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MEDIA RELEASE

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Visiting vets help Council share remote animal health message

It is a scene more commonly associated with a school fundraiser or sporting carnival, but a production line buttering bread is one element of an innovative strategy that is improving animal health outcomes in remote communities across the Roper Gulf region.

The novel approach is part of Roper Gulf Regional Council's new Animal Health Program, which was rolled out in late 2016 under the guidance of in-house veterinarian Dr Sam Phelan.

Previously, the Council engaged a private veterinary service to carry out biannual community visits within its 186,000 square kilometre Local Government Area, but the switch to the new format is already paying dividends on several fronts, including owner education and local employment.

As part of the program, Dr Phelan is training Animal Management Assistants (AMA) who can assist her during remote visits, and also provide local support and treatments when communities are cut off during the wet season.

"Because I don't have a vet nurse working with me like you would in a traditional vet practice, this program opens up the door for Indigenous employment in communities," she explained.

"The community feedback has been really good, because having an AMA available to each community during the wet means there will be someone there to treat animals for tick burden when that water comes up, which will create better outcomes for animals and owners."

The success of the program was on show in Barunga, Beswick and Bulman earlier this month when Dr Phelan was joined on the road for five days by AMA Kaylene Runyu, and two vet volunteers, who travelled to the Northern Territory through the Council's partnership with not-for-profit group Animal Management in Rural and Remote Indigenous Communities (AMRRIC).

Using buttered bread soaked with a parasite medication is being utilised as the preferred treatment method by Dr Phelan, who said that it let the team cover the dog population a lot faster than if an invasive treatment technique was used.

She added that having the vet volunteers available to lend their expertise meant more of a focus could be put on educating owners about their obligations to their pets.

"We're finding a lot of the desexing has already been done by the vets who were previously contracted to do the program, which frees up time for education, and that's the next phase," Dr Phelan said.

"Part of that education is getting a photo, medical record and history of each dog in a community and putting it into the Council's database, which is an iPad-compatible app donated by AMRRIC.

"It's helping to build familiarity between me, the animals and their owners, and that helps a lot with improving dog health and identifying problem dogs.

"Council is committed to improving the health of animals in remote communities, and the comments we are getting from owners during our visits so far suggest the new Animal Health Program is on the right path to achieving that."

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