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## 2023 INQUIRY INTO THE OPERATION OF THE ACOS under POCTAA PDTA response to Supplementary Questions provided by RSPCA NSW 22 May 2024.

Date: 12 June 2024

### PDTA Response

For ease of reference, we adopt the numbering provided in the above report.

#### 4. What policies do you apply to decisions about suitability for rehoming?

*"RSPCA policy requires animals to be evaluated using a wide range of evidence and information. However, animals regularly come into care in varied states and circumstances, often with incomplete veterinary and behaviour histories. RSPCA NSW considers the circumstances of the animal coming into care, their individual veterinary and behaviour presentations and species when making decisions in the rehoming context. This includes a review of any medical and behavioural history prior to entering care, a veterinary examination and medical investigation as needed, daily observation and record keeping of health and behaviour and a behaviour evaluation by the behaviour and rehabilitation team. Additional information may be sought through placement with a foster carer or additional interactions such as off-site walks. Risk assessments are often conducted, as well as animal welfare assessments (using the Animal Welfare Assessment Grid). This information-gathering process is ongoing and often continues over extended periods because the animal is not initially considered either treatable/rehomeable on entry, nor is it considered untreatable at that point, and so attempts at treatment and rehabilitation occur."*

**PDTA response:** Our professional dog trainers work with dogs from all backgrounds and must perform similar assessments. What is the typical timeframe in which a dog is presented to an RSPCA facility and these assessments are carried out?

When the RSPCA say a dog is untreatable, they mean "the dog is not treatable by the RSPCA using their chosen ideologies"

*"To proceed with the care, treatment or rehabilitation of an animal, its welfare can only be protected if there is the capacity to meet the needs of that animal. To maximise that capacity, we have to meet complex needs, and animals with challenges may be assisted through referral for specialist veterinary treatment, support at RSPCA NSW rehabilitation sites, foster care, and partnerships with rescue organisations."*



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**PDTA response:** Several former RSPCA foster carers have expressed to the PDTA that the chances of rehabilitation for a dog in RSPCA care are much higher when the dog is given to foster carers compared to being treated by RSPCA staff, with Behaviour Plan rarely being carried out by RSPCA staff.

These are common statements from many former RSPCA staff and volunteers.

*“Furthermore, decisions are influenced by the likely burden of care to an adopter, the long-term prognosis for the animal and a risk assessment of what harm the animal may cause a human or another animal in the community. A range of risk mitigations are considered and implemented to reduce these risks and provide options for the animals for rehoming. These mitigations may include preadoption counselling of prospective owners, full disclosure of any known issues, and veterinary and behavioural post-adoption support.”*

One of our members' clients adopted a dog from the RSPCA Yagoona site. Upon adoption, they were given some medication to administer over the next month, but the specific medication was not disclosed. After a few weeks, during a veterinary check-up, it was identified that the medication was a behavioural medication, Trazodone, which should not be stopped abruptly. Once the medication was weaned, the dog displayed a high level of dog aggression.

Is it common practice for RSPCA to medicate a dog for behaviour problems without providing any accompanying training or therapy, or disclosing to the owners that the dog has behavioural concerns?

Why do RSPCA advocate for the use of behavioural medications such as Prozac, Trazadone, Catapres and Gabapentin for dogs with behaviour problems, but also states that “suppressing behaviours” carries risks?

Are RSPCA unaware of the risks and side effects of these medications when quoting their “do no harm” ideals?

5. *“Mr Courtney gave evidence that RSPCA NSW does not apply a bite scale, do your policies consider a canine bite scale?”*

*The evidence given was incorrect. The Sophia Yin bite scale is used in several RSPCA policies and procedures relating to dog assessment, rehabilitation, and rehoming and is also embedded within risk assessments. The Sophia Yin bite scale is based on the Dunbar Bite Scale. We also watch with interest the development of Cara Shannon's bite scale (incorporating detailed bite and bruising scales that separate bites to other dogs and human bites: <https://vimeo.com/ondemand/badtothebone>)”*



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Can the RSPCA provide any evidence demonstrating how these scales are used?

We have asked several former and current RSPCA employees, and none of them have heard of these scales being used.

*7. Do you consult externally in relation to your management of behaviour cases?*

*RSPCA NSW does seek external expert opinion in relation to difficult behaviour cases. A consultant veterinarian with postgraduate qualifications in clinical animal behaviour consults on challenging cases weekly. Case reviews are conducted monthly with an international Veterinary Behavioural Medicine Specialist.*

*In addition, for the management of behavioural cases post-adoption, there are times when cases are referred to animal behaviourists or trainers for support. Noting the considerable risk associated with unaccredited dog trainers providing harmful advice, RSPCA only consults with trainers who have a minimum Certificate IV Animal Behaviour and Training and membership of an industry group such as Pet Professional Guild that undertakes due diligence on their membership and that is committed to forcing free training and an evidence-based approach. RSPCA engages behavioural consultants with a degree in animal science, behaviour and/or welfare plus an industry certification via the International Association of Animal Behaviour Consultants or a similar organisation that has a rigorous credentialing process."*

With these levels of qualification, how does the RSPCA explain that, in 2020-21, almost 70% of the dogs euthanised by the RSPCA were for behaviour problems that did not respond to RSPCA programs?

How do you think a private rescue organisation would be viewed and assessed by the RSPCA if they had similar statistics?

When an organisation is presented with thousands of dogs annually, that display behaviour concerns, and that organisation fails with seventy plus percent of these dogs, this should raise questions over the abilities of those in the organisation and those they refer to.

*8. Are there any other matters you wish to clarify in response to the inquiry and the hearing?*

*Mr Courtney gave evidence that RSPCA NSW euthanised over 70% of animals for behavioural reasons and over 20% for medical reasons, concluding that over 90% of animals that entered our care were euthanised. euthanised.*



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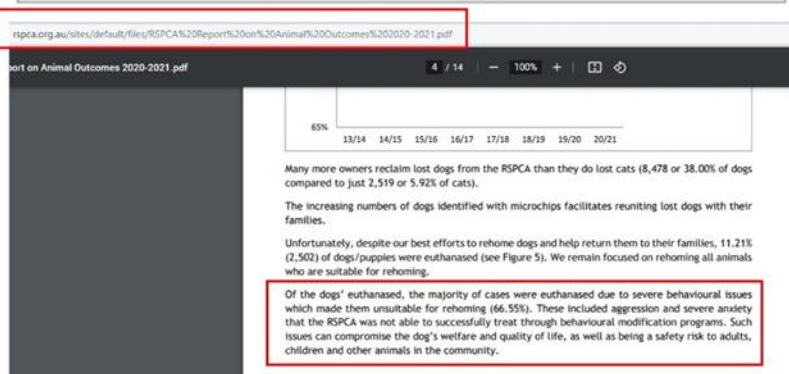
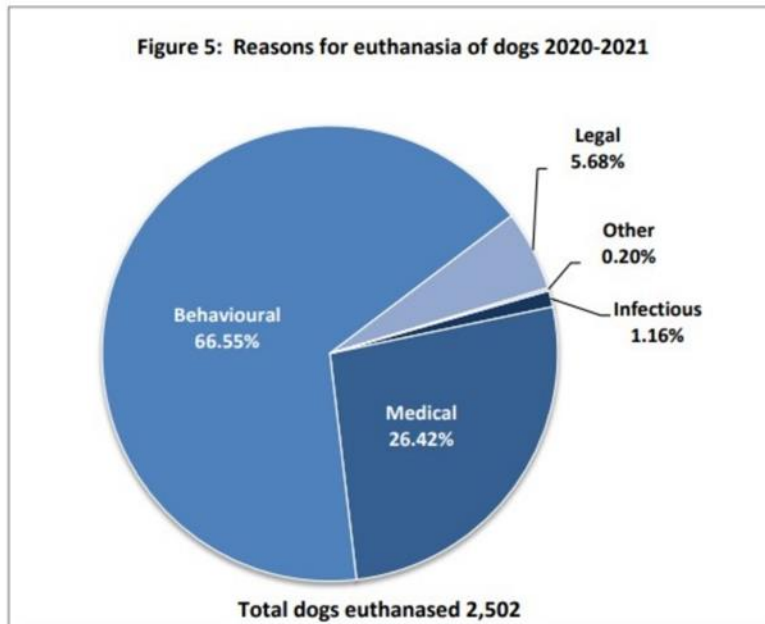
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*Any consideration of the RSPCA year in review (see page 23) would disclose that this is 5 completely incorrect, it, which makes clear a canine live release rate of 74% for and a 67% live release rate for cats.*

*Mr Courtney seems to be confused by the difference between 70% of 26% (the proportion of total canines euthanised) and 70% of 100% (all the dogs entering RSPCA's care). The error was reinforced after it was adopted by members of the Committee in questioning later witnesses, but no opportunity was given to RSPCA NSW witnesses to address the statistic or correct the error."*

**PDTA response:** There are a few points that were raised that have not been answered by the RSPCA:

- a. Our President, Mr. Courtney, was clear that the 70% euthanasia rate of dogs by the RSPCA referred specifically to the percentage of dogs diagnosed with behaviour problems, not the overall number of dogs the RSPCA engaged with. From the Transcript PC4 Mr Courtney stated *"The concern is that, as a charity, their main focus has become to get funding from donors and others. In the 2019-20 report published by the RSPCA on their website, it details that almost 67 per cent of dogs euthanised were due to behaviour problems that did not respond to their behaviour modification programs. That's seven out of 10 dogs that present with any level of behaviour problem—could even be just jumping up on someone—being killed by those who are commissioned by the Government to care for them.*
- b. This information was published on the RSPCA website and later removed.



- c. The concern is not for the animals that were saved, but for those that were not. According to an RSPCA published document that was later removed, this amounts to 1,665 dogs euthanised. This is the number the PDTA is concerned about.
- d. The dogs that entered RSPCA facilities without behaviour problems and were returned to their owners or rehomed do not reflect the success of the RSPCA's Behaviour Unit, as those dogs did not have concerning behaviours to begin with.
- e. Why was this web page removed from public access?



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*“There were further assertions made that RSPCA NSW euthanises animals for convenience or based on economic considerations. This is incorrect. It is not unusual for animals to be in our care for many months (and sometimes exceeding twelve months) while we attempt to find solutions for them. There are many hours of deliberation and consideration spent on individual animals to exhaust reasonable options and many examples, every year, of animals being referred to veterinary specialists for interventions costing many thousands of dollars. The evidence given was baseless opinion that not only incorrectly reported statistics easily checked but was irresponsible in the context of veterinarians and animal care workers already having an increased risk of psychological harm without unfair and false accusations that they do not act in the interests of the animals they care for”.*

**PDTA response:** The PDTA have been approached by numerous current and former RSPCA staff and volunteers who have stated that assessments on certain breeds of dogs deemed not "sellable" are either not conducted or are done in such a way that sets the dogs up for failure. For example, some dogs are walked into cat enclosures, and if they show any interest, they are deemed cat-aggressive and killed.

Michael Donnelly from Animal Care Australia highlighted a case in which 49 out of 50 birds were euthanised by RSPCA when medication added to their water for under \$50 could have saved most if not all.

*“Other witnesses gave evidence, while sharing their opinions on how the enforcement function and animal care could be improved, that the use of foster carers can and should be considered. RSPCA NSW has, for a long time, run a large foster care program for shelter and inspectorate animals. This financial year, over 4,200 animals have been in foster care, including inspectorate animals”*

**PDTA response:** Is it true that 50 birds were seized and 49 were euthanised after staying only four days at the RSPCA, with the owner being charged \$20,000 for the care of these birds that were killed?

*“Our volunteers do not deserve to have their efforts, often over decades, maligned in this way.”*

**PDTA response:** The PDTA has never expressed any concerns about the behaviour of foster carers or volunteers. In fact, many of our members are foster carers and volunteers. We want to make it very clear that our issue is with the RSPCA, not with their volunteers.



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9. "Please provide a detailed breakdown (or provide documentation) showing how the \$21.5 million funding from the NSW Government has been spent on the RSPCA inspectorate to date. This is detailed in the funding submission, which is provided to the Committee on notice."

**PDTA response:** Wikipedia indicates that the RSPCA's net worth is \$100,000,000. Why are these funds not being utilised to better help the 70% of dogs being euthanised for behaviour problems that RSPCA cannot solve, and the RSPCA is asking for more funding?

23. "Professional Dog Trainers Australia stated in their submission:

*The PDTA caution against the RSPCA's exclusive promotion of "positive-only" dog training, emphasizing positive reinforcement without considering consequences or punishment.*

*Positive training methods have been shown to be as effective as negative/aversive training methods but without the use of fear or pain – can you explain why the RSPCA favours positive training models over punishment-based/aversive training techniques in response to comments by the PDTA?*

*RSPCA NSW is aware that the PDTA states a focus on results, not ideology. This is not a position RSPCA can adopt, whereby we would consider that any approach is justified to change animal behaviour. Our position is not unique amongst medical or psychological professions, whereby there is a responsibility to first do no harm and to adopt evidence-based approaches."*

**PDTA response:** RSPCA behaviour specialists seem to be unaware of the successful application of balanced training approaches. Several points of consideration arise:

- a. RSPCA favours Positive Reinforcement models, as does PDTA. Balanced trainers often excel at facilitating Positive Reinforcement outcomes in their programs.  
**It's never suggested that balanced training excludes positive reinforcement.**
- b. RSPCA appears mistaken in believing that aversives always generate fear and can only be delivered at or above the pain threshold. This is a gap in their knowledge and experience using balanced techniques. Numerous studies, like Christiansen (2001), show the effectiveness of aversive methods without welfare concerns. Additionally, there's no empirical research showing positive reinforcement effectively stops predatory aggression.



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*"Our study indicates aversive conditioning with the use of [e-collars] is an efficient method for reducing the probability of a dog chasing or attacking sheep on pasture... no adverse effect of this method was observed." <sup>1</sup>*

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- c. RSPCA states Positive training methods are as effective as negative/aversives. While true in some cases, it's not universally applicable. If RSPCA adopted a more results-based approach, more dogs could be saved. They conveniently omit numerous experimental studies stating otherwise, such as Marschark (2002), suggesting the need for a combination of techniques.

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*"While [R+] can be used exclusively for certain behaviours, it's suggested in the context of instinctive motor patterns, [R-] & [P+] may be desirable & necessary additions to [R+] technique".<sup>2</sup>*

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- d. RSPCA NSW acknowledges PDTA's results-based approach but won't adopt it. When 1685 dogs were euthanised for not responding to RSPCA's preferred training ideology, PDTA believes "personal preferences" shouldn't play a role in such decisions. It is a false assumption that complete exclusion of any aversive method automatically equates to better welfare outcomes

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*"A lower effectiveness of training method may generate more unpredictability and uncontrollability, and consequently, an increase in stress" <sup>3</sup>*

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- e. RSPCA claims its position isn't uncommon among medical professionals. PDTA suggests RSPCA seek help from Professional Dog Trainers regarding dog training and behaviour problems.

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<sup>1</sup> (Christiansen, 2001)

<sup>2</sup> (Marschark, 2002)

<sup>3</sup> (Fernandez, 2017)





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- f. RSPCA mentions an obligation to do no harm and to adopt evidence-based programs. PDTA takes exception to this:
- i. The RSPCA's anecdotal evidence based on their statistics of nearly 70% failure to modify behaviour in dogs with behaviour problems suggests action is needed.
  - ii. Many evidence-based studies show the successful application of programs utilising all four quadrants of Operant Conditioning principles. The RSPCA's research to identify best practices seems to "cherry-pick" studies aligning with their ideologies, as noted in Purely Positive, Force-Free, and Science (2019). As Mark Plonsky, Ph.D., a published animal learning researcher and professional dog trainer, states,

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*"Science does not say that animals learn better when using a force free/purely positive approach... when I say, "science shows", I am referring to a whole body of literature and not just a few cherry-picked studies."*<sup>4</sup>

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*"RSPCA is opposed to dog training methods and behaviour modification that involve aversive techniques, including physical force and fear. Our experts are very aware of the ability of aversive experiences (punishment) to suppress behaviours, but we are committed to adopting approaches that don't change behaviour by suppressing it (making animals afraid to express it) but by changing the animal's feelings and motivations because this is the best way to improve welfare. Many of the behaviours we seek to change in the animals are symptoms of emotional distress or dysregulation which means approaching the task as a "training" exercise is inappropriate."*

**PDTA response:** We object to the RSPCA's misinformed understanding that aversives are solely used to suppress behaviour. This misconception only serves to highlight that RSPCA experts lack experience across methods beyond your own.

Once again, the reply from the RSPCA sensationalizes punishment, attempting to convince people that punishment is only administered at high levels.

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<sup>4</sup> (Plonsky, 2019)



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However, given that dogs impounded and surrendered to the RSPCA often have unknown histories, it's impossible to determine the cause of their symptoms.

While the RSPCA chooses not to approach this from a "training perspective," they also euthanise 7 out of every 10 dogs they deem to have behaviour problems. The PDTA believes euthanising dogs for symptoms of emotional distress or dysregulation is "inappropriate."

*"Our experts are also aware of the science demonstrating that punishment can be used at lower magnitudes and in ways (with predictability and control) that are likely to reduce the risk of causing significant harm. However, the research also demonstrates that the response to punishment by an individual animal is influenced by their genetics and previous experience, including the extent to which they have experienced punishment or aversive treatment previously and whether the punishment is being used to extinguish an inherent or learned behaviour. These are variables that are not completely known about each animal that requires rehabilitation. Therefore, it is an unacceptable risk to employ techniques that could do harm."*

**PDTA response:** It is correct that mild aversives can be used at lower levels. In fact, Professional Balanced Trainers primarily use this model combined with Positive Reinforcement to help create progress in dogs that do not respond to Positive Reinforcement alone.

The PDTA also agrees that how an animal responds is based on history and genetics, which we find to be the case with every dog. If the RSPCA is aware that aversives can be used at very low levels and concurs that this can be effective without risks, why then is the RSPCA against using these methods on dogs that do not respond to their normal methods, leaving these dogs only to be euthanised?

Previously in this response, the RSPCA stated that "many of the behaviours we seek to change in the animals are symptoms of emotional distress or dysregulation, which means approaching the task as a 'training' exercise is inappropriate," indicating that the RSPCA knows their history. However, in the next paragraph, they state, "The response to punishment by an individual animal is influenced by their genetics and previous experience, including the extent to which they have experienced punishment or aversive treatment previously and whether the punishment is being used to extinguish an inherent or learned behaviour. These are variables that are not completely known about each animal that requires rehabilitation. Therefore, it is an unacceptable risk to employ techniques that could do harm."



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In one answer, the RSPCA states they cannot use punishment as it is inappropriate for dogs with a history of trauma, and in the next, they suggest the history is unknown.

If a person was admitted to a hospital with no history and amnesia and could not answer if they were allergic to a certain medication, does RSPCA suggest the patient would not be treated? Or would an experimental dose be administered with supervision?

The RSPCA seems to quote a lot of studies to excuse their lack of results. Perhaps it would be wise to gain their own experience before subjecting dogs to death.

*"Furthermore, the risk to the handler/owner is increased when suppressing unwanted behaviour using punishment. The sequelae of increasing pressure, force, fear, or anxiety on a dog is that it may respond with repulsion behaviours such as biting, which is a reasonable response when threat is perceived. Evidence in the published literature shows that confrontational training methods increase aggressive responses in dogs."*

**PDTA response:** RSPCA once again cherry picks survey data that does not represent how professional trainers utilise methods. It is inappropriate and unprofessional to deliberately ignore the greater body of research to suit a biased ideology.

From Steven Lindsay's 2005 scholarly three-volume series entitled, Handbook of Applied Dog Behavior and Training:

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*"The pendulum has swung from a stubborn reliance on punishment and negative reinforcement to an equally unnatural extreme on which the use of punishment and negative reinforcement (in some quarters) is shunned to embrace a so-called "positive" approach to training and behavioral control. Extreme positions, whether based on good intentions or not, are typically based on irrational beliefs and assumptions--not scientific knowledge and experience. .  
..Instead of extreme positions, accusatory inuendo, moralizing, and half-truths, what is needed is a balanced and informed attitude regarding the practical use, misuse, and abuse of punishment."<sup>5</sup>*

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Aversive techniques have many models in which they can be applied, with suppression being just one—and far from the most common one used by most professional trainers. However, those uninformed about modern forms of balanced

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<sup>5</sup> (Lindsay, 2005); (Lindsay, 2001); (Lindsay, 2005)



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training often suggest that suppression is the primary method. This highlights that the RSPCA is uneducated in modern training systems and models, yet they are given free rein to euthanise dogs.

Professional trainers do not threaten dogs or lead with confrontational behaviours. Once again, the RSPCA appears misinformed, inexperienced, and/or uneducated. Therefore, the evidence they cite from literature is largely irrelevant, as these are not models that professional trainers use.

*"RSPCA NSW strongly believes that an animal must have a life worth living and will, therefore, elect euthanasia where necessary, over a proposal to subject them to a life where their behaviour is controlled using force, pain or fear."*

**PDTA response:** Once again, the RSPCA tries to emotively connect people to the PDTA by using words such as "fear and pain," while referring to their own actions as "euthanasia" rather than "killing".

The RSPCA believes that an animal must have a life worth living, and it seems they get to decide if an animal lives or dies simply because the dog does not respond to their limited training ideologies. Throughout the RSPCA's response, they repeatedly explain how punishments and aversives are not the best practice, citing extensive literature and studies to support their stance.

However, when a person breaks an RSPCA law, they are punished, fined, have their animals taken away, and can even be incarcerated.

What happened to "positive reinforcement"?

Why is applying punishment to human beings the RSPCA's primary method of responding to behaviour they deem unacceptable?

*24. "Professional Dog Trainers Australia stated in their submission, regarding the use of prong and shock collars:*

*Organisations like the RSPCA perpetuate misleading narratives about pain, fear, and injury associated with these tools, despite a lack of substantiation and cruelty charges from reputable sources.*

*Can you please provide a response about the concerns over the use of prong and shock collars on animals and why these should not be legal in NSW.*

*RSPCA NSW opposes the use of canine training devices that are designed to change behaviour by being sufficiently unpleasant to override the animal's motivation to*



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*perform the behaviour. Examples include prong and electric shock collars. This is a position also held by the Australian Veterinary Association, the American Veterinary Society of Animal Behaviour, and the Pet Professional Guild of Australia."*

**PDTA response:** The PDTA does not use the term "shock collar," as it is an emotive slang term, and it is not professional to include such terms in legislative procedures. Once again, the RSPCA reveals their lack of understanding of modern training with remote collars. The RSPCA admits to having limited knowledge of remote collars, as they have never used or been educated on their use.

Modern remote collars are precision devices that can be used as a signal to the dog that a reward is to be expected, like a clicker.

*"It is conceptually obvious that the application of an electric shock to the skin's surface or the constriction/pinching of hard protrusions around the neck could be used to cause pain and could cause physical harm and injury.)"*

**PDTA response:** Once again, the term "shock" is used to emotively bias the discussion. The situation would be very clear if the RSPCA underwent professional training with these devices. There is no "shock."

"Electric shocks" are caused by contact with live electricity that sends an electric current through the body. The electric collar passes current only between the two probes, therefore it is not a shock.

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*"An electrical injury, (electric injury) or electrical shock (electric shock) is damage sustained to the skin or internal organs on direct contact with an electric current" (source: [HealthDirect](#)).*

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*The injury depends on the density of the current, tissue resistance, and duration of contact. Very small currents may be imperceptible or only produce a light tingling sensation (source: [Wikipedia](#)).*

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Most Remote Electric Collar training programs used by professional trainers have the collar set at the lowest perceivable levels.

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*“Physical punishment can cause varying degrees of pain, fear, stress, anxiety, hypervigilance and even long-term physiological harm/illness.”*

**PDTA response:** The key word is “can,” and the important takeaway is “doesn’t have to.”

The RSPCA seems very comfortable with punishment when it comes to human beings, favouring fines, jail time, and the removal of loved animals from people over applying positive reinforcement. There has been a strong push to recognise animals as “sentient,” just as sentient as humans.

Punishment applied by the RSPCA is the most prominent measure for reducing, eliminating, and/or suppressing behaviour in humans. Why are they not concerned about the long-term psychological harm or illness they might be causing?

RSPCA uses behavioural medication which has known side effects, fear, agitation, anxiety, dysregulation.

*“Where aversive stimuli are used, the chance of doing harm is reduced where the magnitude of the stimulus is low; there is a predictable, reliable signal associated with the stimuli, there is no delay between the behaviour and stimuli, and the individual animal has control to avoid the stimuli. Almost none of these mitigators would be reliably in place if these devices were made legal.”*

**PDTA response:** This is false, and there is no evidence to back this statement.

When educated dog owners or professionals use these tools, the timing and application are very controlled, resulting in behaviour changes in a significantly higher percentage of dogs—much higher than the 30% success rate the RSPCA reported in 2020-2021.

Let us also remember that electric collars are legal for use in Queensland, Victoria, Western Australia and Tasmania and these states are not having problems at all with dogs being harmed by electric collars, quite the opposite in fact.

*“The shock and prong collars involve the manual application of the punisher by the handler. If used in circumstances where the punishment is applied inconsistently, or with delayed timing, and/or the dog does not have the skills, knowledge, or ability to choose an alternative behaviour, these devices will be applying the kind of unpredictable, unavoidable stressors that are known to cause profound harm in animals.”*



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**PDTA response:** Again, the tool does not have to be applied only to extinguish a behaviour. The pressure delivered through a prong collar or e-collar can simply be a mild incentive to encourage a behaviour.

Next, consider that dogs responding to Positive Reinforcement are also responding to Negative Punishment. There is much evidence to suggest that Negative Punishment (the withdrawal or removal of an expected reward) can be as stressful or more stressful for some dogs. When handlers withhold food to teach their dog a behaviour, the dog may run through several known or shaped behaviours before landing on the correct behaviour, which ends the Negative Punishment and facilitates Positive Reinforcement.

The PDTA is astounded that the RSPCA is not aware of the stress induced in some dogs when Positive Reinforcement–Negative Punishment models are used. Or perhaps, if they are aware, they are only concerned when the stress comes from Positive Punishment, as this does not align with their preferred ideology.

*“Furthermore, as the dog fails to learn in these scenarios, would not be unusual for people to continue to increase the intensity of the punishment (the shock or neck pressure) to painful and dangerous points”*

**PDTA response:** The RSPCA is, once again, speaking from a place of no experience. Professional trainers would lower the amount of distraction rather than increase the pressure level. Learning modern techniques would be a huge benefit to the RSPCA and undoubtedly reduce the amount of dogs they are failing.

Also, from the same paragraph: “Furthermore, as the dog fails to learn in these scenarios...” If the dog fails to learn in RSPCA approved training programs, they are ‘euthanised’.

*“In addition to the general welfare risks and harms associated with aversive training techniques, there are specific welfare risks and harms that have been reported related to pronged collars, including stress, aggression, lower owner satisfaction with their dogs’ overall behaviour and leash walking behaviour and physical harm (acute blindness, severe swelling of the head, and inability to close the jaw, trauma and abrasions to the neck, serious puncture wounds, nerve damage, muscle injury, and laryngeal, oesophageal, thyroidal, and tracheal damage)”*

**PDTA response:** It is disappointing, though expected at this point, that the RSPCA are falsely using a case report here. The RSPCA has failed to provide a reference for this information, as the PDTA believe they are aware these statements are false.



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For the record, the PDTA has added the reference to Amy L. Brida et al. on the case report of a Police Service Dog that suffered from Compartment Syndrome. The symptoms described, such as “acute blindness, severe swelling of the head, inability to close the jaw, trauma and abrasions to the neck, serious puncture wounds, nerve damage, muscle injury, and laryngeal, oesophageal, thyroidal, and tracheal damage,” are symptoms of Compartment Syndrome, not prong collar use.

To summarise, the dog was a Police Service Dog in the US that had been wearing a prong collar for many years prior to this event. While biting a bite sleeve, the dog's teeth were caught in the webbing of the sleeve and the dog couldn't get free, causing the dog to thrash its head extensively, resulting in Compartment Syndrome. The report indicates there were no subcutaneous bruises or injuries from the prong collar, only minor scratches.

Other veterinary professionals have reviewed the complete report and verified that the prong collar was not a contributor to the Compartment Syndrome injuries.

We have these veterinary reports if needed.

Furthermore, when there are millions of prong collar users around the globe and only a single report that could (but doesn't) implicate the prong collar, this cannot be used to generate concerns about their use.

This information is easily confirmed by the PDTA, making this yet another disgraceful attempt by the RSPCA to cherry pick and distort facts.

*25. b. “Can you provide this data to the Committee on notice for the period of 2023-24?”*

*This information is publicly available in the RSPCA Australia Annual Statistics. <https://rspca.sfo2.cdn.digitaloceanspaces.com/public/Uploads/annual-statistics/RSPCA-Australia-AnnualStatistics-2022-2023.pdf>*

*The RSPCA Australia report gives detailed information on euthanasia rates for each species/species group at RSPCA NSW. It also includes this breakdown of euthanasia reasons for canines and felines.”*





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**Table 3: Reasons for euthanasia of dogs and cats by each RSPCA Society for the 2022-2023 financial year**

	State/Territory RSPCA								Total
	ACT	Darwin <sup>1</sup>	NSW <sup>2</sup>	QLD	SA	TAS	VIC	WA	
<b>Dogs</b>									
Infectious	0	3	2	22	3	0	2	0	32
Medical	13	12	202	393	73	5	92	52	842
Behavioural	9	11	775	673	184	7	176	71	1,906
Legal	0	0	14	22	0	0	24	7	67
Other	0	0	0	6	0	0	0	22	28
<b>Total dogs euthanased</b>	<b>22</b>	<b>26</b>	<b>993</b>	<b>1,116</b>	<b>260</b>	<b>12</b>	<b>294</b>	<b>152</b>	<b>2,875</b>
<b>Cats</b>									
Infectious	4	0	423	370	13	0	96	2	908
Medical	58	7	751	808	257	132	247	46	2,306
Behavioural	81	2	781	161	451	44	624	68	2,212
Legal	0	0	0	174	1	228	0	0	403
Other	0	0	285	10	0	0	83	17	395
<b>Total cats euthanased</b>	<b>143</b>	<b>9</b>	<b>2,240</b>	<b>1,523</b>	<b>722</b>	<b>404</b>	<b>1,050</b>	<b>133</b>	<b>6,224</b>

**PDTA response:** The NSW RSPCA euthanised 993 dogs, with 775 of those being due to behavioural issues. This accounts for 78% of all euthanised dogs, which is an alarming and unacceptable number, and an increase since 2021.

Yet RSPCA continues to stand behind their inadequate experts and training programs.

*"We can't serve two masters. RSPCA NSW operates the country's largest animal welfare enforcement agency on behalf of the NSW Government. This leads to vast volumes of animals being seized from cruel owners and in our care at a moment's notice. It creates an impossible situation to manage this while also having to accept, care for, and rehabilitate animals seized by councils. We're determined to prioritise the most needy animals, and we don't shy away from the difficult decision not to renew any council pound management contracts, but we are confident in the knowledge that this is the best decision for the animals of NSW."*



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**PDTA response:** Then the RSPCA should have all enforcement roles removed from their purview. If the RSPCA cannot provide better outcomes for dogs in NSW due to their other activities, then the priority should be saving dogs' lives.

It is quite simple that the RSPCA are now stating that they are not capable of handling the animals they are trusted with, meaning other organisations must be given opportunities to contribute to the animal's needs in NSW.

## Conclusion

PDTA highly recommend that the RSPCA seek better external sources of advice, especially considering they are still euthanising high percentages of dogs that do not respond to their behaviour modification programs. Credentials do not necessarily equate to experience, and experience is what leads to success. In an unregulated industry, the RSPCA cannot claim that accreditations automatically provide the most qualified and experienced trainers.

PDTA believes that the RSPCA has become completely complacent around the term "Euthanasia". Animals that do not behave as the RSPCA deems appropriate are allegedly placed on a Behaviour Modification Plan. The implementation of this plan is limited to ideologies that the RSPCA align with, and we have been informed not always carried out, which PDTA believes are to encourage more donations from Australians, not best practice and certainly not the welfare of dogs.

We refer to a statement made earlier in the RSPCA document and believe it is important that this be addressed: "Our position is not unique amongst medical or psychological professions, whereby there is a responsibility to first do no harm and to adopt evidence-based approaches".

In human medical and psychological professionals, they do not euthanise people for behaviour problems when the subjects do not respond to positive reinforcement.

Why does the RSPCA support painful veterinary procedures to take place or allow for high doses of behavioural medication? The PDTA would argue there is no difference when it comes to welfare when it comes to training and behaviour modification.

Why does the RSPCA not have a position statement around veterinary procedures such as: "You must not proceed with treatment if the treatment is unpleasant?"

We must see the parallels here of an organisation wanting the best thing for itself.



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“Death before Discomfort” is part of an extremist position statement of Force Free ideologists.

Prioritising death before discomfort devalues the life of the subject and can easily open the doors to abuse and exploitation simply because the animal is not easy or simple to work with.

Mental vs. physical health of dogs.

When it comes to decisions that involve the physical and mental health of dogs, just like in veterinary procedures, cost/benefit decisions become more about ethics, not science, and sometimes it is more ethical for short-term stress or discomfort if it means a longer-term quality of life outcome.

The PDTA pointed out that in 2020/21, RSPCA killed 1685 dogs (66.55%) due to behaviour problems that the RSPCA was not able to solve.

RSPCA has preferred behaviourists and trainers that align with their ideologies that they refer to, and in utilising these experts, the 'euthanasia' rate has gone from 66.55% to 78% in 2 years.

This clearly shows that the RSPCA ideologies are failing and whilst they seek external advice, they only do so from groups that support the same ideologies as they do, creating an “echo chamber” that reverberates the same, ineffective strategies.

This is known as “cognitive bias” and renders the RSPCA unable to see the harm they are doing as they avoid the imaginary harms they attempt to discredit.

The Australian people do not support this level of unnecessary euthanasia. If we averaged the dogs to be the size of the Labrador Retriever and laid them all end to end, that would be just under 2 kilometres of dead dogs, dead because they would not alter their behaviour for a food bribe, a pat, or a good dog signal.

**The PDTA represent hundreds of Professional Dog Trainers and their tens of thousands of dog-owning clients and we are calling for the removal of RSPCA powers to Euthanise ANY dog for behaviour problems until that dog has been thoroughly assessed by a PDTA Professional Trainer / Behaviour Consultant.**

Should you seek clarification on any points, please do not hesitate in contacting the Board of Members of the PDTA.

Yours sincerely,

Board of Members – Professional Dog Trainers of Australia

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