

NAPSA's public comment to NIH Working Group on
Assessing the Safety of Relocating At-Risk Chimpanzees, Aug 2018

Recommendation 1: The NIH and the facilities that house NIH-owned and NIH-supported chimpanzees should relocate all of these chimpanzees to the federal sanctuary system unless relocation is extremely likely to shorten their lives.

REPLY:

The North American Primate Sanctuary Alliance (NAPSA), a coalition of nine of the leading primate sanctuaries on the continent who care for over 730 retired primates (including over 340 chimpanzees) recommends chimpanzees be transferred to the federal sanctuary system unless they have a Category V health status (as defined in Table 4 of the Working Group's May 18, 2018 Report) and are considered moribund and actively dying. Most veterinary professionals agree that humane euthanasia is the most appropriate choice for moribund animals whose quality of life is severely compromised.

The phrase "extremely likely to shorten their lives" is not definitive and we recommend that it is removed entirely.

Sanctuaries do not and have never considered the transport of chimpanzees to be a reason to delay retirement. Although there are risks to transporting chimpanzees, there are ways to mitigate these risks. Sanctuaries are experts in doing so. This may include forming social groups of chimpanzees prior to transport (for chimps more used to solitary housing) or the use of positive reinforcement training to acclimate them to a transport cage (preventing the need for sedation for transport.)

The transportation of chimpanzees has occurred for decades between facilities in the laboratory, zoo and sanctuary fields. Despite the involvement of many thousands of chimpanzees of various health statuses, the practice has not been found to negatively impact chimpanzee wellbeing.

The federal sanctuary system was specifically designed for long-term care of aging and health compromised chimpanzees. It has experience not only in safe transportation of chimpanzees, but also in caring for geriatric chimpanzees, including chimps with insulin-dependent diabetes, heart disease, and kidney disease, physical disabilities including missing limbs, and mental disabilities including obsessive compulsions and self-harming.

The value of well-established and stable social groups for chimpanzees cannot be denied. We advise that intact social groups be transported to sanctuary (when possible) because this can reduce the need for social integrations with unfamiliar chimpanzees upon arrival.

Sanctuaries were built and are managed with the sole purpose of enhancing a chimpanzee's wellbeing. There are decades of experience and evidence proving heightened chimpanzee welfare in sanctuary retirement, and so sanctuary retirement is recommended over all other forms of captivity, especially for chimpanzees who are elderly or unwell. Even if a chimpanzee has a short amount of time in sanctuary, the positive outcomes they can experience are worth the risk involved in transport and acclimation to a new setting.

Recommendation 2: The NIH should oversee the development of standardized approaches by facilities that house NIH-owned or -supported chimpanzees for assessing each chimpanzee based on its health, behavior, social needs, and environmental requirements. This assessment should be used to better understand the animal's needs in its current and future environments and should inform relocation decisions.

REPLY:

NAPSA is in favor of developing standardized methods of analyzing chimpanzee welfare. Increased communication between facilities is vital in order to ensure that all needs of captive chimpanzees may be

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met during the periods of preparation, relocation, and acclimation. However, we would not want the development of assessment standards to slow the process of moving chimpanzees to sanctuary. We suggest a comprehensive assessment of chimpanzee health and wellbeing, including veterinary information but also feedback from behaviorists and caregiver management. It is crucial that the long-term benefits of transfer to sanctuary be considered alongside whatever potential stresses transportation may temporarily incorporate. Current and future living environments must be considered per the recommendation.

Recommendation 3: All facilities that house NIH-owned or -supported chimpanzees must use the same health and behavioral categorization system for these animals so that sending facilities, receiving facilities, and the NIH all understand why a chimpanzee is in a certain health status category. Veterinary records must be shared between sending and receiving facilities so that the receiving facility can provide informed feedback about the animal(s) considered for relocation.

REPLY:

This recommendation is apt but incomplete. NAPSA is in favor of record sharing and increased communication between sending and receiving facilities. It is imperative for the receiving facility to receive complete veterinary, behavioral and management records (not just veterinary records) of the chimpanzees who are being transferred or in consideration for transfer in order to create any necessary treatment plans and to have a full picture of their health. We also recommend working with the receiving institution to define their preferred time frame for receiving the records in advance of transfer.

Recommendation 4: Both sending and receiving facilities should collaborate to jointly expand the technical assistance available to the receiving facility to care for at-risk chimpanzees.

REPLY:

We agree with this recommendation. Sending facilities should provide important support prior to, during and following the transfer of the chimpanzees to the federal sanctuary system to ensure best care and integration outcomes.

Recommendation 5: With guidance from the NIH, facilities that house NIH-owned or -supported chimpanzees should develop shared relocation standard operating procedures (SOPs). These SOPs should describe risk-mitigation strategies (e.g., engaging veterinarians, behaviorists, and caregivers at the sending and receiving facilities in regular discussions before and after transportation; sending chimpanzees in intact social groups; providing flexibility to house smaller social groups at the receiving facility) that can be used when relocating at-risk chimpanzees.

REPLY:

The use of SOPs will streamline the transportation process, as well as encouraging transparency and confidence in the system. Both the sending and receiving institutions have the wellbeing of the chimpanzees as their first priority, and anything that will generate increased communication between the two facilities should be implemented, so long as the overall process of relocating chimpanzees is not slowed while SOPs are finalized.

Recommendation 6: When facilities disagree about whether to relocate a chimpanzee, independent expert veterinary opinion should be sought to inform the relocation decision.

REPLY:

Decisions to transfer a chimpanzee to sanctuary should not be decided by the attending and receiving veterinarians alone, especially at this unique point when fewer than 300 chimpanzees remain in laboratory settings. We recommend that all chimpanzees preliminarily classified as at risk or not-recommended to transfer be evaluated by a team of independent experts to include not only

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a veterinarian with ape and sanctuary experience, but also experts in chimpanzee behavior, management and psychological health. We also recommend team evaluations begin immediately when chimpanzees are deemed at risk or ineligible for transfer by the attending veterinarian at the current or future sending institution. NAPSA suggests the time frame for the independent review, evaluation, and coordination of transfer to sanctuary be no longer than 90 days.

Recommendation 7: Facilities housing NIH-owned or -supported chimpanzees should give the NIH sufficient information to undertake actuarial and demographic analyses of data on these chimpanzees.

REPLY:

The NIH should have detailed information on chimpanzees that it owns or supports. As previously stated, NAPSA supports increased communication between sending and receiving facilities housing NIH-owned or –supported chimpanzees, and actuarial and demographic analyses are included in that statement. Encouraging transparency at all steps of the relocation process (including after it has occurred) will lead to more confidence in the system and more opportunities to enhance chimpanzee welfare.

Additional comments

NAPSA believes that every NIH-owned or –supported chimpanzee should be moved to sanctuary unless he or she is actively dying and that this process of relocating the remaining chimpanzees in laboratories to sanctuary should continue as quickly as possible. When the NIH made the decision to end NIH-funded biomedical testing on chimpanzees with the Chimp Act in place as law, the intent was for all remaining chimpanzees in laboratories to be moved to the federal sanctuary system. It is in the NIH's purview to facilitate this process and ensure that it is carried out expediently and professionally. We appreciate that this Working Group was formed to continue this process and support that goal. Our concern is that added requirements and subjective assessment could be used as an excuse to slow down the process of chimpanzees being moved to sanctuary and may allow for some chimpanzees who have manageable health issues to be deemed not able to be transferred. We believe this would go against the intent of the law and that all chimpanzees should have the opportunity to live in a sanctuary setting unless they are medically at the very end of their life. It is important to recognize that NAPSA full member chimpanzee sanctuaries are independently evaluated by the Global Federation of Animal Sanctuaries to ensure that they are responsibly and efficiently managed and providing the very best care to their chimpanzees. There are many examples of chimpanzees in NAPSA member sanctuaries who are elderly and/or living with chronic illness – many who would have been considered “fragile” at the time they were transported to their respective sanctuaries – who are living years beyond expectations and enjoying each day.