

SOCIOECONOMIC INFORMATION AND HEALTH OF CAPTIVE ELEPHANT KEEPERS IN SRI LANKA

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There are approximately 186 domesticated, privately owned, elephants in Sri Lanka, who participate in cultural, religious and state functions. The present study was carried out in order to find out socio demographic data and general health status of present elephant keepers in Sri Lanka. A detailed pretested interviewer based questionnaire was administered to 98 elephant keepers who attended to Kandy Esela perehara season during the year 2010. Their general health status was examined simultaneously by mobile medical and dental clinic with special reference to diseases in the chest, liver, kidney and oral cavity in year 2010 and 2011. According to the data collected, 90 (91.8 %) of them were Sinhala Buddhists by birth and 50% (49) of them had studied only up to grade 5. All keepers were excellent in talking and understanding Sinhala language. Majority of elephant keepers(44) had taken the job as elephant keeper just because they had nothing else to do. A total of 59 keepers have learnt the trade on the job and not by former generations or by formal training. Eighty percent (80%) of elephant keepers knew diseases such as diarrhea and constipation and 63 % had experience in minor herbal medicines for these diseases. None of them were aware of immunoprophylaxis used in elephants even though Sri Lanka is endemic for diseases with zoonotic potential such as rabies. Approximately two third of the (76%) of the keepers interviewed consumed alcoholic liquor, 60% smoked cigarettes and 98% chewed beetle. Among those who attended to the health camp, 52% had musculoskeletal disorders, 21% had dermatitis and 8% had respiratory tract disorders. Out of 78 examined mahouts, one was diagnosed as tuberculosis positive. This is a substantially high rate compared to national tuberculosis incidence of 46 per 100000 in Sri Lankans in 1999 which is attributed to smoking as well. Most of the mahouts had missing teeth and two had oral sub mucosal fibrosis which was related to poor oral hygiene and betel chewing. Accordingly proper formal training on elephant management and habit intervention is essential in order to assure welfare in elephant keepers in order to sustaining the existing elephant population.