

# The Race To Outpace Feral Cat Over-population

a symposium presentation by  
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Feral and homeless cats are a huge part of the growing pet over-population problem everywhere. The number of feral cats in the U.S. has been estimated at 60 million. Ferals are the wild offspring of domestic cats, and ALWAYS the result of pet owners who fail to spay or neuter their animals. The HSUS estimates that a pair of breeding cats and their offspring can exponentially produce over 400,000 cats in 7 years.

Many people think pets can regain their so-called "natural" instincts and hunt to survive if they are abandoned or lost. The truth is - they can't. Their lives are a grim struggle to survive in back alleys or in rural areas on whatever scraps of food they can beg or steal. Unless they are cared for by a feeder, most die young from disease, starvation, abuse, and accidents - or die violently as food for a predator. The ones that are lucky enough to end up in shelters are usually put to death. Shelters are forced to kill millions of homeless cats each year at a hefty tax bill for citizens, and at an untold emotional burden to shelter workers.

"Trap and kill" programs used in an attempt to solve the problem are expensive, and simply don't work. New cats soon come in to fill the void. The best solution would seem to be a non-breeding population of cats that are fed and looked after by someone. The territorial nature of the cats should keep new cats out of the area. The total number of feral cats would then decrease by natural attrition (and through accompanying public education encouraging the sterilization of pets.) While most studies have proven that "trap/sterilize/release" programs are the MOST effective in stabilizing feral colonies, most efforts are too small-scale to effectively outpace these prolific breeders.

Most people who find themselves suddenly feeding one or two ferals soon find that they have multiplied to 10 or 20. These otherwise caring people often have limited financial resources, and no access to information regarding the trapping and sterilization of ferals. Where low cost spay/neuter IS available, it is usually cost-prohibitive when more than a few cats are involved. People often try to ignore the problem (in which case it just gets worse) or they do something drastic, like killing the cats in some desperately inhumane way.

Prior to 1993, the problem of homeless cats in San Diego was reaching crisis proportions. With cats going into heat at 4 months of age and having 2 to 3 litters per year, area shelters were reporting that the number of impounded and euthanized cats was increasing at 15% every year. The resulting costs were enormous.

The Feral Cat Coalition, or "FCC", is an all volunteer, non-profit organization formed by a few veterinarians and other concerned citizens in November 1992. After years of working individually to trap feral cats and sterilize them one at a time at low cost veterinarians, we came to realize that the "cat-by-cat" approach was slow, costly and inefficient. And worst of all, IT JUST WASN'T GETTING US ANYWHERE. The cats were breeding so fast that we couldn't even make a dent in the problem!

When the FCC was formed, we started with one central philosophy: to spay and neuter as many cats as possible, in as short a period as possible, as cheaply as possible, while still providing the best possible care for the cats.

The FCC traps feral and homeless cats, sterilizes and immunizes them against rabies, and then returns them to the persons who feed them. We do this at NO COST to the public at monthly clinics, in various donated veterinary facilities during off-hours (Saturday afternoons or Sundays). Our first clinic was very small - just 20 cats and one vet, helped by a small number of lay volunteers (most of whom were also the persons trapping cats). Each month we enlarged our number of surgeries as the number of participating vets expanded, the number of volunteers grew, and funds for traps and medical supplies became available. We learned a lot in those first few months. Now after 4 1/2 years, each clinic runs like a well-oiled machine, complete with written instructions for every step of the process.

Current monthly clinics are staffed by 4 - 7 volunteer vets as well as 30 - 40 lay volunteers (who sign up for desired locations and duties from a mailed calendar of clinics). Only FCC supplies are used. Using an efficient high-volume approach, the FCC can sterilize (at very low cost) about 150 cats in an afternoon - approximately 1800 cats per year. The process starts when a feral cat feeder (or "caretaker" as we call him) hears of us and calls our hotline voicemail phone number. One of our staff of Screener volunteers calls the caretaker and thoroughly screens him using a detailed written procedure to ensure that the cat is appropriate for our clinic (e.g. not a pet). The Screener then determines the caretaker's situation and needs (e.g. traps or a trapper), gives the caller instructions for bringing the cat to the clinic, and makes a clinic reservation with the Reservation Coordinator. Reservations are essential for planning purposes and to ensure that all people bringing cats to clinics are properly screened. Emergency cases that cannot wait for a monthly clinic are sent to vets who help us out at their own practices during business hours. Many related informational handouts on subjects like taming feral kittens and raising orphaned kittens, etc. are available at no charge from the Screeners.

Caretakers are encouraged to trap cats themselves using our written trapping instructions and traps borrowed from our Trap Depot volunteers who store traps at their homes and lend them out for a small refundable deposit. Caretakers who cannot trap or transport cats themselves are helped by one of our volunteer Trappers.

The FCC Reservation Coordinator works closely with the veterinarian in charge to calculate the desired number of veterinarians based on the number of cats expected, keeping in mind the known speed of the individual vets and the time of year. (During kitten season, pregnant cats slow down clinics.) The number of reservations accepted is always more than the number of cats expected to show up in traps.

Historically, the catch rate is about 60% - 70%. The mix of cats is almost always 50% male and 50% female. Surgery time should be 3 hours or so to keep the experience enjoyable for vets.

On clinic day, lay volunteers learn their jobs from written instructions and are trained by a Team Leader. They work at a variety of jobs including admitting the cats and checking reservations. Each cat is assigned a pre-numbered tag that will be placed on the cat after it is anesthetized to identify it. (An identical tag is placed on the trap to ensure the cat goes home with the correct caretaker.) Other volunteers work at anesthetizing cats (Registered Vet. Technicians only for this one) using an injectable anesthetic given while the cats are still in the traps or carriers. Still other volunteers prep cats for surgery, or assist vets in surgery, or clean cats' ears. Volunteers give each cat 3 injections - rabies vaccine, an antibiotic, and ivermectin (for ear mites). Droncit is also given if needed for tapeworms. Some volunteers groom flea infested or severely matted cats, while others closely monitor the cats in the recovery area outside after they have been placed in their cleaned traps. Cats that need it, receive fluids and extra attention in the I.C.U. Each cat has 1/4 inch clipped straight across its right ear to mark it as sterilized.

Some volunteers work just as "transporters", moving the cats from workstation to workstation. Female cats are tied to lightweight Plexiglas boards (designed by a volunteer) making it easy to prep them and move them around the clinic, as well as providing a portable operating surface. As they wait for an available vet, prepped males are lined up on tables, while a plastic rack stores several female cats on their boards. As one cat is finished with surgery, it is removed to the next station while another cat is quickly brought in to the vet. This assembly line-type process allows the vets to always have a cat in front of them for surgery, maximizing their time.

Veterinarians usually work at either end of a surgery table in pairs to save space, share use of Vet. Assistants and some supplies. (A separate surgical pack is used for each spay and autoclaved by us between clinics.) Working together also allows for friendly conversation and the sharing of technical knowledge between vets.

At every step of the clinic process volunteers and vets are looking for medical conditions needing attention. Many cats get life-saving, or at the very least life-improving surgery, as well as medications to be sent home with the caretaker, as a bonus to the spay/neuter. Cats deemed too ill are humanely euthanized. All medical information for each cat is kept on a Surgery Log from which we compute valuable statistics useful for research and future planning.

At the end of the day, caretakers come to pick up the cats. Aftercare instructions and needed medications are sent home with the cats. While this is going on outside, the Clean Up crew is inside making sure we leave the facility cleaner than when we arrived. (We want to be invited back!)

So, what has been the result of all this? Well, after 4 1/2 years we've been able to sterilize over 7000 cats. The county Dept. of Animal Control shelters report a decrease of almost 50% in cat impounds and euthanasias since the FCC was formed. Other local shelters report similar declines, sometimes

complaining of a shortage of available kittens for adoption. The FCC method works!

The resulting tax-savings to the county so far has been substantial - nearly one million dollars that would have been spent to house, feed, euthanize and dispose of impounded stray cats.

One of our goals now is to make it as easy as possible for other communities to start similar programs. All of our written handouts, job procedures and forms are available to anyone who asks for them, by mail for just the cost of postage, or downloaded directly off our Internet website. Based on the many thousands of inquiries to our website, it's obvious that the desire for workable solutions to the cat over-population problem is intense and worldwide.

Currently, we're filming a video of our clinics to add to the written materials available, so those interested can actually see the FCC program in action.

Anyone wishing to start a program like this first and foremost needs at least one veterinarian willing to volunteer (and hopefully get other vets to participate). Some seed money to buy traps and medical supplies and equipment is also necessary. Clinics should start small and increase in size as funds and staff allow. Donations should come from a grateful public. Volunteers come naturally (often from caretakers) as people see the good work and want to share in the great feelings of goodwill and self-empowerment that all FCC volunteers experience.

But the Feral Cat Coalition program has accomplished much more than just a win in the continuing cat population race and improved lives for thousands of homeless cats. These clinics promote a close partnership between the veterinary and lay communities, while providing hands on education to the public about the consequences of irresponsible pet ownership. The FCC has grown to over 350 lay volunteers and over 80 veterinarians. Each of them comes away from a clinic with the knowledge that problems which may at first seem insurmountable CAN be solved if WE are part of the solution. Each one of us CAN make a substantial contribution to a more compassionate world.



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