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BVA Overseas Travel Grant Report

Ethiopia – 2009

Mastitis in Borana livestock: role of women in transmission & prevention

The travel grant I was awarded by the BVA was used to work with Save the Children USA's Pastoralist Livelihoods Unit in Ethiopia. The aim of my trip was for me to conduct a research project on ticks and mastitis. Ticks are a major problem in the Borana region of Ethiopia, abrading the teats and causing mastitis. This results in a significant drop in milk yield and quality which can be life threatening to both the cow (lack of available veterinary care means that the infection can progress to be systemic) and the owners (they are entirely dependent on their livestock for survival and milk is their major source of nutrition).

This was not however, how my trip turned out to be! To my benefit I was exposed to a much wider range of issues linking the veterinary profession to development. On my first day I was thrown in at the deep end and sent off to the FAO in Addis Ababa to participate in the writing of the National Minimum Standards and Guidelines on CAHWs (Community Based Animal Health Workers). The group working on the piece of legislation was composed solely of veterinarians- however all associated with different institutions; the FAO, the Ethiopian government, independent consultants, and NGOs (CARE and SC US). CAHWs are 'paraveterinary professionals' trained up by the government in conjunction with NGOs such as SC US and CARE. They play a critical role in filling large gaps in the veterinary provision in pastoral areas of southern Ethiopia. The Community-based Animal Health System was pioneered by NGOs in eastern Africa over 20 years ago. Until recently these CAHWs were considered as illegal professionals as they were not recognized legally. Now that they are legally recognized, the Ethiopian government wants to set out minimum standards and guidelines to standardise CAHWs training and their capacities/duties. Furthermore the legislation focuses highly on the sustainability of the system. NGOs were involved in the writing of this Guideline as having pioneered the system they have considerable working knowledge on the topic and could contribute constructively from their wide experience to the legislation. There was already a preliminary draft- my job was to edit the document and to incorporate everybody's comments (and often mediate an agreement), and as an English speaker to improve its fluency. This gave me a comprehensive understanding on Community Based Animal Healthcare- essential for my later work. Furthermore I gained from the many debates and differences in opinion of the different stakeholders (government/NGOs) an understanding of the complexity of the issue.

After an intense first few days working on this document, I left to Negelle in Borana (Southern Ethiopia) with an Ethiopian vet to conduct field work. Together we

undertook a participatory impact assessment (PIA) on the CAH (Community-based animal health) system in the Borana region. Our aim was to look at not only the positive impact of CAHWs but also the challenges to the CAH system, how it can be improved and most importantly how its sustainability can be ensured. We conducted interviews with CAHWs, communities with and without the CAH system, government officials and private pharmacies. This experience was extremely educational and also challenging as we sought to bring the information together and present recommendations for the CAH system. We produced a 33 page report based on the impact assessment; below I highlight some of the areas of interest as there is not space here for me to explain in depth our results.

Firstly I learnt the complexity in conducting an impact assessment- different stakeholders have different views. What is the truth? There were many conflicting stories with gender differences, between villages, and between the government's opinion and the pastoralists. All the information must be taken into consideration but accepting its subjectivity. This made the processing of the information analysis rather challenging. Furthermore it can be difficult to make the assessment fully participatory- particularly within communities, where elders, especially male may be over represented and certain groups, women in particular may not vocally express their opinions.

Our results confirmed the importance of the CAH system. In many communities they previously had no health care at all- or the other option was to walk to Negelle- which could be up to 90km away from their homestead in order to buy a drug from a pharmacist. Firstly in the time taken to walk there and back the animal could have died, secondly the drug was sold without clinical examination thus its accuracy in treatment is not certain, thirdly it was not a professional administering the drug- pastoralists could over-under dose. A particularly important role of the CAHWs had been in vaccination schemes. These had previously occurred but the government did not have enough man power to vaccinate the high numbers of livestock owned- by recruiting CAHWs into their vaccination schemes- a wider population can be targeted significantly decreasing disease.

Following on from the positive impact of the system our report focussed on the main challenges to the sustainability of the CAH system. There were multiple challenges to sustainability of which I will address the most important here. Drug supply was a particular problem- state drugs are cheaper (so CAHWs would not buy their supplies from private pharmacies) but their provision was less reliable. Illegal drugs from Kenya and Somalia were a real threat to the system and challenge to herd and human health. For example due to a lack of public health knowledge- a community had administered illegal drugs which had killed an animal, they subsequently ate the fallen stock and became ill, some of them died. This highlights the importance not only of ensuring a legal quality drug supply but also, and perhaps more importantly, the importance of knowledge dissemination. CAHWs can be very valuable at sharing their knowledge and educating their communities.

The sustainability of the CAH system requires trained CAHWs to remain active- however a great challenge to this was a lack intrinsic personal benefits to the CAHWs to motivate them. Indeed great benefits were perceived community wide, but for the longevity of the system CAHWs themselves need to perceive direct benefits. CAHWs dedicate a considerable amount of time to their profession but get very little in return. Their time given is important in part due to the distances covered to treat animals-up to 30km by foot, this time commitment means time away from their own herd and household and thus a decrease in their own household security. In theory the CAHWs are paid in exchange for their services- the prices are fixed by the

community elders. However there are challenges in making the CAH system economically profitable for CAHWs, firstly because the prices fixed by the community may be too low for the time invested, furthermore the prices are not renewed to follow with marked inflation. Also the concept of market exchange in pastoralist communities is not fully grasped- people expect the services of CAHWs for free as they are in the same community; or due to a lack of communication they believe that the CAHWs are employed by NGOs and therefore expect their services for free. Thus they are either not paid, or their remuneration is too low to compensate for the time spent away from their homestead. A solution to this would be either to provide transport to decrease travel time (this would have a twofold effect of decreasing time away from the homestead but it would also make them less tired from the arduous distances covered). This however has its own downsides- there are questions of who should provide the transport –NGOs, government, or communities, and who should maintain it. Provision of transport from an external provider is not conducive to establishing sustainability- which requires independence from NGOs after establishment of the CAH system. The second solution is to train more CAHWs so that each CAHW covers a smaller distance and treats less animals thus decreasing the time away from their homestead. This second solution seems more applicable as it also responds to two other challenges faced by the CAH system. Firstly, all communities complained that there are not enough CAHWs to meet their demand. There is such a severe lack in animal health services that training 1 or 2 CAHWs per pastoralist association is not sufficient. Secondly, many benefits were attributed towards training female CAHWs; however a main challenge women faced, was covering such long distances. Also it was not considered safe for women to travel long distances at night to treat animals. Thus by training more CAHWs which consequently decreases their coverage zone, more women can be trained.

Gender differences were a prevalent issue throughout the whole impact assessment. Firstly gender differences became apparent in response to the previous issue of the economic benefits of being a CAHW. All male CAHWs interviewed stated that the income gained was not sufficient and barely covered costs- thus they were only completing their job out of duty for their community. However when female CAHWs were interviewed the response was quite different. Also it was noticeable that female CAHWs were more active in their profession than male CAHWs. For example, a 22 year old CAHW I interviewed who was mother of 4 (of which 2 had been born whilst she was working) and had been working as a CAHW for two years stated that the benefits were substantial. Within the two years of working, she had saved enough money to buy a cow and two goats. Furthermore, through her knowledge her husband was proud of her and she felt she had gained more respect from him. Thus as a women she not only perceived a financial benefit, but independence through her private income and her improved knowledge and skills base gaining her respect from her husband. Thus such training is closely linked with women's rights. This was also noted in that in communities where there was a lower level of paraveterinary health care- women working as 'Tick and Mastitis Control Workers' the communities chose women to be trained as CAHWs as they had seen that they were competent with their work with animals. However in communities where there were no Tick and Mastitis Control Workers, they only chose men to be trained. Thus giving women this initial training helped boost their credibility within their community and confer them further responsibilities and opportunities within the community. The gender difference was also notable in that all communities including men only groups stated that women were better at handling money- perhaps why the female CAHWs stated that there was a financial benefit to their job but the men perceived none. Other benefits perceived to be associated with women, were that they were closer to animals so had better knowledge, also that they are better at

sharing knowledge and thus increasing the whole community's knowledge on animal health issues.

Above are just a few examples of the report. As you can see, it covers many topics from the economics to ensure sustainability to gender issues. I found this highly interesting. In particular the gender issues, as it showed me how wide the range of impact veterinary medicine can have. Not only does it enable improved productivity so as to ensure food security and also development- but also it can improve women's status within communities as it offers them an independent income and status associated with their skills and knowledge. It is something that cannot be retracted from them. I had never before linked veterinary medicine with women's rights!

Finally, as part of my internship I wrote two papers. They were based on information previously collected by SC US on emergency interventions centred around livestock in response to drought, and my own literature search. The papers focused on the new livelihoods approach to emergency response. The concept is that in response to a drought, people's lives are best protected by protecting their livelihoods as opposed to just their lives by providing them with food aid. For pastoralists protecting their livelihood implies protecting their livestock- in particular a core breeding herd from which to restock after the drought. There are multiple approaches to this, which can be used in combination, in response to different conditions and different stages of the drought cycle. These include, feed supplementation, water supplementation, commercial destocking, slaughter destocking and veterinary provision. I wrote one paper focussing on feed supplementation and another on slaughter destocking- both concentrated on case studies of SC US implemented programs in Ethiopia. Writing these papers was both educational but also a challenge that I relished. As a veterinary student- much of our course is focussed on learning facts, especially in the first few years. I really enjoyed the intellectual stimulation of reading multiple documents, analysing data and coming up with my own arguments and backing them up in my paper. I am told that SC US will get them peer reviewed and try to get them published. Whether or not this happens- I definitely enjoyed writing them, and I think that was a sufficient enough reward!

In conclusion, my internship this summer exposed to me the many opportunities available with a veterinary degree- in particular in the development area. Many communities in developing countries are dependent on agriculture, hence veterinary science is key in contributing to improving agriculture and thus development. This is even more so important in pastoralist communities where they are entirely dependent on livestock. It became apparent that development requires a multidisciplinary approach focussing on human and animal health, economics and women's rights among many other topics. All these areas interrelate and influence each other. I was in particular struck by the use of dissemination of veterinary knowledge as a tool for promoting female rights. This experience has been extremely valuable and I hope to pursue my interest in this area- either through working in research, focussing on pastoralism, or by working in development.