those that you come across that are beyond the scope of your capacity. As a group this is your opportunity to carry out a stock take of existing provisions and options and to identify future needs. You might consider the following questions.

a) What are the options for animals whose needs you cannot meet when your programme is nearing or functioning at capacity? For example, are there any other organisations that are helping or could help with excess animals? Could you use fostering services? Is re-homing an option? Should you let the public/authorities know that you cannot deal with any more animals? Could the euthanasia of animals in the poorest state of welfare help improve the welfare of the remaining animals in your care or enable you to provide a better service to more animals in the long term?

b) What is the current position on euthanasia in your organisation? Is there a written policy? Is it up to date and regularly reviewed?

c) If you do carry out euthanasia:
- How is the decision to euthanase an animal made? What criteria are used?
- Who carries out euthanasia?
- What methods are currently used for euthanasia?
- How are decisions and actions recorded?
- What training is provided for staff members in decision making and carrying out euthanasia?
- Are there any problems relating to euthanasia in your organisation?

d) If euthanasia is not performed what alternative options are used? Are there any welfare problems that arise as a direct result of this, either to individual animals or to the shelter population as a whole?

e) What euthanasia policies do other organisations in your region have?

f) What is the legal position on euthanasia in your country?

g) Are there any religious issues relating to euthanasia that you should be aware of?

h) What is the public perception on euthanasia? Gain a cross-section of opinions.

Output

This initial review should result in:
- a shared understanding of the need for these discussions and for a euthanasia policy
- ‘buy-in’ to the developing policy from all stakeholders
- identification of areas in your programme when animal welfare could become compromised and establishment of a threshold at which euthanasia may become a necessary welfare tool.

2 Developing an overarching euthanasia policy

Once the committee has developed a shared understanding of the need for a euthanasia policy you will be ready to formulate a detailed policy. The following section outlines the type of information that you can include in your written policy and issues to consider.

Position statement

Most euthanasia policies will start with an overarching position statement. This should describe your organisation’s general position on euthanasia. Note that it might only be possible to define this overarching position once you have been through the rest of the process to decide your reasons and criteria for euthanasia.
Position statements

The organisations that wrote this guidance each have their own position statement. They feel it is important to be transparent about their euthanasia policy and how it has been developed. It should be noted that the following positions are the consequence of working in a range of situations with varying medical and husbandry resources available. Different situations require different solutions.

WSPA’s position
WSPA believes euthanasia is acceptable and necessary when an animal is suffering due to an incurable illness or injury, or when an animal presents a significant risk to human health and safety or the safety of other animals, through disease or aggressive behaviour. WSPA does not condone the mass destruction of dogs and cats as a population control measure. Successful control of dog and cat populations requires a co-ordinated strategy that has been agreed by all stakeholders.

WSPA reluctantly accepts that there are circumstances when the euthanasia of healthy animals is required, for example in the case of animals that cannot be re-homed or safely released, or to avoid overcrowding in shelters that would compromise the welfare of animals being held there.

The RSPCA’s position
The RSPCA is working for a world in which no re-homeable animal is put to sleep. Currently the RSPCA accepts, with great reluctance, that in certain circumstances, euthanasia may be necessary, when the animal is not re-homeable, because it is sick or injured, for behavioural reasons or occasionally because there are no appropriate homes available and the animal would therefore endure long-term suffering through deprivation of basic needs.

The RSPCA will continue to strive for a future where the euthanasia of fit and healthy animals will be unnecessary.

Euthanasia is forced on the RSPCA by irresponsible ownership, overproduction, and the inadequate enforcement of legislation. This may be because of indiscriminate breeding for profit, current trends in the marketing of animals, and problems caused by the effects of social circumstances, including owners failing to neuter their pets.

Where euthanasia is carried out it must be by trained operators using approved methods. Approved methods in this context are contained within published RSPCA guidelines on euthanasia.

IFAW’s position
It is IFAW’s position that when it is apparent that the quality of life of the individual is, or will likely be, unacceptably compromised, and this cannot be remedied or prevented, IFAW regretfully accepts that euthanasia may be in the best interests of the animal.

IFAW has published euthanasia criteria to ensure animals are not euthanased indiscriminately. That is, animals are not euthanased except on the grounds of health, behaviour, inadequate guardianship or unavoidable inhumane death once all practicable alternatives to euthanasia have been ruled out.

HSI’s position
Euthanasia is a challenging issue for animal protection organisations around the world. Every animal protection organisation will be faced at some point with decisions of what to do with suffering animals and it is important that such organisations not make decisions about the practice of euthanasia at that time. All organisations should develop a coherent euthanasia policy and practice that meets their needs and the needs of the animals entrusted to their care. One of the most critical responsibilities of those in the animal care and sheltering field is to provide the most humane death possible for companion animals when euthanasia is necessary.
Reasons for euthanasia

Your policy will need to state the agreed reasons for euthanasia. These reasons will be dependent upon the functions, scope and capacity of your programme. A range of options is presented below. We would recommend that all euthanasia policies that have animal welfare as a central principle should consider medical and behavioural reasons as an absolute minimum. We have also suggested additional categories that may indirectly affect animal welfare, which you might wish to consider.

Medical
- An animal that is suffering from an acute or chronic disease, illness, condition or pain that cannot be alleviated to a satisfactory degree, given the practical and financial resources available. Suffering can be defined here as a restriction of any or all of the five welfare needs due to an acute chronic disease, illness or condition.
- An animal that is suffering from an acute or chronic disease or illness that might pose a risk to other animals or to people, particularly if appropriate preventative measures are not in place.

Behavioural
- An animal with a behavioural problem that results in suffering due to the animal experiencing fear and distress that cannot be successfully treated with behaviour therapy considering the constraints on practical and financial resources available.
- An animal with a behavioural problem that presents a risk to itself, other animals, people or the environment that cannot be successfully treated considering the constraints on practical and financial resources available.

Lack of resources
- An animal that cannot be looked after or treated due to lack of finances, staff, expertise, suitable equipment or facilities and will suffer as a result.
- An animal that is holding space over a long period (e.g. because it cannot be re-homed) that could be used to benefit a large number of other animals.

Inadequate guardianship
- An animal whose needs (as identified by the five welfare needs) cannot be met due to a lack of owner/adequate guardian/community care.

Legal order
- An animal that has been ordered by law to be euthanased, e.g. for disease control.

7. Adequate guardianship is a term developed by IFAW that describes the minimum care needed for a dog or cat in order for the animal to maintain an acceptable level of welfare.
Criteria for carrying out euthanasia

Once you have decided on the reasons for euthanasia that are relevant to your organisation’s functions you will need to provide detailed criteria of how and when the decision should be made. The reason may be quite general, for example (due to behavioural problems), but the criteria needs to be very specific, for example, (aggressive behavioural problems that cannot be readily addressed with behaviour treatment because the behavioural expertise required to treat the behaviour problem cannot be provided).

IAWF’s euthanasia criteria for medical reasons

- An animal that is suffering, or will likely suffer, from an acute or chronic disease, illness, condition or pain that:
  a) cannot be, or is unlikely to be, readily ameliorated (made better), or
  b) is, or will likely be, unresponsive to treatment, or
  c) will likely recur or relapse when treatment ceases, or
  d) requires ongoing intensive or expensive treatment that the owner or guardian is unable or unwilling to afford.

- An animal that is suffering from an acute or chronic disease, illness, condition or pain, but cannot be properly evaluated or treated due to:
  a) detrimental behaviour, i.e. aggression, including fear-aggression, or
  b) lack of facilities or expertise.

- If appropriate veterinary and/or nursing care cannot be given due to lack of facilities, staff or expertise.

- If a suitable environment for treatment and recuperation cannot be provided.

- If an animal has surgical complications that are unlikely to be manageable or are initially deemed manageable but are:
  a) subsequently unresponsive to standard intervention, or
  b) likely to be life threatening despite standard intervention.

- An animal that tests positive for endemic or non-endemic disease that is likely to develop clinical illness in the future, but is unlikely to be presented or available to institute intervention (treatment or euthanasia) when required.

- Animals with infectious (endemic or non-endemic) disease that:
  a) presents a significant risk to other animals, and
  b) where an isolation unit is not available, or
  c) where an isolation unit is not adequate to prevent the spread of disease.

- Where the animal’s illness, or treatment of the illness, presents a public health or safety risk to humans.

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8. This is one section of IAWF’s euthanasia criteria, to be used in conjunction with criteria for behavioural reasons and inadequate guardianship, see IAWF’s Companion animal field manual - primary veterinary health care standards, Appendix 4, http://www.ifaw.org/Publications/Program_Publications/Companion_Animals/assets_upload_file726_61605.pdf

9. For example, if one pup in a litter presents with parvo virus infection it may be reasonable to assume that the majority, if not all the pups, within the litter will become infected.
Details matter when you are writing criteria for euthanasia. It is important that everybody involved has a shared understanding of exactly what is meant by each criterion. When defining the terms that they are using, some organisations find it useful to remove emotive language, ensuring clarity. In the USA, for example, a group of animal welfare profession leaders came together to find common ground and to work collaboratively to reduce the need for the euthanasia of healthy and treatable companion animals. They developed the Asilomar Accords\(^\text{10}\), which include a set of guiding principles, standardised definitions, a statistics table for tracking shelter populations and a formula for determining shelter release rates.

The definitions (below) are designed to facilitate the data collection process and assure consistent reporting across agencies. While the Asilomar Accords and terminology have not eliminated all arguments about when or whether an animal might be euthanased, they have led to better joint working and an increasing understanding between various groups of animal shelters and animal rescuers.

### Asilomar definitions

**Healthy:** The term ‘healthy’ means and includes all dogs and cats eight weeks of age or older that, at or subsequent to the time the animal is taken into possession, have manifested no sign of a behavioural or temperamental characteristic that could pose a health or safety risk or otherwise make the animal unsuitable for placement as a pet, and have manifested no sign of disease, injury, a congenital or hereditary condition that adversely affects the health of the animal or that is likely to adversely affect the animal’s health in the future.

**Treatable:** The term ‘treatable’ means and includes all dogs and cats who are ‘rehabilitatable’ and all dogs and cats who are ‘manageable’.

**Rehabilitatable:** The term ‘rehabilitatable’ means and includes all dogs and cats who are not ‘healthy’, but who are likely to become ‘healthy’, if given medical, foster, behavioural, or other care equivalent to the care typically provided to pets by reasonable and caring pet owners/guardians in the community.

**Manageable:** The term ‘manageable’ means and includes all dogs and cats who are not ‘healthy’ and who are not likely to become ‘healthy’, regardless of the care provided; but who would likely maintain a satisfactory quality of life, if given medical, foster, behavioural, or other care, including long-term care, equivalent to the care typically provided to pets by reasonable and caring owners/guardians in the community; provided, however, that the term ‘manageable’ does not include any dog or cat who is determined to pose a significant risk to human health or safety or to the health or safety of other animals.

**Unhealthy and untreatable:** The term ‘unhealthy and untreatable’ means and includes all dogs and cats who, at or subsequent to the time they are taken into possession:

- have a behavioural or temperamental characteristic that poses a health or safety risk or otherwise makes the animal unsuitable for placement as a pet, and are not likely to become ‘healthy’ or ‘treatable’ even if provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community, or

- are suffering from a disease, injury, or congenital or hereditary condition that adversely affects the animal’s health or is likely to adversely affect the animal’s health in the future, and are not likely to become ‘healthy’ or ‘treatable’ even if provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community, or

- are under the age of eight weeks and are not likely to become ‘healthy’ or ‘treatable’, even if provided the care typically provided to pets by reasonable and caring pet owners/guardians in the community.

\(^{10}\) For more information about the Asilomar Accords see [http://www.asilomaraccords.org](http://www.asilomaraccords.org)
Flexibility for changing conditions

Your criteria should be flexible enough to account for changes in your work programme and situation. The point at which euthanasia becomes necessary may well be a moving target, dependent on factors that vary over time, for example:

- the skills of the veterinarians that you are working with
- how busy you are
- your financial situation
- the combination of animal needs you are dealing with.

Case studies

India
An animal welfare organisation has a ‘standard operating procedure for justification of euthanasia’. This provides a procedure for how the decision to euthanise an individual animal should be made, but it is flexible enough to take into account factors such as the availability of facilities at any particular time. For example, it may be possible to continue treating dogs with a higher degree of mange if kennels are available than would be possible at a time when the available area is already full or crowded.

Thailand
An animal welfare organisation in Thailand has an agreed process for making euthanasia decisions. The assessment framework it uses sets out issues to be considered so that decisions can be flexible depending on current conditions. If they are considering the need for euthanasia, they make an assessment of the availability of suitable treatment options and expertise, human and financial resources, environmental factors and anticipated quality of life issues following treatment.

The decision will need to be based on the individual animal’s needs and your capability at a particular time. It might be helpful to refer back to real situations that your organisation has faced in the past or to think of potential scenarios you might face to test and illustrate your criteria. For example, the following case studies were provided by animal welfare organisations around the world.

- An animal needs surgery or it will die but your veterinarian is unavailable for a week.
- You do not have facilities to keep animals but if you release this dog back onto the street it is highly likely to be hit by a car or attacked by people who do not want it there.
- You have taken in a group of dogs that have been poisoned and there is little chance they will survive, they are suffering greatly.
- You have a number of older dogs that have been at your holding facility for over a year and are not being selected by potential re-homers. You are under pressure from the municipality to make space for new younger dogs with a better chance of being re-homed.
- You are carrying out a mobile sterilisation campaign and a member of the public brings you a dog that is suffering from a terminal illness that can not be treated.
- Your local veterinarian refuses to help with euthanasia.
- You don’t have enough money for appropriate euthanasia drugs.

Discussing case studies as a group will help you to define when it is appropriate to euthanise an animal.

Case studies

Thailand
Another animal welfare organisation reported: “Despite being aware that performing this task (euthanasia) was part of his job duties, our own staff veterinarian at times was prepared to just let an animal die a miserable, slow death rather than perform humane euthanasia. This was one of the factors that led us to source outside help to euthanase animals.”

Brazil
A veterinarian explained that he had the expertise to carry out complicated surgery but currently there were insufficient financial resources to buy the equipment necessary to carry out certain types of surgery. Therefore, at this time, animals requiring these types of surgery could not be treated and the best welfare option was to euthanase them.

Agreed method of euthanasia

Your policy should specify the methods of euthanasia that are acceptable to your organisation. These must fit within the legal framework of your country and should be approved by veterinary stakeholders. As a basic requirement euthanasia must:

- minimise pain and discomfort
- achieve rapid unconsciousness followed by death
- minimise animal fear and distress
- be reliable and irreversible.

For further advice on euthanasia methods please refer to the WSPA guidance, Methods for the euthanasia of dogs and cats: comparison and recommendations (available on www.icam-coalition.org/resources.html).
Developing a detailed assessment tool for the euthanasia of individual animals

Making the decision to euthanase can be an extremely stressful and difficult process. To remove subjectivity and encourage consistency you might want to consider developing a tool to facilitate the decision-making process. For example, you could use a detailed checklist, a decision tree/algorithm or a decision matrix. Whatever method you choose, it is important that it supports your agreed policy and is easily understood by everyone involved in the decision-making process. Below are some examples that you could adapt for your own use.

Figure 2: IFAW’s euthanasia decision algorithm
(see annex for full algorithm)

IFAW’s decision algorithm

IFAW’s China office (principle author: Dr K Loeffler) designed a decision algorithm specifically for use by local Chinese veterinarians and dog/cat shelters. It was produced in response to a need identified by local veterinarians and shelter managers who found that staff members were becoming overwhelmed with how to make a decision about when euthanasia is an appropriate option for the management of a particular animal.

The full algorithm contains sections on physical health, psychological health and behaviour and can be found in the annex (a section of it is shown below). Accompanying notes for its use can also be found in the annex. The algorithm is intended to provide a structure to help staff think through the decision. It does not fit every situation, but could be adapted for other uses.
Decision matrix for an individual animal

The matrix below can be used to guide discussions for a specific animal's needs. It is not intended to rank animals in order to prioritise them for treatment but instead should help to structure discussions about the likelihood of meeting an individual animal's welfare needs.

This example sets out options available for an organisation considering sheltering a homeless dog. In the left-hand column it lists the possible treatments that the dog might need. For each option a score of 1 to 10 has been given against each of the questions in the top row (note the values of scores vary for each question). When you have scored the animal against each option you will need to discuss the individual totals and the overall total to consider whether these treatments are the best option for that animal. A high score suggests high need and high cost, but little chance of success.

You can adapt the matrix to include options available to animals in your programme of work and the questions can be changed to reflect the considerations that are important to your organisation.

Output: These tools, when adapted to the specifics of your programme of work, can help to guide discussions and decision making to find the best welfare option for an individual animal in your care. Each decision is based on a set of agreed and tested criteria, so that there is consistency in decision making and outcomes are understood by everyone trained in the system's use.

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**Figure 3: Decision matrix for an individual animal**

<table>
<thead>
<tr>
<th></th>
<th>What is the level of need for this treatment/welfare need?</th>
<th>What is the likelihood of success (i.e. that it will result in a healthy, re-homeable animal?)</th>
<th>What is the cost of this option (consider staff resources, financial costs and accommodation/facility costs)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical health treatment</td>
<td>8</td>
<td>2</td>
<td>7</td>
<td>17</td>
</tr>
<tr>
<td>(e.g. medication for mange)</td>
<td>10 = low</td>
<td>10 = high</td>
<td>10 = expensive</td>
<td></td>
</tr>
<tr>
<td>Behaviour modification</td>
<td>4</td>
<td>1</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>(e.g. socialisation)</td>
<td>10 = low</td>
<td>10 = high</td>
<td>10 = expensive</td>
<td></td>
</tr>
<tr>
<td>Psychological treatment</td>
<td>4</td>
<td>1</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>(e.g. because of allergies)</td>
<td>10 = low</td>
<td>10 = high</td>
<td>10 = expensive</td>
<td></td>
</tr>
<tr>
<td>Special diet</td>
<td>9</td>
<td>2</td>
<td>5</td>
<td>16</td>
</tr>
<tr>
<td>(e.g. because of allergies)</td>
<td>10 = low</td>
<td>10 = high</td>
<td>10 = expensive</td>
<td></td>
</tr>
<tr>
<td>Special facilities</td>
<td>2</td>
<td>1</td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>(e.g. needs to be kept in isolation)</td>
<td>10 = low</td>
<td>10 = high</td>
<td>10 = expensive</td>
<td></td>
</tr>
<tr>
<td>Overall</td>
<td>27</td>
<td>7</td>
<td>23</td>
<td>57</td>
</tr>
</tbody>
</table>
Staff selection and training selection

Appropriately-trained staff will be essential to the successful implementation of the policy.

Making decisions about euthanasia, carrying it out and counselling owners are considered some of the most stressful tasks employees face. In order to minimise stress associated with this task and the risk of poor practice, staff who are compassionate and caring and have a thorough understanding of animal welfare and euthanasia should be selected. Some agencies find that it is helpful to have a committee of two or three people to make euthanasia decisions, which takes the burden off each individual. Larger decision committees might find it difficult to come to an agreement and it might be necessary to allocate one person to have the authority to make the final decision.

Training

All staff working in the organisation should be made aware of the euthanasia policy as part of their induction to the organisation. If a new or revised policy is introduced all staff should be made aware of it and know where they can access the details. Even staff who are not responsible for making the decision or carrying out euthanasia should be aware of the policy, as they may be asked about it or may need to provide support to staff involved in these roles.

Training, based on the organisation’s policy, should be given to those staff involved in the decision making and carrying out of euthanasia. It is often the veterinarian that makes the decision to euthanase. In many countries veterinarians are given training on medical aspects of euthanasia, but not ethical aspects. It is therefore essential to involve them in discussions about your ethical policy11 and to provide them with support to enable them to make suitable decisions. You may also wish to consider providing training in the counselling of bereaved owners if this is a common occurrence as part of your programme of work.

Case studies

Nepal
An animal welfare organisation developed a euthanasia policy in consultation with its programme staff. They sought additional training on the subject from international organisations because euthanasia is a sensitive subject in Nepal and they found it helpful to use an external facilitator.

The Philippines
An animal welfare organisation reported that ‘veterinary students are taught to save animals’ lives, not end them’. They found that the veterinarians they worked with were often reluctant to end an animal’s life. This is a situation in which it would be essential to involve the veterinarians in developing a policy and train them to make decisions in accordance with the policy.

Euthanasia operators

All methods of euthanasia have the potential to be poorly performed if operators are untrained and unsupported. Consequently, it is essential that operators be provided with suitable training, including a period of initial tuition with assessment of proficiency, followed by ongoing monitoring of skills and ability. The initial period of instruction should, without exception, include training in both the technical aspects of the methods to be used and the recognition of signs of animal distress. Following the instruction, operators should understand the mechanism by which that particular method of euthanasia causes unconsciousness and death. For further information see WSPA guidance, Methods for the euthanasia of dogs and cats: comparison and recommendations (available on www.icam-coalition.org).

Both the decision-making process and the actual practice of euthanasia are extremely stressful for staff. It is therefore recommended that provisions are made available for stress relief such as support groups or counselling services.

11. The ethical policy of your organisation will be a set of standards based on moral values, which guide the conduct and decision making of staff members.
Communicating your policy

Once you have agreed and written your policy it is important that you make it available to the relevant audiences, both internal (e.g. trustees, management, staff) and external (e.g. authorities, general public, funders). Obviously the subject of euthanasia can be a sensitive issue, so it is for the committee to decide how proactive they want to be about letting people know about the policy. Animal welfare organisations in many countries reported that the public did not want to talk about euthanasia, were not interested, or were strongly against it. However, you should aim to be as transparent as possible about your welfare policies and the fact that you have a written euthanasia policy, agreed by a wide range of stakeholders, will help you to defend your position, should the need arise.

Monitoring and review

It is important that the agreed policy is implemented consistently, and there should be procedures in place for staff to raise concerns if they feel the policy is not being adhered to or if they feel that changes need to be made to the policy.

Changes may occur in the way your programme functions and hence the need for euthanasia, for example due to variation in staffing or financial capacity, or due to external influences, such as changes in policy relating to animal welfare. It is therefore important to keep detailed records of your organisation’s use of euthanasia (recording when and why it is used) and factors that can have an impact upon it, such as: number of animals; health issues (physical and psychological); behavioural issues; and staffing levels. This will enable you to track patterns of use of euthanasia and will help you to identify causes if there are problems, concerns about levels of use, or issues about a particular case.

A regular review of the policy, for example every two years and in addition on request, will offer staff and other stakeholders the opportunity to raise any questions or concerns and make amendments if necessary.

Case studies

Thailand
An animal welfare organisation found that euthanasia was often not accepted in Thailand and that many volunteers at the organisation objected to the euthanasing of animals. The organisation developed a written policy to explain its position and reduce conflict. It chose to present its policy as a brief public statement that could be made readily available and would be easily understood by volunteers and the public.

Italy
An animal welfare organisation reported that ‘in Italy it is illegal to euthanase healthy cats and dogs but there is still a big problem of homeless animals that end up being kept in shelters, sometimes in poor conditions and for a long time’. The organisation has therefore spent a lot of time lobbying for humane solutions to the overpopulation problem and discussing the humane values of euthanasia with volunteers, staff, veterinarians, veterinary students and dog owners. It also ran training workshops and discussion sessions on a regular basis to encourage discussion and understanding of this important issue.
IFAW’s euthanasia decision algorithm and notes for use

Turn to accompanying euthanasia notes (page 19) for guidance on use of this algorithm.

**QUESTION 1:** Does the animal have a medical condition that is causing it to suffer?

- Yes
- No
- Uncertain

**Does the condition have a poor prognosis?**
- Consider euthanasia.

**Does the illness pose a threat to other animals or people?**
- Consider euthanasia.

**Do you have the resources necessary to alleviate the suffering and to treat the condition appropriately?**
- Treat the condition. Re-evaluate the situation daily and as resources or the animal's condition change.

**Will the suffering be brief and will the animal have good quality of life following recovery?**
- Consider euthanasia.

**Do you have the resources necessary to contain and treat the disease?**
- Isolate the animal(s) and provide medical treatment. Is the situation improving?

- Go to QUESTION 2 and 3 (next page).

**Does the animal have a medical condition that poses a threat to other animals or people?**
- Do you have the resources necessary to contain and treat the disease?

- Consider euthanasia, particularly if the disease is likely to be dangerous, e.g., rabies.

**Is the situation improving?**
- Do you have the resources necessary to continue treatment, ensure safety of animals and people, and ensure welfare of the sick animals?

- Treat the condition and make the animal as comfortable as possible. Re-evaluate the situation daily and as resources or the animal's condition change.

- Continue treatment and management. Re-evaluate safety and animal welfare status as the disease condition changes or as resources change.
QUESTION 2: Does the animal have a behavioural problem?

Carefully evaluate the animal for a medical condition that may result in what appears to be a behavioural problem, e.g. inappropriate urination or sudden aggression.

Does the animal have a behavioural problem that can be explained by a medical condition and that can be alleviated by treatment of a medical condition?

Ensure that QUESTION 1 has been answered. Proceed to QUESTION 3.

Treat medical condition and re-evaluate.

Is the problem likely to result in the animal being abandoned or abused by the owner? and/or

Does the problem result in poor physical or psychological welfare of the animal (e.g. chronic anxiety, self-mutilation)? and/or

Does the behaviour pose a threat to other animals, people (e.g. aggression) or the environment?

Is the owner willing and able to learn to manage the animal to reduce the risks above? or

Do you have the resources to safely rescue the animal and to safely and effectively manage the behavioural problem?

Work with owner to manage behavioural problem, or

Work with owner or re-home animal to an owner who can manage the behavioural issue.

Work with the owner or, rescue animal, eliminate source of behaviour problem, train/desensitise animal.

Does the problem persist?

Continue training and re-evaluate.

Monitor with original owner or, re-home to people able to manage animal appropriately.

QUESTION 1: Is the animal displaying unacceptable behaviour?

Yes  No
QUESTION 3: Does the animal live under conditions that compromise physical and/or psychological health?

- Yes
  - Evaluate the animal according to the medical and behavioural algorithms. Is there a medical or behavioural reason to euthanase the animal?
  - Is there a possibility that the owner will improve the care of the animal if she/he is taught how to do so and provided with additional resources if needed, and do you have the resources to provide this support?
  - Consider euthanasia.

- No
  - Evaluate animal according to the medical and behavioural considerations (QUESTIONS 1 and 2).
  - Treat the animal’s medical condition. Provide training and necessary additional resources to the owner. Re-evaluate the situation regularly until you are satisfied that the owner will properly care for the animal.

Do you have the resources to rescue and rehabilitate the animal, and to re-home it following recovery?

- Yes
  - Consider euthanasia.

- No
  - Rescue, rehabilitate and re-evaluate the condition of the animal and its prognosis. Consider medical and behavioural algorithms.
    - Did the animal’s condition improve?
      - Yes
        - Re-home.
      - No
        - Is the animal fully rehabilitated?
        - Yes
          - Re-home.
        - No
          - Is the animal suffering?
            - Yes
              - Consider euthanasia.
            - No
              - Consider euthanasia.
Notes for guidance on use of euthanasia algorithm

For companion animal veterinarians and animal shelters. IFAW, China 2009

Principle author: Dr Kati Loeffler

IFAW works from the concept of ‘adequate guardianship’, which requires that an animal’s basic needs are met. The algorithm is based on this concept and its criteria, and provides a simplified structure to help local veterinarians and dog/cat shelter staff to think through a decision about euthanasia as objectively as possible. The notes below are meant only to help clarify some of the terminology in the algorithm, and to provide real-life examples to illustrate implementation of euthanasia criteria and the algorithm.

Algorithm 1: Euthanasia due to medical condition

- Does the animal have a medical condition that is causing it to suffer? An animal is suffering if it is in pain or if it is so ill that it is depressed, does not eat, does not move or respond to people, vocalises due to pain or discomfort, has wounds that will not heal, etc.
- Prognosis refers to the ability of the animal to recover from its illness or injuries and to live without undue suffering. For example, a dog or cat may have a crushed leg that needs to be amputated. If the missing limb will be the animal’s only problem, then it is capable of living a very happy life and has a good prognosis. On the other hand, an animal with cancer that causes constant pain and that cannot be resolved has a poor prognosis.
- Resources and skills for management of a medical condition include:
  - staff competence in knowledge and skills in diagnosing, treating and managing the condition
  - staff availability, e.g. skilled staff who are competent to work with the animal 24 hours a day if necessary
  - finances
  - facilities, e.g. drugs, diagnostics such as radiography and laboratory analyses, cages or isolation areas that ensure the comfort and safety of the animal and staff, proper surgical areas and instruments.
- Quality of life following recovery or partial recovery. Consider physical pain and discomfort and emotional distress. In example (3) below, the dog has to live in a cage and was isolated almost all day. This is not an acceptable living condition for a dog.
- How long should the animal suffer in the hope that it will recover? This depends on the degree of suffering, how well you are able to decrease the suffering, how long the suffering will continue and the prognosis for the animal’s future. Consider the following examples.

Example 1.
A dog has a broken leg and small wounds on the face and flanks. The leg is very painful but the other injuries are minor and heal quickly once they are cleaned and treated. You have the facilities and surgical skills to repair the bone, the owner is willing to pay for it, and you can give the dog medication against pain. In this case, the suffering that the dog endures is acceptable because:
1. the injury has a good prognosis (a full recovery can be expected)
2. you have the resources to manage the problem
3. the period during which the dog is in pain will be relatively brief and can be alleviated with drugs
4. the owner is willing and able to care for the dog properly during its recovery.

Find out why the dog’s leg was broken. Did the owner beat her? Does the owner let her run loose on the street and she was hit by a car? In this case, further injuries are likely to occur. This is now a case of medical condition and failure of guardianship (question 3).

Example 2.
A Dachshund is paralysed in the hind legs due to a prolapsed (or partially prolapsed) disc. He is five years old and overweight. He can only walk by dragging his hind legs across the floor. His attitude is bright, he eats well, and his personality and energy level seem to be normal. He is able to control urination and defecation. 1. Do you have the skills to evaluate the degree of the injury, e.g., radiography and neurologic diagnostic skills? If so, you can determine the severity of the condition and determine a prognosis. If not, you have to treat the condition symptomatically.
2. You start the dog on pain medication, instruct the owner on how to take care of the dog and how to help the dog lose weight.
3. A week later:
   - the dog is no better, but it is no worse either. It does not appear to be in pain: attitude and appetite are still good and he drags himself around the house with good energy. The owner seems to be taking good care of the dog. Continue treatment, or
   - the dog is panting, in pain and has not been able to control defecation. The prognosis now is much poorer than it was initially. If the owner is taking good care of the dog and wants to keep trying, you can try stronger pain medication and suggest surgery if there is a reliable veterinary neurosurgeon available. If the owner is frustrated and there is no option of surgery, consider euthanasia.
4. In the case of number 3, recheck the dog every three or four days. If the attitude is still good and the dog is not developing sores on the dragging limbs and the owner is taking good care of the dog, then you can keep trying.

5. If the dog appears to be in pain or the dog develops frequent secondary problems such as urinary tract infections and sores on the dragging body parts, and there is no sign of recovery, the dog’s quality of life is decreasing and you should consider euthanasia.

6. The owner gets tired of taking care of the dog and begins to neglect him. The dog is in pain and neglected. Consider euthanasia. Note: this is a case of medical condition and failure of guardianship.

7. The dog loses control of urination and defecation. It lives in a cage because the owner doesn’t want the whole house soiled. The tail is permanently soiled with faeces. The owner takes the dog to a local veterinarian who amputates the tail. The wound heals poorly because it is always dirty. The dog’s attitude is bright and he is very happy to see the owner. But he spends 23.5 hours a day in the cage, alone. In this case, you can teach the owner how to provide enrichment for the dog so that he is not so lonely and bored. But the prognosis for the case is poor, and the dog’s quality of life is not good because of his isolated living condition. Consider euthanasia.

Example 3.
Five-year-old cat with mammary cancer.
1. You do not have experience in cancer surgery and you do not have drugs for proper control of pain. There is no one in the town who has better skills or facilities than you do. In this case, consider euthanasia.

2. You have learned how to remove this type of tumour from surgical text books. You have the drugs for proper anaesthesia and pain medication following the surgery. The owner is willing to pay for it and will take care of the cat carefully following surgery. In this case, it is worth a try, but keep in mind that the prognosis for the condition may be only a few months.

3. The cat recovers from surgery and appears to be healing well. Six weeks later, she has stopped eating and spends a lot of time lying in a corner, isolating herself. She is now in pain and is suffering. You can try to control the pain with medication, but prepare the owner that this will help only for a short time. Consider euthanasia.

Example 4.
Dog that survived distemper, but is now paralysed in the hind legs, twitches constantly, and is very thin. The dog eats well, is alert and responds to people. It cannot walk, however, and is developing decubital ulcers. The owner is willing to feed it carefully and clean up the urine and faeces, but cannot manage the ulcers. The quality of life for this dog is poor, and the prognosis for recovery of good quality of life is poor. Consider euthanasia.

Example 5.
Two-year-old golden retriever dog with hip dysplasia.
1. Dog is limping and doesn’t want to go on walks. Pain medication improves the condition but the dog’s liver does not tolerate the medicine. You try a different medication, but the dog doesn’t tolerate this either. Consider euthanasia.

2. Pain medication helps and the dog’s liver appears to tolerate it. The owner does a good job in walking the dog twice a day to keep the hip muscles strong. Continue medication and controlled exercise until the dog appears to be in more pain. When that happens, re-evaluate the options and make a new decision.

3. Pain medication helps and the dog’s liver appears to tolerate it. But the owner does not walk the dog enough and often forgets to give the dog his medicine. The dog is in pain and lonely. Options: a) encourage the owner to do a better job of taking care of the dog; b) find a new home for the dog with a better owner; c) euthanasia.

Note: this is a case of medical condition and failure of guardianship.

Example 6.
Six-year-old dog with chronic, itchy skin disease.
1. The dog scratches constantly, its skin is raw and infected. You have tried a variety of medications but nothing has helped. The owner is frustrated, quality of life for the dog is poor, prognosis is poor: consider euthanasia.

2. You have tried several diets to discover if the dog is suffering from a food allergy. This is hard to do because of the lack of hypoallergenic diets available locally. The owner cooks special food for the dog, but the diet is imbalanced. The dog’s skin improves a little bit, but it still receives antibiotics and steroids and now it is malnourished, thin and constantly hungry. Quality of life is poor, prognosis is poor: consider euthanasia.

Example 7.
Nine-year-old cat with kidney failure. The cat is very thin, vomits daily and is depressed from constant nausea and feeling ill. The owner has to bring the cat to the veterinary clinic every other day for treatment. This causes great stress to the cat and costs the owner considerable time and money. The cat seems to feel better for a few hours, but by the next day is depressed and nauseated again. In this case, the quality of life and prognosis for the cat are poor, and euthanasia should be considered.
Algorithm 2: Euthanasia due to behavioural problem

- A behavioural problem is a behaviour that causes the owner to be frustrated with the animal. Some people are very tolerant, others are less tolerant, so a ‘problem’ behaviour in one household may not be a problem in another household.
- The frustration of the owner may result in the owner abandoning or abusing the animal. In this case, the issue is ‘behaviour problem’ (question 2) and ‘failure of guardianship’ (question 3).
- Quality of life is an important consideration for management of behavioural problems. If a dog is locked in a cage 23.5 hours a day because he might destroy something in the house, the quality of life for the dog is poor, and the situation needs to be changed. A cat tied to a wall all day so that she does not run away does not have an acceptable quality of life. A dog who wears a muzzle all day so that he doesn’t bark does not have an acceptable quality of life. An aggressive dog who is chained to the wall 24 hours a day and is choked half to death when a visitor comes does not have a good quality of life.
- Resources for managing a behavioural problem essentially involves recruiting a person with sufficient expertise in animal behaviour management and positive reinforcement training to teach pet owners how to manage their animals’ behaviour issues in a humane and effective manner. It may be difficult to find such a person locally. The owner must be patient and committed to solving the problem, and will have to try to find training resources on his or her own, e.g. obtaining foreign expertise through books or advice from qualified people.
- Training in behaviour management (together with responsible pet ownership) is one of the most valuable educational resources that animal shelters and other animal welfare organisations can provide in China.

Example 1.
Adult dog begins to urinate all over the house.
1. Examine the animal for medical conditions that may cause it to urinate inappropriately, e.g. urinary tract infection or a condition that causes incontinence.
2. You can’t find a medical cause for the problem, so you work with the owners to try to figure out what might have changed in the dog’s environment that is causing it to behave this way. Is it in season? Did another animal join the household so that the dog now feels the need to mark its territory? Did a person join or leave the household? The owners are patient and work with the dog to re-train it, using positive reinforcement techniques. In this case, the prognosis is good: keep working on it.
3. You can’t figure out a medical cause for the problem and the owners are frustrated and beat the dog. The dog cowers and lives in constant fear, which makes it urinate in the house even more. The owners don’t want to deal with the dog anymore. Now we have a behaviour problem and failure of guardianship (question 3). You have the option of a) rescuing the animal, re-training and re-homing it, or b) euthanasia.

Example 2.
Young dog with separation anxiety who chews up everything it can reach in the house when the owner leaves. The owner has been shutting the dog in a box, where it lives all day while the owner is at work, crying and distressing the neighbours.
1. Owner is willing to spend time to help the dog but doesn’t know what to do. In this case, help the owner to understand separation anxiety and teach the owner how to train the dog to overcome the problem. This will require patience and skill in training techniques.
2. Owner is willing to spend time to help the dog but doesn’t know what to do and there is no one who knows how to teach the behavioural management to help the dog overcome the problem. The dog is living in a box, is isolated, its quality of life is poor, and the anxiety becomes worse because of the isolation it suffers. The neighbours complain and the owner is in danger of being forced to abandon the dog. You can try to provide something better than a box for the dog to live in and see if the owner or another member of the household can stay home more with the dog. Alternatively, seek options to re-home the dog. Only if these options fail, consider euthanasia.
3. Owner is frustrated, beats the dog, which makes the dog even more anxious and distressed. Now we have a behaviour problem and failure of guardianship (question 3). You have the option of a) rescuing the animal and re-homing it with someone who is able and willing to care for the dog properly, or b) euthanasia.
Algorithm 3: Euthanasia due to failure of guardianship

- Adequate guardianship is defined as the resources (e.g., food, water, shelter and health care) and social interactions necessary to meet an individual animal’s physiological and psychological needs necessary to maintain an acceptable level of health and well-being.
- In order to ensure proper guardianship of an animal, the following criteria must be met.

1. Appropriate food and water to keep animal in good health.
2. Housing conditions to protect the animal from the weather, provide a clean, soft sleeping area and an area where the animal can move about and express normal behaviour.
3. Behavioural management:
   - an appropriate social environment, e.g., human family and other animals
   - sufficient exercise
   - training to prevent or manage behavioural problems, using only positive reinforcement methods
   - a misbehaved dog indicates that something is missing in the care of the animal or in its environment, or that it has a medical condition that is causing it to behave abnormally – efforts should be made to determine what these deficits are and to correct them in a humane manner.
4. Never abuse an animal physically or psychologically. Beating or otherwise hurting an animal, isolation, malnutrition and thirst, causing fear and anxiety, punishing an animal for something it does not understand was wrong, all are counterproductive and constitute abuse.
5. Maintain the health of the animals:
   - Prevent disease: vaccination, deworming, proper nutrition, exercise, behavioural management.
   - Seek proper veterinary care if the animal is ill.
   - In many cases, it is advisable to neuter pets in order to prevent unwanted puppies and kittens, prevent or manage behavioural problems, and decrease incidence of certain medical conditions.

- Resources for rescue, rehabilitation and re-homing include:
  1. a temporary home for the animal – a shelter or volunteer guardian
  2. expertise, time and money to treat medical conditions properly
  3. expertise, time and money to manage behavioural issues properly
  4. personnel, time and money to re-home the animal and to monitor the animal in its new home to ensure adequate guardianship there.

- Criteria for an appropriate guardian with whom to re-home an animal include:
  1. ability to ensure the five criteria listed above
  2. de-sexing (spaying/neutering) the animal is strongly advised
  3. an understanding of “responsible pet ownership”
  4. someone who does not use the animal for fighting/food/experimentation
  5. relinquishment of the animal back to the shelter if adequate guardianship cannot be provided
  6. permanent identification of the animal (in addition to a microchip), i.e. on the collar and tag
  7. someone who abides by local laws/regulations/ordinances, e.g. registration and licensing
  8. must not have a criminal record of animal or human abuse.

- Re-evaluate the situation regularly until you are satisfied that the owner will properly care for the animal. Re-evaluation should be done twice a week for two weeks, then once a week, then monthly until you feel that the situation is under control. If there is any indication that the owner is unable to maintain acceptable conditions of animal welfare, then re-evaluate the situation using the left-hand side of the algorithm, assuming that the animal will need to be rescued and re-homed.

Example 1.
A dog lives permanently tied to a wall on a short chain. It must sleep and defecate in the same area and is not taken for daily walks. For shelter it has a broken piece of wood leaning against the wall. Sometimes it has water to drink, but usually this is dirty. Once a day it receives rice gruel and sometimes left-over scraps from the owner’s meals. The animal is thin, dirty and covered with ticks. Once a year she becomes pregnant (while tied to the wall) and raises her puppies while remaining tied up and without additional water and food to sustain her lactation. This is clearly a case of inadequate guardianship. This animal must either be rescued or the owners must be taught – and then monitored – to take proper care of the dog.

Example 2.
A dog is kept by the security guards of a factory to help guard the area. The dog runs loose and is not vaccinated. The guards feed it occasionally (not daily) from scraps left over from their own meals. The dog lives primarily on what it can find to eat in the streets. It has a strong cough, is very thin, and sleeps in the garbage litter next to the factory gate. When it meets one of the guards, it cowers in fear, and the guards are often seen to kick it. This is a case of inadequate guardianship and the animal must be rescued. A “communally owned” dog like this is often neglected because no one takes the responsibility to care for it properly.
Example 3.
A cat is kept tied to the wall by its neck all day. It is fed rice gruel once a day. This is a case of inadequate guardianship. This animal must either be rescued or the owners must be taught – and then monitored – to take proper care of the cat.

Example 4.
A cat begins to urinate on the owner's bed. The owner takes the cat to the veterinarian who cannot find anything medically wrong with the cat. The cat continues the behaviour and the owner gets so frustrated that it begins to throw the cat across the room. This is a case of behaviour problem and failure of guardianship. In this case, the owner needs help in identifying the cause of the cat's behaviour, and then in managing the problem. If he or she is unwilling to do this, the cat must be rescued.
References and resources


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