

FEEDING AND HEALTH CARE MANAGEMENT PRACTICES ADOPTED BY TRIBAL GOAT FARMERS IN SIROHI DISTRICT OF SOUTHERN RAJASTHAN

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(Received on Date: 24th February 2014

Date of Acceptance: 27th April 2014)

ABSTRACT

A field study was conducted to collect the first hand information on goat management practices followed by tribal goat farmers. Existing feeding and health care management practices were studied through predesigned and pretested questionnaire from 100 tribal goat animal owners. The study revealed that Animals were mostly grazed in mixed grazing on community land/public range land for about 4-8 h in a day. The concentrate was offered to lactating does only @200-250g/head/day. They were not supplemented with concentrate mixture during critical stages of growth and advance pregnancy. Adoption of over all scientific feeding and vaccination program me was satisfactory but practices like to control ecto and endo-parasite, naval cord disinfection was poor and needs to improve a lot.

Keywords: *Feeding practices, Grazing Health Care Practices, Tribal*

No of Tables: 2

No of References: 11

INTRODUCTION

India is one among the few nations in the world for its tribal population. In Rajasthan tribal population is 12 percent of the state population, more than 45% resides in southern Rajasthan covering the Aravali ranges which run through the south west boarder of the state. Understanding the livestock management practices followed by farmers in necessary to identity the strengths and weakness of the rearing systems and to formulate suitable intervention polices (Gupta etal .2008). Hence, the present study was under taken to document information regarding feeding and health care management practices followed by the tribal farmers in Sirohi district for providing help in adoption of scientific management practices in the area.

MATERIAL AND METHODS

The study uses primary data collected from 100 goat breeders belonging to 10 villages of Pindwara and Abu-Road blocks of Sirohi district of southern Rajasthan. The respondents, village were selected purposively as they were selected on the basis of maximum number of tribal and goat population to be covered under the Transfer of Technology Program me of KrishiVigyan Kendra, Sirohi. The information was received from respondents through questionnaires. The farmers were interviewed personally for collecting information on current status of feeding and health care practices.

RESULT AND DISCUSSION

Information pertaining to feeding and health care management practices being followed by goat-owner in Sirohi District of Rajasthan has been discussed in

following sub heads.

FEEDING MANAGEMENT**PRACTICES:**

Table 1 shows that 55% goat keepers adopted the extensive grazing system and allowed their goats to graze on community land. These findings were in agreement with report of Raghvan and Hari Kumar (2002) and Rai and Singh (2004). More than three – fourth goat farmers allowed grazing to their goats during light for more than 4hr. Similar findings were also observed by kumar and Deoghare (2003). The goats of the area were mostly maintained under field grazing and majority of goat farmers (72%) did not feed green fodder to goats (Table 1). It was found that majority of goat rearers (70%) provided concentrate mixture only to the lactating does. Similar results regarding feeding practices were reported by Rai and Singh (2004). Over 71% of goat farmers prepared home grown concentrate for feeding to goats which comprised of Barley, Maize and wheat as such or in the form of gruel plus some salt. Singh and Singh (1998) also reported that majority of goat keepers used home prepared concentrate as compared to purchased feed. Mineral mixture was not provided to goats by 85% goat keepers. Singh et. al. (2002) observed that very few respondents were feeding mineral mixture to their animals. The reason for low adoption of mineral mixture feeding was lack of knowledge about its use.

HEALTH CARE PRACTICES:

Regular vaccination was practiced by 79% respondents for their animals against entro toxemia, while 21% of respondents did not follow vaccination practices (Table-2).

The present findings was on higher side to that reported by singh et.al. (2007) and kalyankar et.al (2008). This is suggestive of fairly high level of awareness in Farmers regarding protecting their animals by vaccination. it is observed that very few respondents (25%) practiced deworming to their animals at regular intervals. This finding is comparable with finding of pawaret. al (2006). All the goat farmer did not practice navel cutting and it was left to fall off itself naturally. The similar findings were reported by Kokate and Tyagi (1991). More and more concentrate efforts are required to motivate farmers to follow this practice. Only 10% respondents followed dehorning practice (hot iron method) and 90% respondents did not follow it. This finding is in accordance with the finding of kokate and Tyagi(1991). Majority of goat farmers (80%) did not follow any practice to control ecto- parasite however, some farmers adopted traditional practices- like smoke of neem leaves to prevent mosquitoes. This practice needs attention to create awareness in goat farmers covered under present study. Only 20% of the respondents acquired the services of a qualified veterinarian for treatment. Similar findings were also reported by malik et.al.(2005) This may be due to the non-availability of a qualified veterinarian.

Most of the goat-keepers of the study area used local therapy for the treatment to their goats.

Our study indicated that adoption of overall scientific practices was quite satisfactory. Adoption of regular vaccination against ET was good but very poor in other health care practices like regular deworming. Hence, these practices need to be improved to a great extent in this tribal area.

CONCLUSION:

It is concluded that the extent of adoption of feeding and health care management practices followed by goat farmers quite satisfactory. Adoption of over all scientific feeding practices and vaccination programme was good but practices like measures to control ecto and endo parasite, navel cord disinfection, mineral mixture feeding and concentrate mixture feeding to kids and pregnant does was poor and needs to improve a lot. Hence, these practices need to be improved to a greater extent in this tribal area. Further, the results indicate need of extension activities for spreading improved management practices, institutional intervention for conservation of the common grazing land and improving the veterinary services to enhance the productivity of goats.

Table 1: Feeding management practices adopted by tribal goat farmers of Sirohi district (N=100).

S.No.	Particulars	Frequently	Percent
1	Grazing System		
	Extensive	55	55
	Semi intensive	45	45
2	Grazing Site		
	own land	25	25
	community land	75	75
3	Grazing Duration		
	0-4 hours	30	30
	4-8 hours	70	70
4	Green fodder feeding		
	Yes	28	28
	No	72	72
5	Concentrate feeding		
	A. For Kid		
	Yes	40	40
	No	60	60
	B. Special feeding for lactating does		
	Yes	70	70
	No	30	30
	C. Special feeding during pregnancy		
	Yes	20	20
No	80	80	
6	Type of concentrate		
	Homemade	71	71
	purchased	29	29
7	Feeding of mineral mixture		
	Yes	85	85
	No	15	15

Table 2: Health care managerial practices adopted by tribal farmers of Sirohidistrict (N=100).

S.No.	Particulars	Frequently	Percent
1	Vaccination of animals		
	Yes	79	79
	No	21	21
2	Deworming of animals		
	Regular	25	25
	Occasional	70	70
	Not practiced	5	5
3	Navel disinfection of kid after birth followed		
	Yes	0	0
	No	100	100
4	Dehorning of kids followed		
	Yes	10	10
	No	90	90
5	Practice to control ecto – parasites		
	followed	20	20
	Not followed	80	80
6	Sanitary condition of shelter/standing place		
	clean (Dry)	20	20
	Dirty (wet)	80	80
7	Treatment of sick animals		
	use of local empirical knowledge	60	60
	calling a quack	0	0
	livestock inspector	20	20
	veterinary doctor	20	20

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