

Long Beach Deer Reduction

Background Information on Options

Experience in Other Communities

Q: Contraception/sterilization option

A: Immuncontraception and surgical sterilization are forms of fertility control. The generic term “contraception” is a common term that is discussed for deer. Both Immuncontraception and surgical sterilization are not endorsed by the Department of Natural Resources. As reference, please see page 13 of the Urban Deer Technical Guide. <https://www.in.gov/dnr/fish-and-wildlife/files/fw-UrbanDeerTechnicalGuide.pdf>

Long Beach is not a closed deer population. It is open on three sides, meaning that deer are constantly exchanged with the surrounding area through emigration, immigration, and daily movements. Some deer that have been made infertile through contraception will leave the community and others will move in. This is part of the natural exchange of deer in the larger metapopulation and why contraceptives have little effect on the population. While capture and release efforts remove deer from the area they must be placed somewhere and inevitably new deer will still immigrate to the Long Beach population. It should be also noted that both contraception and relocation efforts take a tremendous physical toll on deer and some will inevitably die. In these cases the carcasses must be safely disposed of and are not fit for human consumption because of the drugs used for capture.

*Patrick Mayer, Private Lands Supervisor, Indiana DNR-Division of Fish & Wildlife
6/23/2021*

Q: Capture and relocation option

A: Live-trapping and translocation of deer will be permitted only to not-for-profit, in-state institutions approved by the DFW and will not be allowed for the release of deer into free ranging situations. This is subject to many conditions (condensed version I.e.: receiving facility must file a written plan for animal health, individual deer must be certified free of TB and Brucellosis, must has a Scientific Purposes License and numbered tag, mortality must be tracked and animals tested for CWD at the transporter's expense, all animals must be rendered incapable of reproduction, and treated for external parasites, and any animals administered drugs of any kind must be permanently marked (typically an ear tag). Also, please reference page 12 of the UDTG.

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Q: Every Indiana residential community that has utilized archery for deer reduction has a perfect safety record. There are no recorded incidents of an archer injuring a pet or person

A: This would be a true statement in reference to the CHAP (Community Hunting Access Program). I cannot speak to the safety record of individual hunters, hunting in deer reduction zones.

Patrick Mayer, Private Lands Supervisor, Indiana DNR-Division of Fish & Wildlife 6/23/2021

Q: Archery hunting has been legal in Indiana since 1951 and is the safest form of hunting in a residential community

A: See White-tailed Deer Biology <https://www.in.gov/dnr/fish-and-wildlife/wildlife-resources/animals/white-tailed-deer-biology/> 1951 was first deer season (three days in November). Archery and gun hunting can be done safely within urban environments. It just depends on what stipulations/guidelines are promulgated by the community wishing to implement the hunt.

Patrick Mayer, Private Lands Supervisor, Indiana DNR-Division of Fish & Wildlife 6/23/2021

Other Links & Highlights

2021 [https://www.nrawomen.com/content/why-putting-deer-on-birth-control-doesn't-work/](https://www.nrawomen.com/content/why-putting-deer-on-birth-control-doesn-t-work/)

Starting the discussion with sterilization, a wildlife management study at Cornell University found that, "Despite our efforts during the first five years of this study, it became clear that we could not reduce deer numbers on Cornell lands to a level that alleviated negative impacts, such as deer-vehicle collisions and over browsing." An alternative to sterilization is the use of immunocontraceptive vaccines, but they have proven less effective than sterilization; as the Cornell study states, "our own experience suggests that culling is the most cost-effective management option."

Surgical sterilization of female deer is very expensive and limited by scale. Sterilization requires that more than 90% of the female deer be treated, an extremely high rate to achieve in the field.

"The entire procedure costs about \$1,000 per animal, on average. However, this cost per deer is not constant because the easy-to-capture deer are treated first with little effort. Yet much greater effort is needed to catch the last remaining individuals. This greatly increases treatment costs per deer ... at or more than \$3,000 per animal."

Once the initial sterilization goal was reached, there would be ongoing annual costs to treat immigrating females.

Cornell indicated that communities considering, or being forced into, a deer sterilization program by opponents of deer removal "should be prepared to only achieve small reductions in deer numbers." In fact, communities that tried sterilization only have subsequently changed to lethal deer management, e.g., culling or hunting ... "or allowed deer populations to persist at undesirable levels."

2020 <https://www.fairfaxcounty.gov/wildlife/deer-management-frequently-asked-questions>

Q: Should park visitors at public parks selected for the archery program be concerned about public or personal safety?

A: Archery is one of the safest, most efficient, and sustainable methods for deer population control in Fairfax County. Since Virginia began tracking hunting injuries in 1959, no bystanders have been injured by an archer hunting deer anywhere in the Commonwealth. Annually in Virginia, more than 70,000 archery hunters hunt more than 700,000 collective days. Even with these numbers of participants, archery hunting accidents are extremely rare.

Authorized archery hunting activity in Fairfax County Park Authority and Northern Virginia Regional Park Authority properties is closely monitored by the Fairfax County Police Department with the assistance from the Park Authority. Archery groups are assigned to hunt specific parks. Each group is led by an experienced leader and alternate leader. Every archer assigned to one of the groups must pass a target proficiency test every two years using the same equipment they will use to hunt. Group leaders and archers are bound by standards which are enforceable by group leaders and the Fairfax County Deer Program Manager. Each archer carries a list of specific procedures and rules of conduct to be followed during hunts.

Q: What is the wounding rate for archery hunting?

A: Fairfax County collects detailed data about each hunt as part of the county's Deer Management Program. Between FY 2014-2020, the Fairfax County Deer Management Program has reported non-recovery/wounding rates of approximately 4-9% using modern archery tackle. This is drastically less than the over 50% wounding rate reported by groups opposed to archery hunting. There are multiple reasons for the discrepancy. The technology of archery equipment has advanced significantly over the last 25 years.

2020 <http://petslady.com/article/culling-herd-versus-contraception-deer-fripp-island>

The immunocontraception study on Fripp has been most successful. Residents are very pleased by the results and happy to see that the remaining deer population on the island is healthier and causing fewer conflicts.

The results of all these studies in deer have shown that only 'isolated herds' like the environment at Fripp can be managed in this way.

As far as costs at Fripp, the initial capture and treatment of deer with a 2-year vaccine was approximately \$500 per deer. Achieving rapid population stabilization and slow decline for about 300 deer was approximately \$40,000 for both the first and second years, with lower amounts thereafter.

However, important to note, this expense was roughly six times more expensive than paying for sharpshooters.

2018 https://www.dec.ny.gov/docs/wildlife_pdf/commdeermgmtguide.pdf

Q: *What happens if we don't manage the deer? Won't they come into balance with the environment?*

A: *Deer are prey animals that in a “balanced” state have a high level of mortality from predators. Without that high mortality, the population will continue to grow until there isn’t enough food available to support them and death by starvation becomes a significant factor. Long before that point, high rates of vehicle collisions and severe damage to landscaping and natural ecosystems make it clear to most people that letting the population continue to grow is bad for the deer, the environment, and the community.*

Q: *We don't want to hurt the deer; why can't we just move them somewhere else?*

A: *Translocation, or moving deer, can't really be considered a humane procedure. Deer are very susceptible to capture stress, and research has shown that a high percentage of translocated deer die of stress-related causes shortly after release. In addition, moving deer increases the risk of spreading disease.*

2017 <https://www.dec.ny.gov/animals/104911.html>

However, fully functional forest ecosystems don't exist in New York. Even deer in large wild areas such as the Adirondacks are not living in an intact ecosystem. Wolves and mountain lions, historically their principal predators, have been eliminated. Bears, bobcats and coyotes do prey on deer, particularly fawns, but hunting by humans is currently the primary predatory force acting to control population levels. The exception is in urban and suburban areas, where the majority of deer deaths are caused by collisions with vehicles.

2014 <https://www.buckmanager.com/2014/05/12/urban-deer-management-and-contraception-for-white-tailed-deer/>

To get to the point, contraception does not work on free-ranging white-tailed deer herds. It barely works on captive deer herds because of either the inability to get an appropriate dose of birth control to the deer on a daily basis or because enough of the deer cannot be