Donkey management and utilisation in Peshawar, Pakistan

by

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Abstract

A brief review is provided of the management of donkeys in the vicinity of Peshawar, Pakistan. In this area donkeys are mostly used for the transport of bricks to and from clay kilns. The animals work intensively on an unnutritious diet. The work of the Brooke Hospital for Animals in helping to care for these and other donkeys is described. The hospital provides both mobile teams and an inpatient service for donkeys. The hospital also provides training for donkey owners on such subjects as management, saddlery, housing and health.

Introduction

In Pakistan, donkeys are mostly used for transport. They pull carts and carry goods (particularly in mountainous areas). In Peshawar City, donkeys are mainly used for carrying loads such as logs, bricks, gravel, sand, fuel and rubbish.

In the outskirts of Peshawar City, in the village of Surezai, there are about 120 brick kilns and about 7000–10,000 working equines. Here the donkeys are used to transport bricks as they are firm-footed and suitable for carrying freshly prepared bricks to the kilns. Each kiln owner has their own donkeys. These donkeys carry about 45–55 bricks of freshly prepared clay (Photo 1). Each brick weighs about 2.6 kg. The animals work for about 12 hours a day, six days a week.

Donkey management at the brick kilns

Stabling

Each kiln owner has a small stable for their donkeys. The floors of these stables are always wet and muddy. The mangers are made of clay, and there is no proper ventilation in the stables. Few brick kiln owners provide water troughs for their animals in the stables and where troughs are present, they are usually very dirty. Sometimes buckets are used to provide water for the donkeys two to three times a day.

Donkey foot care

Brick kiln donkeys are not shod and their hooves are not properly cleaned. The hooves are commonly full of mud, dung and small pieces of gravel.

Saddles

The saddles used at brick kilns are made locally. The materials used for saddles are mostly old blankets and pieces of old clothes.

Diseases

The main disorder of the working donkeys at the brick kilns is saddle sores. There is ignorance among the owners of the working animals and they believe in getting work out of the poor creatures at any price. Saddle sores are caused by the pressure, friction, and rubbing of the saddle or girth against the skin during work. The majority of the sores are caused by uneven pressure placed on the muscles of the back.

The animals at the brick kilns are under-fed and debilitated. They are provided with wheat straw or rice husks which contain few nutrients. They are neither fed with green fodder nor given any salt, despite the fact that they work for 12 hours a day. They are never groomed.

The donkeys are heavily infested with endoparasites. Animal owners at brick kilns are very poor. They cannot afford to deworm their animals regularly. They are also uneducated so they have no awareness regarding the health, housing, and feeding of their animals.

Role of the Brooke Hospital for Animals in Peshawar

The Brooke Hospital for Animals started its work in Peshawar, Pakistan, in 1991 with one mobile team. Now it has five mobile teams with one static clinic and one field clinic at Peshawar and three mobile teams at Marden. Each mobile team is headed by a veterinarian, with two veterinary assistants and a driver. The team provides free treatment to debilitated, injured and diseased animals in different zones. From 1991 to 1997 they treated 91,000 donkeys and 227,000 horses. The Brooke Hospital understands that the owners of the animals at the brick kilns are very poor. It is difficult for them to afford to give balanced
rations to their donkeys or allow injured animals to rest. Bearing these points in mind, the Brooke Hospital in Peshawar started a field clinic in Surezai in 1996 capable of treating 20 inpatient animals. All facilities, including a balanced diet, free treatment and good management are provided. A mobile team with a veterinarian visits the field clinic every day and treats the inpatients.

The Brooke Hospital also understands that one major problem at the brick kilns is saddle and harness sores. Clearly, the owner or user of the donkeys should be the first person to detect the occurrence of sores. Therefore Brooke Hospital veterinary officers have started to educate the owners of emaciated and injured animals at brick kilns. The subjects covered are general management, saddle making, saddle/harness fitting, grooming, feeding, watering, construction of stables, stable maintenance and foot-care.

These measures have brought positive changes in the attitudes of owners towards their animals. However, there is still a lot of work to be done. The Brooke Hospital has therefore planned an expanded programme for the period up to the year 2000 which will include more education of donkey users, establishment of field clinics for indoor patients, husbandry training for the owners of the admitted animals and provision of more mobile teams to cope with the increasing work load in the area.

Conclusions
Donkeys are the most neglected animals in Pakistan and the owners/users are usually completely ignorant of improved management methods. Virtually all the owners are also extremely poor, which makes any improvement in the state of their donkeys very unlikely. Ignorance associated with poverty is very difficult to overcome. At least the activities of the Brooke Hospital reduce to some extent the pain and suffering of the donkeys until progress can be made in other problem areas.