Community Dog Welfare Programme 2012



Kopan VDC







Community Dog Welfare Programme 2012

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- 1. **Programme Plan**
- Information Posters and Leaflets Google Maps Wards 6, 7, 8, 9 Household Interview Focus Group Discussion 2.
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Community Dog Welfare Programme Kopan 2012

Summary

The Community Dog Welfare Programme aims to improve dog health, control rabies, manage the dog population and promote a healthy safe environment for the community. The overall goal is to develop awareness and responsibility, on the part of both the community and local government, for the management and welfare of owned and community dogs throughout Kopan VDC.

The second phase of the programme took place in Payutar, Kopan VDC, in April-May 2012. Working with the local people in collaboration with Kopan VDC, the Himalayan Animal Rescue Trust (HART)and Kathmandu Veterinary Clinic, the programme extended from Wards 8 and 9 covered last year, to include Wards 6 and 7. An awareness campaign and household survey informed the community and gave people the opportunity to register their dogs for treatment. All community dogs were counted and females identified for spaying. A dog census was obtained from these activities.

The local people brought in 145 dogs for de-worming. The HART veterinary team carried out 54 operations in a field clinic. Post operation monitoring and medication was carried out by HART and Community Dog Welfare. Volunteer veterinarians from the Kathmandu Veterinary Clinic and HART staff vaccinated 135 dogs against rabies. Including privately vaccinated dogs, this gives a 74% coverage for anti-rabies vaccination throughout the four wards.

1. Introduction

Dogs play a significant role in the community. Whether as pets, companions, guards, community or stray dogs, they are here because of the human population. Dogs and people interact and depend upon each other, therefore it is meaningful that health programmes for dogs be carried out alongside those for people. We have a shared responsibility for the health and welfare of the dogs that live in our community. In this area many of the owned dogs have come from the street, and continue to be free-roaming in their adopted locales. Ownership is not always clear, but rather an ongoing process of strays becoming community or owned dogs.

Following last year's programme in Payutar, Wards 8 and 9, the Kopan VDC requested that the programme be extended to include Wards 6 and 7 this year, the plan being to progressively add wards each year in order to cover the whole of Kopan VDC. In collaboration with HART, the VDC and the Kathmandu Veterinary Clinic, supported by HAT (UK), Community Dog Welfare Kopan held the second phase of the programme, working with the local people to build awareness and demonstrate how dog welfare involves the whole community.

The comprehensive programme included an awareness campaign, household survey and dog census, de-worming, sterilisation operations, post surgery monitoring and anti-rabies vaccination. At each venue, display boards with photos from last year's programme were set up as a focus of interest for the community.

2. Goal of the Programme

The goal is to develop awareness and responsibility on the part of both the community and local government authorities, for the management and welfare of owned and community dogs throughout Kopan VDC.

3. Aims

To improve dog health	Sterilisation is an important aspect of dog welfare. Spaying improves future health by preventing infections and cancers. Regular de-worming promotes dog health.
To manage the dog population	Spaying is a humane way of managing the dog population, as opposed to the cruelty of poisoning. Fewer unwanted litters
To control rabies	Annual vaccination protects both dogs and people from contracting rabies.
• To promote a healthier, safer community environment	Having healthy well cared for animals benefits the whole community.

4. Location

The programme, based in Payutar, covered Wards 6, 7, 8 and 9 of Kopan VDC (Figure 1).

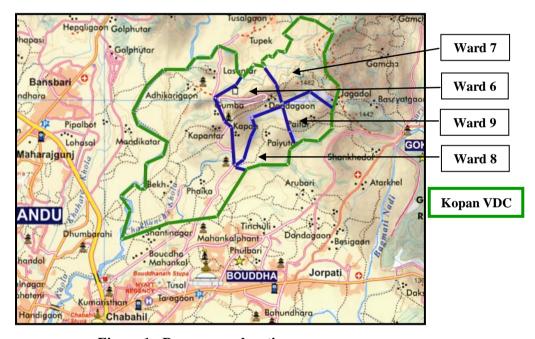


Figure 1: Programme location

5. Activities

A programme plan was prepared as a guide to carrying out the activities (Annex 1).

5.1 Awareness Campaign

A programme proposal was presented to the relevant authorities. Meetings were held with the VDC officials throughout the planning stage, to request permission to hold the programme and to enlist their support. Preliminary reconnaissance of the four wards served to establish the boundaries of the programme area and obtain an estimate of the dog population. Key people were met at the monasteries and Police Training Post to inform them about the programme and invite them to participate. Information leaflets and posters were displayed at key locations in the programme area, including the Kopan VDC office, schools and tea shops (Figure 2, Annex 2). A poster was prepared to announce the programme (Annex 2).

5.2 Household Survey & Dog Census

The programme area was demarcated on a Google Earth base map (Annex 3). The four wards were subdivided into survey units based on settlement distribution.

A team of student volunteers carried out a survey (Household Interview Annex 4) of the dog-owning households to assess the dog population and demand for de-worming, spaying and anti-rabies vaccination (Table 1, Photo 1). Free-roaming dogs (i.e. free at least some of the time) were recorded (Table 2, Figure 3).

Due to the wide distribution of settlement across the four wards, and fewer volunteers this time (who arrived late because of a *bandh*), the survey had to be completed over the next few days.

The programme schedule was distributed during the survey, and households requesting operations were given appointment slips.



Figure 2: Caring for dogs

5.3 Focus Group Discussions 20 – 30 April

Community members helped record each cluster of community dogs and identified females to be spayed. Free-roaming dogs, both owned and community dogs, were recorded (Tables 1, 2, Figure 3).

Discussing the perceived problems and advantages of these dogs, it was found that in this semi-rural situation, community dogs are generally regarded positively. Many dogs accepted into the community were previously strays (Focus Group Discussion Annex 5).

Table 1. Survey results

		Gender		Owne	ership	*Free	Reques	sts for Trea	atment
Ward	Female	Male	Total	Owned	Comm- unity	roaming	DW	Spay	ARV
6	36	48	84	62	23	70	44	26	34
7	9	21	30	26	4	29	23	8	22
8	39	70	109	96	13	73	85	21	91
9	12	33	45	44	1	23	39	4	31
Total	96	172	268	228	41	195	191	59	178
%	36%	64%	100	85%	15%	73%	71%	61%	66%

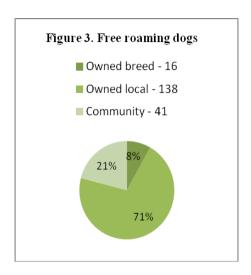
^{* &}quot;Free-roaming" includes community dogs, plus owned dogs that are free sometimes or at all times.

DW: De-worming

ARV: Anti-rabies vaccination

Table 2. Free roaming dogs

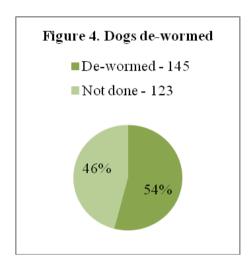
		Free Roa	aming Dogs	
Ward	Owned breed	Owned local	Community	Total
6	7	40	23	70
7	2	23	4	29
8	7	53	13	73
9	0	22	1	23
Total	16	138	41	195
%	8%	71%	21%	100%



5.4 De-worming 5 May

The de-worming component was carried out with the help of volunteers. Students from Shree Yagyamati Secondary School, Payutar, assisted with organisation and dog registration. A total of 145 dogs were dewormed, 107 on the day (Photo 2), with a further 33 dogs in the shelter de-wormed after being spayed. A further 5 dogs were treated later. Thus 54% of the recorded 268 dogs were de-wormed (Figure 4).

De-worming was free for all dogs. People were encouraged to continue regular de-worming, the medicine to be made available in Payutar at cost.



5.5 Spaying & Neutering 13 – 16 May

The HART veterinary team conducted a four-day field clinic in Payutar. The operations took place in a field clinic comprising registration area, preparation tent, surgery tent and post operation recovery tent, set up in a shaded field (Photo 3).

Community dogs were brought in the evening before the operation to be held in the Community Dog Welfare shelter, while owned dogs were brought in at appointed times each day (Photo 4). Kopan and Ani Gompa brought in their owned dogs and also sponsored operations and treatment for community dogs in/around their compounds, the monks and nuns bringing the dogs in and taking responsibility for after care (Photo 5). Police Training Post staff brought in local dogs that stayed in the shelter for post operation care. A taxi driver brought a dog for spaying after hearing of the programme (Box 1).

Box 1: Princess and her taxi driver



Narayan Pandey drove up the hill in his taxi. A dog on the street near his house had a litter of puppies last season. Local people threw them in the river to drown. Narayan was concerned this would happen again next time. Though outside the programme area, the word had spread. Could Princess be spayed? He returned with the dog. She was spayed then cared for in his home.



All dogs were registered and went through a health check before surgery (Photos 6, 7). Owners were required to sign an indemnity statement and received instructions on after care. The surgery results are given in Box 2.

Box 2. Surgery results

• **54 dogs underwent surgery** 49 spays, 5 castrations (Photos 8, 9)

2 dogs unfit for surgery 1 returned home, an old dog remains in care (Box 3)

1 dog not spayed Due to time constraint - held in shelter, spayed later

• 4 dogs with CTVT

- 2 females (1owned, 1community) with CTVT were spayed and given chemotherapy, follow up treatment at the Kathmandu Vet Clinic.
- 1 community male diagnosed at the programme, to be treated at Kathmandu Vet Clinic
- Another female had been treated for CTVT prior to the programme (Box 4).

After surgery, the dogs were monitored in the recovery tent by owners and volunteers then checked by HART staff before returning home (Photos 10 - 13). The community and police dogs, with coloured identification bands, were held in the shelter for post operation care. One dog stayed in overnight to be monitored closely due to a problem during surgery; she was taken home the following day.

Box 3. Daisy not spayed



Daisy came with a group of dogs from around Amitabh Gompa. An old dog in poor condition, she failed the health check for spaying. Instead of going back to an uncertain future, Daisy is staying on in the shelter.



Box 4. Kali moves in

Kali turned up in Payutar - a thin lone stray, less than one year old with TVT. Nobody wanted her around until Gokul Bhandari befriended her. She had chemotherapy and the tumour cleared in time for her to be spayed at the programme. Now she is a community dog based with Gokul and his family.



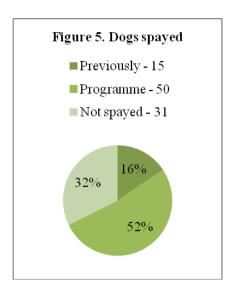
The Kopan VDC Secretary and Engineer and HICAST veterinary students visited the venue (Photos 14, 15).

Of the 96 females counted in the survey this year, 15 had already been spayed during the 2011 programme. 50 were spayed this year (including one after the programme). Thus 68% of the recorded females have been spayed (Figure 5).

5.6 Post Operation Monitoring &Treatment

Monitoring was carried out by a HART veterinary doctor and veterinary nurse for two days. Community Dog Welfare continued daily monitoring until all dogs were clear.

The 20 community dogs retained in the shelter recovered with few problems. Only 2 required medical attention. In 3-5 days all were clear and returned (Figure 6, Photos 16, 17).



15 of the 34 dogs returned directly received medical attention during the following week – anti-biotic or anti inflammatory injections, anti-biotic tablets and topical treatment for redness, swelling and discharge. Sutures opened on 2 dogs and 3 had swelling a week after surgery (Figure 6, Photos 18 - 21). Several people called to ask for help up to ten days following surgery.

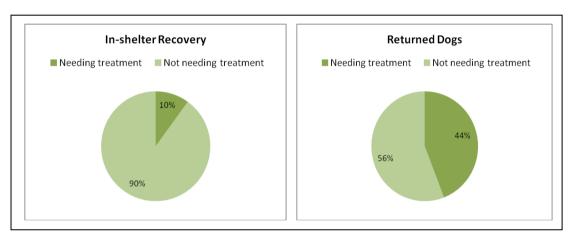


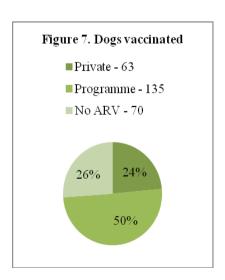
Figure 6. Recovery of in-shelter and returned dogs

5.7 Anti-rabies Vaccination 19 May

A total of 135 dogs were vaccinated against rabies. Volunteer veterinarians Dr S.P. Gautam and Dr Sushmita Gautam from the Kathmandu Veterinary Clinic vaccinated 115 dogs. Local volunteers assisted with registration and completion of vaccination record cards. The 20 dogs held in the shelter after surgery were vaccinated by HART staff (Photos 22, 23).

Approximately equal numbers of females and males came in for vaccination, not reflecting the higher proportion of males in the population. This is because 63 owned dogs, mostly male, had been privately vaccinated. Thus a total of 198 dogs out of 268 have current vaccination, amounting to a74% coverage over the four wards (Figure 7).

37 doses of vaccine were donated by Dr Pant of the Rabies Vaccine Production Centre, Tripureshwor. The remaining vaccine was purchased from vet suppliers.



5.8 Programme Results 2011 and 2012

The following bar chart summarises the numbers of dogs de-wormed, neutered and vaccinated during the two phases of the programme to date (Figure 8).

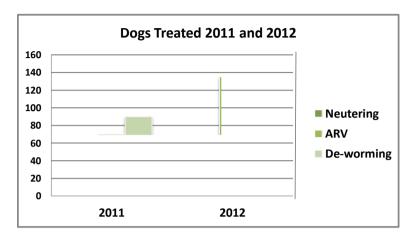


Figure 8. Dogs treated Phase 1 and 2

6. Discussion

6.1 Survey Results and Numbers Treated

Although the aim was to record information on all dogs in the four wards, there were shortcomings in the survey data such as overlapping data and missed houses. Therefore, the percentages based on the survey data must be considered as indicative, even though the data for the dogs actually treated at each of the three venues is accurate.

The number of requests for treatment during the survey was higher than the number of dogs that actually came in. This was hardly surprising, as some people forgot, were absent, or changed their minds. However, a few additional dogs were brought in for treatment.

The 74% coverage for vaccination against rabies is on target in relation to the WHO¹ recommendation of a 70% annual coverage of the dog population in each community to effectively control rabies.

And with 68% of the females spayed, it is clear that people are aware of the benefits of having their dogs spayed.

6.2 Community Participation

As this was the second round of the programme, there was understanding of its purpose and the procedures involved. This was particularly noticeable amongst the people in Payutar, Wards 8 and 9 who, in anticipation of the programme, were asking about having their dogs treated even before the survey and awareness campaign. The numbers brought in for treatment were pleasing, but there are results that go beyond the numbers (Box 5).

The participation of monks and nuns from the monasteries and staff from the Police Training Post was encouraging, and significant in terms of the number of dogs treated.

Box 5: Beyond the numbers

Indicators of improving awareness and responsibility

- People asking about treatment *before* the programme started
- Dogs brought in for de-worming *after* the programme finished
- People bringing dogs in with health concerns
- More requests for spaying
- Asking about next de-worming
- Local people visiting the shelter dogs

¹ WHO Expert Consultation on Rabies, 5-8 October 2004, TRS 931 WHO Geneva 2005

The venues took on the ambience of a village social event, people dressed up with dogs proudly in tow. And the display boards generated interest and conversation.

Depending on the household situation, nominal payment was requested for owned dogs. For some the fee was waived, others paid Rs 500 or Rs 1000 for operations, all paid Rs 100 for anti-rabies vaccination. The rationale being that by deciding on treatment and investing in their dog, people were exercising their responsibility for the dog's health and welfare, while also generating funds in support of the programme. In fact, many people actually expected to pay and understood that their contribution was helping the community dogs.

6.3 Activities

The household interview gave people the opportunity to consider whether they wanted their dogs treated or not. Some needed to consult with family members before giving their response.

The three phase structure of separate days for de-worming, spaying and vaccination worked well in this situation and served to spread the word around the community in advance of each activity.

As the programme area expands by progressively adding on wards each year, it will be necessary to replicate the activities in different locations for ease of community access.

A few male community dogs were not brought in for de-worming and vaccination. These will have to be followed up and treated *in situ*.

6.4 Organisation and Facilities

Issuing appointment slips in advance for two dogs every half hour, recorded on a whiteboard at the check-in, helped keep the operations on schedule, but also allowed for flexibility.

The local school students and volunteer community members were capable in managing the people, registering the dogs and completing record cards.

The clinic site was ideal with shade from surrounding trees from late morning onwards. Clearly set up registration and waiting areas worked well in controlling people and dogs, and isolating the surgery and recovery area. The clinic site was conveniently located close to the guest house and restaurant used by the HART Team.

6.5 How Important is Post Surgery Monitoring?

The number of dogs that received post surgery treatment, 10% of those under observation in the shelter and 44% of those returned directly, points to the need for rigorous monitoring and maintaining contact with the local people (Figure 6). While the weather at this time may have been a factor, the difference in recovery between in-shelter and returned dogs may also have been influenced by the returned dogs being free as usual, and over active. Some people were capable and committed, but it could not be assumed that all dogs would be reliably cared for. However, several did call to report problems and ask for help.

6.6 Future Role of the VDC

Looking ahead to 2013, the VDC Secretary and Engineer proposed that the VDC could take over responsibility for the anti-rabies vaccination part of the programme. De-worming could possibly be done at the same time, information on spaying distributed, and a record made of potential dogs for operation. Spaying operations would be done later at a separate venue.

7. Recommendations

- Enlisting the help of key people and school students in each ward, with support from the VDC, to carry out the survey and dog census would be more efficient in terms of local knowledge of the dogs and spreading information, and should be more accurate. Distribution of information and return of forms could also be done by local people at ward level.
- Involvement of the local health authority and health workers would increase public awareness
 by linking health initiatives for people and dogs, particularly to promote interest in anti-rabies
 vaccination.
- Anti-rabies vaccine should be made available through the government authority concerned.
- To reduce the risk of infection and healing problems, spaying should take place no later than April to avoid the onset of the hot season.
- As the programme area expands, the activities will have to be held in a number of locations.
- Compilation of a register of community dogs including location, health status, vaccination and spay record, with photos for identification.
- Record and details of owned dogs with owner contact information that could be the basis of a dog registration system.
- To encourage people to care for their dogs and de-worm them regularly, and in response to requests, de-wormer, tick/flea soap, powder and shampoo will be made available in Payutar at cost price.

8. Conclusion

The HART team and Community Dog Welfare were satisfied with the implementation of the second phase of the programme. It is evident that a programme based on community participation, is workable and effective in this semi-rural environment.

The 74% coverage for vaccination against rabies is in line with WHO recommendations. And with 68% of the females spayed, it is evident that people are aware of the benefits of having their dogs vaccinated and spayed.

If the VDC follows through with their proposal to take over responsibility for the anti-rabies vaccination, this will be a positive step towards local government involvement.

Above all, the success of the programme depended on the enthusiastic response of the local people who participated by bringing in both owned and community dogs for treatment. It is clear that the programme has contributed to improving community awareness and responsibility for dog welfare.

Acknowledgements

Community Dog Welfare Kopan would like to thank the Himalayan Animal Treatment Centre (HAT UK), HART, Lomus Acharya and Binod Poudyal of Kopan VDC, Dr S.P.Gautam and Dr Sushmita Gautam of the Kathmandu Veterinary Clinic, Dr Pant of the Rabies Vaccine Production Laboratory, Linda Sherpa, Barat and Val Krishna, Rewat Timilsina and Surendra Khatri and the student volunteers for their help and support. We also wish to thank Mukunda Budathoki, head teacher of Shree Yagyamati Secondary School, Payutar, for arranging the student volunteers and Shanker Budathoki for agreeing to the clinic being set up on his land.

We are grateful to Lama Khetsun of Kopan Gompa, Shomphen Lama of Ani Gompa and Basu Khatiwada, Head of the Police Training Post, for arranging to bring the community dogs from their locations.

Photos



Photo 1. Dog survey

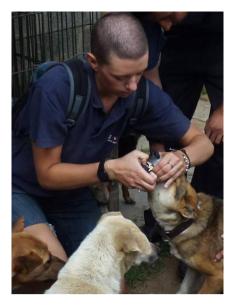


Photo 2. De-worming



Photo 3. Field Clinic site, Payutar



Photo 4. Community dogs come for spaying



Photo 5. Monks from Kusang Chowling Gompa bring Cowrie to be spayed



Photo 6. Health check for Patch

Photo 7. Lama Khetsun weighs in with Bear





Photos 8 and 9. Operations in progress





Photo 10. In the recovery tent



Photo 11. Leaving the recovery tent



Photo 12. Balu going home to Ani Gompa



Photo 13. Samsung and family leaving



Photo 14. VDC Secretary and Engineer talking with the HART team



Photo 15. The team with VDC officials and HICAST veterinary students



Photo 16. Community dogs recover in shelter



Photo 17. Police Post dog in recovery



Photos 18, 19, 20. Post operation monitoring and treatment











Photo 21. Healing problems one week after surgery



Photo 22. Dr Gautam vaccinates a Kopan dog



Photo 23. Vaccination by HART vet

Annex 1: Programme Plan

PREPARATION

1. Proposal Submitted to Authorities

- Kopan VDC
- Kathmandu Veterinary Council

2. Awareness Campaign 15 April onwards

- Information leaflets to households
- Posters at key locations VDC Office, school, shops

3. Household Dog Survey 22 April

- Household interviews by student volunteers
- Identification of dogs to be spayed & vaccinated
- Household dog count
- Programme schedule distributed to households

4. Focus Group Discussions 22 - 30 April

- Clusters of community dogs recorded
- Identification of dogs to be spayed

IMPLEMENTATION

De-worming 5 May

Medical examination & spaying
 13 - 16 May

• Post-op monitoring and treatment 17 – 23 May

Anti-rabies vaccination
 19 May

EVALUATION

A report will evaluate the effectiveness of the programme and make recommendations for future activities.

- Community response
- Statistical information
- Lessons learned
- Recommendations

Annex 2: Information Posters and Leaflets







Community Dog Welfare Programme

Payutar Kopan VDC April – May 2012

De-Worming - Population Management - Rabies Control









Community Dog Welfare Kopan

in collaboration with

Himalayan Animal Rescue Trust (HART)
Kathmandu Veterinary Clinic
Kopan VDC

Supported by

Himalayan Animal Treatment Centre (HAT) UK

Annex 2: Information Posters and Leaflets







स्वस्थ कुकुर कार्यक्रम पैयूँटार, कपन

जुकाको औषधि

के तपाईको कुकुरलाई जुकाको औषधि खुवाउनु भएको छ ?

नियमित जुकाको औषधि प्रयोग गरि कुकुरको स्वास्थ सुधार गरौं।

२३ बैशाख २०६९, शनिवार 5 May 2012 दिउँसो १:०० बजेदेखि

पोथी कुकुरको बन्ध्याकरण

के तपाईको कुकुरलाई स्थायी बन्ध्याकरण गर्नुभएको छ ?

आफ्नो ककरलाई स्वस्थ राख्न र अनावश्यक छाउरा छाउरी नजन्माउनको लागि स्थायी बन्ध्याकरण गर्नुहोस्।

२९, ३० र ३१ बैशाख २०६९, शुक्र, शनि र आईतवार 11, 12, 13 May 2012

रेबिजको सुई

के तपाईको कुकुरलाई सुई लगाउनु भएको छ ?

तपाई आफू, आफ्नो परिवारका साथै आफ्नो कुकुरलाई जोगाउनुहोस् ।

> ६ जेठ २०६९, शनिवार 19 May 2012 दिउँसो १:०० बजेदेखि

Tel.: 4820590, 9803976378

Community Dog Welfare Kopan

Kapan VDC



Himalayan Animal Rescue Trust

DOG WELFARE PROGRAMME IN PAYUTAR KOPAN

DE-WORMING

Improve your dog's health through regular de-worming

Saturday 5 May

From 1 pm onwards

SPAYING AND NEUTERING

Do you want a healthy dog and no more unwanted puppies?

> Friday 11 May Saturday 12 May Sunday 13 May

ANTI-RABIES VACCINATION

To protect yourself and your family vaccinate your dog against rabies

Saturday 19 May

From 1 pm onwards

Community Dog Welfare 9803976378 / 4820590

Annex 3: Wards 6 and 7 Kopan VDC



Annex 3: Wards 8 and 9 Kopan VDC



Annex 4: Household Interview

Household Interview

Head of housel	hold	Name:				Tel:	
House location	ı	No:			Ward:		
DOG INFORMA	TION						
Dog's Name	Type/Breed	Colour	M/F	Age	Spayed/ Neutered	Anti-Rabies Vac. (Date)	Other Vaccinatio
HOW DO YOU	KEEP YOUR DO	G					-
Do you keep y	our dog inside the	house or c	ompound	1?	•••••	•••••	
Do you keep y	our dog on a chai	n?			•••••	•••••	
Do you keep y	our dog in a cage	?			•••••	•••••	
_	roam free at any				•••••	•••••	
(OR do you take hi	m out on a	lead?		•••••	•••••	
YOUR DOG'S H	EALTH						7
Does your dog	have any health j	problems?			•••••	•••••	
Do you de-wor	rm your dog regul	arly?			•••••	•••••	
Has your dog	had puppies?					•••••	
How many litt	ers?				•••••	•••••	
How many pu	ppies in total?				•••••	•••••	
What happene	ed to the puppies?	(numbers)		Kept	•••••	•••••	
				Given a	way	•••••	
Do you want y	our dog to have p	unnies?		Died		••••••	
Do you want y	our dog to have p	арриса.			••••	••••••	
PROGRAMME T	TREATMENT						-
Do you want y	our dog to have d	e-worming	medicine	?	•••••	•••••	
Do you want t	o have your femal	e dog spaye	ed?		•••••	•••••	
Da 4 4	o have your male	daa mantan	. 10				İ

Annex 5: Focus Group Discussion

Community Dogs Focus Group Discussion

Name	M/F	Age	Colour	Other Information
Companionship Protecting homes, shop ntruders, thieves, wild Hunting pests Do these dogs co Fighting, disturbance, r Junhealthy dogs, diseas Breeding - too many do	animals ause proble noise e			
What happens to Faken into homes and of Left on the street	cared for ry and death	ies?		
Fraffic accidents – inju Disease – poor health, o	death			
		eeding season?		