

Ruth Morgan

A report on my trip to Ethiopia to carry put a research project entitled:
The prevalence and causes of lameness in working donkeys; a
comparative study of rural and urban donkey populations in Southern
Ethiopia.

In June 2005 I travelled to Ethiopia to carry out a research project investigating lameness in working donkeys. Ethiopia has approximately 5.2million donkeys, the second largest population in the world (after China) and they are vital to the socio-economic structure of the country. They are used in cities, towns and the rural areas for carrying loads which range from over 100Kg of grain in the city to firewood, water, tef (the local maize) and straw in the rural areas where they can walk up to 25km to markets and watering points. Their importance cannot be underestimated especially for the women of Ethiopia who are the bearers of these loads if the family does not own a donkey. One can therefore appreciate that the family's donkey is their key to survival, without the animal they cannot transport their goods to sell at market or carry water to they're homes. The Donkey Sanctuary, a large Devon based charity has set up a clinic in Debre Zeit, a town just south of Addis Ababa. As well as the stationary clinic they visit over 200 sites in the surrounding area with a mobile clinic which enables them to treat over 2000 donkeys a week at least. The mobile clinic is able to reach very remote areas, it also goes to the Mercato in Addis Ababa. Mercato is said to be the largest open air market in East Africa and there can be as many a 2000 donkeys here each day. The mobile clinic consists of a four wheel drive vehicle(essential for all remote roads in Ethiopia) carrying all the essential drugs and equipment needed to treat all of the most common ailments, it is manned by at least one vet, two animal health assistants and a driver.

The health problems encountered in the donkeys of Ethiopia consist of those seen everyday in British equine practice such as colic, wounds, lameness, inappetence etc, some that are specific to working donkeys such as back sores caused by a lack of appropriate padding under heavy loads and those which are specific to Ethiopia such a histoplasmic lymphangitis, rabies and hyena bites. An important part of the clinics work is a de-worming programme which has been very successful in the past and is enthusiastically received by the donkey owners who can see the positive effects it has on their donkeys.

I was based in Debre Zeit and able to go with the mobile clinic to the surrounding areas. I visited as many of the sites as I could during my time and at each site I recorded the number of donkeys treated in total, the number which were lame, the cause and I took a photograph of every case. I will attempt to summarise my findings briefly. My study was focussing on the prevalence of lameness, comparing the donkeys in the city with those in the rural areas. The demands on the donkey population in the city are very different to those in the rural areas and therefore the disease status of the two populations is different. Though my study was short I found a significant difference in the prevalence of lameness between the two populations with the city donkeys having a much greater prevalence than those in the rural areas. The causes of lameness also differed, in the city car accidents and penetrations with sharp objects were the most common whereas in the rural areas hyena bites and thrush were more common. These findings fit with the managements of the donkeys in the different areas as hyenas are predominantly found in rural areas where donkeys are often left to roam in the night or housed in small wooden huts.

I hope my research will help the vets at the clinic to focus on some of the problems highlighted. The clinic puts great emphasis on the education project that they run in conjunction with the mobile clinics, a trained animal health assistant goes with the clinic and talks to the owners who bring their donkeys about various aspects of management and welfare. My research may therefore help to highlight some management issues which lead to lameness and may be included in the education project to try and reduce the lameness problems. Apart from this benefit it is apparent when searching the literature that very little has been written on working donkeys and so it is a privilege to be able to contribute something to this desperately under-researched area.

During my time in Ethiopia it was privileged to see some of the most beautiful areas the country has to offer whilst on the road with the mobile clinic such as the lakes of the rift valley and the Entoto mountains north of Addis Ababa. As a veterinary student it was an invaluable experience as I was able to see over 100 donkeys every day with different complaints most of which have their equivalent in the UK as well as exotic diseases that I've only read about before. The vets I worked with were experts on the health and welfare of working donkeys and were keen to teach, I am greatly indebted to them for the success of my project. The experience of working in the area of development veterinary medicine was both rewarding and inspiring and I feel it has given me a perspective on veterinary medicine that I will carry with me throughout my career.

Ethiopia is known by many people in the west only by the famine of the 1980s and though it still has a great deal of problems caused by poverty I found a country rich in culture, natural resources and the desire to move away from those negative images. Veterinary medicine will play a vital role in the future of the country as donkeys and oxen are not likely to be replaced in the near future by any means. It is a privilege to see the social impact of my chosen career demonstrated so clearly.