The health and husbandry of donkeys used by Zabbalin rubbish collectors in Cairo, Egypt

by

Salah Wahib Fahmy

Brooke Hospital for Animals, 2 Bavram El-Tonsi Street, Zein El-Abdein 11441, Cairo, Egypt

Abstract

The Brooke Hospital for Animals in Cairo, Egypt, provides veterinary assistance for working animals free of charge to their owners. Donkeys owned by the Zabbalin (rubbish collectors) are particularly in need of this assistance due to the demanding nature of their work and ill-fitting collars and saddles.

Introduction

The Brooke Hospital for Animals aims to improve the condition and well-being of animals by providing free veterinary treatment for working horses, donkeys, and mules of poor people, and advising and educating the owners and users of working animals. The Brooke Hospital in Egypt was founded in 1934 by Mrs Dorothy Brooke at its present site in Cairo, to give animals free care and treatment. Later it was declared as an Egyptian charity and has carried out its mission to the present day. Its work involves:

preventing cruelty to animals and lessening their suffering by improving

- their conditions
- helping poor owners by providing free treatment to their animals
- establishing hospitals and clinics

training veterinarians and veterinary nurses and sending them into the field.

Staff bring diseased animals to the hospital in two mobile clinic vans to rest and to be cared for. Staff also visit different markets where it is easy to get in contact with the animal owners.

The Zabbalin communities

One of the activities of the Brooke Hospital in Egypt is to help the rubbish collectors (Zabbalin) in their settlements. The Zabbalin people live in a series of communities around the major towns and cities of Egypt. It is fortunate that the Zabbalin have selected donkeys for their work, as no other equine would survive the hardship. There are three Zabbalin communities which are regularly visited by the Brooke Hospital around Cairo (Photo 1).

If life is hard for the Zabbalin it is even harder for their donkeys. The Brooke Hospital found that these communities needed daily veterinary visits as they had a large number of animals. On a normal day each donkey may cover up to 50 km collecting waste materials (Photo 2). In the summer the heat sometimes causes the stored rubbish to self-ignite and the animals have to walk through the fire and smoke to their stables. The stables do not have water troughs and the Brooke Hospital is now beginning to supply them. The Brooke Hospital have been working with Zabbalin communities for 15 years.

Photo 1: A Brooke Hospital team treating the donkeys of Zabbalin rubbish collectors in Cairo, Egypt





The health and husbandry of donkeys used by Zabbalin rubbish collectors in Cairo, Egypt

Photo 2: Zabbalin rubbish collectors with donkey cart in Cairo, Egypt

An additional task of the Brooke Hospital is to try and stop some of the traditional methods of treatment eg, mud poultices for treating burns, cutting ears for gut compaction, and firing for tetanus. During his visits, the author has answered many veterinary questions.

Owners are invited to call Brooke Hospital staff if their animals are sick. They are advised on how to look after their animals and take care of them. Lame and sick donkeys should not be used for work. Fit animals should work for a maximum of three hours and then have half an hour's rest, and be offered water, especially in the summer. The hooves should be inspected daily and cleaned with a hoof pick when necessary. To prevent complications (heart failure, heat stroke, etc) animals should not work for more than six consecutive days. In general, donkeys should not be worked until they are at least two and a half years old.

Prevention is better than cure

Injuries often occur when insufficient attention has been paid to equipment. Few realise the damage that may be inflicted in a very short time by an ill-fitting saddle or collar. Many owners consider that the weight of a donkey's body is equally distributed over its limbs. This is not true, the fore limbs carry more of the body weight than the hind, and the amount which they carry is influenced by the position of the head, which, if held high, relieves the fore legs from weight, and if depressed increases the weight. In regular use the saddle requires attention everyday. Saddles should be inspected almost as regularly as the feet. Each weak point in the harness should be known and repaired before trouble occurs.

General causes of injuries

Donkey welfare will be best if donkeys pull well-balanced carts with good, lubricated wheels. They also need good, simple harnesses. This makes pulling easier and the animals stay in good condition. Skin injuries to the back, shoulders or other parts of the body due to saddles, harnesses or collars are brought about by combinations of friction and pressure. If a donkey with a saddle sore must be worked the pressure and friction on the sore must be reduced or preferably eliminated.

Donkeys, people and development Note: This version of the paper has been specially prepared for the ATNESA website. It may not be identical to the paper appearing in the resource book

ACP.

Collars

The simplest form of collar that can be worn is the breast collar or breast harness. The term breast collar is not correct, however, as the shoulders and not the breast are the points from which the work is done, but the term is a convenient one and is generally used. The ordinary neck collar oscillates from side to side while the animal walks. The breast collar doesn't oscillate, but has a sawing action. Sawing is obviously a greater source of friction than oscillation, and in consequence the make and fit of the breast collar must be such as to present a perfectly smooth surface next to the donkey's skin. Neglect of this precaution is soon evident as any small projection in the harness is capable of doing great harm. Harness materials should be from the local environment. Numnahs (saddle-shaped pads) can be made of sheepskin, carpet, blankets, tyre tubes filled with paper, or bags with hay. The nose band should be of webbed rope and wide enough to apply pressure to the bone of the nose and not to the air passage.

Zabbalin donkey problems

Wounds

Donkeys with serious saddle wounds cannot work and become largely useless for prolonged periods. Treatment normally involves the application of jelly based antiseptic cream with cod liver oil and covering with a perforated plastic film to keep the wound moist and to help healing. Wounds which occur on the trunk frequently heal without significant scarring. Wounds on the distal limb do not appear to have the same capacity for healing and often cause long-term problems.

Infection

The failure of a wound to heal should always alert the veterinarian to the possible presence of a foreign body. Collagenase enzymes produced by bacteria that have entered a wound are usually enough to retard or prevent healing. Clearly the extent of drainage is a significant feature of any wound. Abscesses that have no drainage will not heal. Wounds heal faster on the head, neck, and abdomen. Antibiotics and trimethoprim sulphonamide may assist healing in limb wounds.

Poor nutrition

Malnutrition severely increases the time for a wound to heal.

Colic

Animals may eat foreign bodies in rubbish which can block the small intestine causing obstructive colic that can be fatal. Animals should be supervised by their owners to avoid them feeding on rubbish.

Lameness

Foreign bodies entering the feet and limbs cause infection. Complete rest is essential for the lame donkey.

Tetanus

Complications of animal wounds caused by *Clostridium tetani* can be prevented by vaccinating animals against tetanus twice a year.

Burns

These can be caused by flames or chemicals and are treated by flushing with saline and pain killers. Burns are extremely painful and the affected animal should be kept warm and handled quietly and gently at all times.

Conclusions

Constant inspection and guidance by Brooke Hospital veterinarians regarding harness and animal management means that Zabbalin donkeys now survive longer, and the quality of their lives is improved.

Note: This version of the paper has been specially prepared for the ATNESA website. It may not be identical to the paper appearing in the resource book