From the community, for the community

Animal-health workers who have some systematic training, but no academic degrees, make a huge difference in remote areas and strife-torn regions. Ethiopia is setting an example by involving them in its veterinary-services extension efforts. On this basis, a German NGO is running innovative projects in support of poor pastoralists.

By Genene Regassa, Esmael Tessema, Nicoletta Buono and Cornelia Heine

Para-veterinary professionals deliver important services in Africa, especially in arid and semi-arid regions. It is well documented that rural communities benefit from animal-health workers who, though they have no university degree, have had some kind of systematic training. Training courses vary from a few weeks to three years or more. A subgroup of the veterinary paramedics are community-based animal-health workers (CAHWs). They are community members who have received basic, non-formal training in animal-health care. They engage in the prevention and treatment of animal diseases. Prevention basically means vaccination in this context. CAHWs have played an important role in extending veterinary services particularly in East Africa, as well as in countries like Bolivia, Nepal and Sri Lanka.

In the Horn of Africa, CAHWs were first trained in the 1980s. Training programmes have since been scaled up in response to livestock owners’ growing demand for their services. Government policies played a role too, reflecting a general shift towards community-based approaches in development affairs.

At first, scepticism was the general response to training community members to deliver basic animal-health services in underserved, remote and conflict-torn areas. That changed in view of the CAHWs’ substantial achievements. They are especially important in places where no other veterinary services are available. Formally-trained experts hardly work in Africa’s most remote regions and war zones. The CAHW approach has therefore been increasingly appreciated and supported. Unfortunately, that is not so everywhere. Kenya, for instance, does not recognise CAHWs as relevant agents of animal-health service.

An important success that CAHWs contributed to was the eradication of rinderpest, which is also called cattle plague or steppe murrain. This disease had devastating impacts on the cattle business all over the world. For decades, attempts were made to eradicate it, but rinderpest hotspots endured in the Horn of Africa.

Things only improved once CAHWs became involved in the eradication drive in Ethiopia, Somalia and South Sudan. The CAHWs carried out several rounds of vaccination. Somalia was the last country to become free of rinderpest, and in 2010, rinderpest was officially declared to be eradicated.

Since the 1990s, CAHWs in Eastern Africa have been supported by VSF Germany, a non-governmental organisation. VSF stands for Vétérinaires sans Frontières (veterinarians without borders). VSF Germany scaled up its CAHW programme during the rinderpest-eradication campaign. Currently, they are cooperating with CAHWs in several east African countries.

**Ethiopian achievements**

VSF Germany is running animal-health projects in Ethiopia, where drought has become a defining feature of life for lowland communities. The impacts include the loss of productive assets and worsening food insecurity. Food insecurity is a challenge in several Ethiopian states.

In Afar, for example, pastoralists’ livestock population is in decline. As rainfall has become more erratic, productivity is suffering. Land degradation, the invasion of Prosopis juliflora (a kind of bush-weed) and the fast growth of the human population add to the problems. Compounding matters, pastoralists lack access to markets and are increasingly denied access to land that is now used for farming. In this region, VSF Germany is implementing various livelihood projects in a number of districts, which are called woredas in Ethiopia.

The Ethiopian veterinary service has a long history of supporting CAHWs. In 2002, CAHWs were officially recognised as relevant service providers. The government has set up a unit for CAHWs in the Ministry of Agriculture and Rural Development. It has also defined minimum standards and guidelines for CAHW projects. CAHWs are being trained systematically and there is a training-of-trainers system. In this context, VSF Germany has set up an innovative voucher scheme in support of CAHWs in eight woredas (see box next page). We want to increase the sustainability of veterinary services especially in remote pastoral areas of Afar.

**Relevant progress**

In the past decade, important progress has been made in the institutionalisation of CAHWs. It makes sense to regulate and standardise the CAHW programme as Ethiopia is doing. Similar attempts have been made in South Sudan and Somalia, and they make the work of VSF Germany more effective and sustainable.

It is unfortunate that not all countries appreciate the role of CAHWs. Kenya, for example, passed legislation to regulate the animal-health sector in 2011 without recognising any role for CAHWs. VSF Germany is active in Kenya too, but in the lack of an appropriate legal framework, it is extremely challenging to provide sustainable, affordable and accessible animal-health services to poor pastoralist communities there.

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**“Community-based animal-health workers contributed to the eradication of rinderpest.”**

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In Ethiopia’s Afar region, one serious challenge is that community-based animal-health workers (CAHWs) often do not have the drugs they need. Moreover, it would make sense for them to do more refresher courses. Generally speaking, there is a lack of supervision of CAHWs.

Considering these challenges, a voucher system was developed. It helps to get animals treated in time before a drought occurs and is designed to fit the needs of vulnerable members of rural communities. To reach out to them, the system relies on other community members, non-governmental organisations, government agencies as well as on CAHWs and the vendors of veterinary drugs.

To manage the scheme, emergency animal-health intervention committees have been established. They include community elders, local authorities and key stakeholders. The committees select the vulnerable households that benefit from the programme. The households are given vouchers worth the equivalent of about €15, thus allowing them to pay for services provided by CAHWs.

The CAHWs have all been trained according to the national guidelines. VSF Germany makes sure they take refresher courses and trains them in how the voucher scheme works. CAHWs are helped to buy an initial bulk of common veterinary drugs from a private-sector veterinary pharmacy which is cooperating with VSF Germany. They use the drugs to treat vulnerable households’ herds and are paid with vouchers, which they can cash in at the pharmacy. About 20% of the money covers the CAHWs’ service, and 80% is the cost for the medication.

To get the system started, several things need to be done:

- The system is initially planned in cooperation with woreda (district) officials and people from the beneficiary communities.
- On this basis, the kebeles (wards) for intervention are chosen.
- A memorandum of understanding is agreed between VSF Germany and a local veterinary pharmacy, spelling out the quantity, quality and type of drugs needed.
- An animal-health committee is established which selects beneficiaries in a participatory process.
- CAHWs who have been trained according to the national guideline and standard are invited to refresher courses and are informed about the voucher system.
- The selected households are made aware of the animal-health services and their relevance.
- The households get vouchers to pay for services they require.
- VSF Germany monitors the programme and supervises CAHWs in collaboration with a government veterinarian.

Once everything is in place, poor households are in a position to buy services they could previously not afford.

In some very remote woredas, VSF Germany is taking the same approach even though there is no local private pharmacy. In those places, the woreda administration steps in to fulfil the pharmacy’s tasks. In general, however, it has proven better to cooperate with private veterinary pharmacies because doing so is less cumbersome and more sustainable, as a local pharmacy, once established, will continue to provide drugs for herders.

Since 2012, VSF Germany has trained and engaged 126 CAHWs, who have treated almost 800,000 animals in the Afar region, relying on the voucher scheme. Funding was provided by the UN Office for the Coordination of Humanitarian Affairs (UNOCHA) and the EU Humanitarian Aid and Civil Protection department (ECHO). The system is improving the livelihoods of poor households and supporting their resilience. (gr/et/nb/ch)