

ANIMAL HEALTH IN KENYA

Literature collected for the [Animal Health in Kenya Case Study](#)
of the Bridging Research and Policy Project

Angniman, P.A. (1997) Privatization of Veterinary Services within the Context of Structural Adjustment in Mali, Cameroon and Chad.

This survey analyses information on privatization of veterinary services arising from a detailed questionnaire and associated discussions with Directors of Veterinary Services, government veterinarians, veterinarians in private practice, veterinary technicians, wholesalers of veterinary drugs, representatives of producers' organizations and other bodies, and others involved with delivery of animal health care in Mali, in Cameroon and Chad. The number of interviews carried out are 23, 22 and 22 in Mali, Cameroon and Chad respectively. This resource can be found at: <http://www.fao.org/WAICENT/FAOINFO/AGRICULT/AGA/AGAH/Vets-I/g150.htm>

Ashley, S.D., Holden, S.J., and Bazeley, P.B.S. (1995) Livestock in Development: The Changing Role of Veterinary Services. CAPE, OAU.

This paper reports the results of a survey of Chief Veterinary Officers' (CVOs) opinions carried at the OIE General Session in May 1995. This resource can be found at: <http://www.eldis.org/fulltext/OIereport.pdf>. Last accessed 4/14/2009

Catley, A. (2002) Towards Poverty-focused Policies, Legislation and Institutions for Animal Health Service Delivery in Africa. CAPE, OAU.

This paper reviews the rationale for encouraging livestock institutions to focus more clearly on the needs and aspirations of poor people as a central facet of poverty alleviation. This requires institutions to realign current ways of working to ensure that communities are actively involved in the reform of policies and legislation which affect their lives and livestock. This resource can be found at: http://www.eldis.org/fulltext/cape_new/Catley_poverty_focus_French.pdf

Catley, A. (1996) Pastoralists, Paravets and Privatisation: Experiences in the Sanaag Region of Somaliland. ODI Pastoral Development Network Paper 39d.

This paper describes some of the work of the ACTIONAID/VETAID Animal Health Programme (AHP) in Sanaag between 1992 and 1994. The paper focuses on the design of a paravet system. It describes how an evaluation of the AHP led to plans to establish private veterinary pharmacies and encourage links between these pharmacies and paravets. Issues related to the 'privatisation' of primary veterinary services for pastoralists in Sanaag and elsewhere in the Horn of Africa are discussed. This resource can be found at: <http://www.odi.org.uk/pdn/papers/39d.pdf>. Last accessed 4/14/2009

Catley, A., Blakeway, S. and Leyland, T. (2002) Community-based Animal Health Care: A Practical Guide to Improving Primary Veterinary Services. ITDG Publishing.

Community based approaches to improving animal health have been evolving for many years. Numerous organisations and institutions, including government veterinary services, are now beginning to implement community-based animal health projects in order to provide basic veterinary services in rural areas. However, both governmental and non-governmental organisations can lack experience of community-based animal health systems and, to date, there are few publications available to guide them.

Catley, A., Delaney, P. and McCauley, H. (1998) Community-based Animal Health Services in the Greater Horn of Africa: An Assessment. CAPE, OAU.

What factors contributed to the success of 'community-based animal health worker' programs in Kenya, southern Sudan and Ethiopia? This resource can be found at: <http://www.eldis.org/fulltext/capegreater.pdf>

Daborn, C., Njau, P., Wood, S. and Martin, M. (eds) (2002) Delivery of Animal Health Services in Eastern Africa: Proceedings of a 1998 Workshop. Vetaid.

This document contains the findings of a VetAid conference in late 1998. This resource can be found at: http://www.gdnet.org/cms.php?id=research_paper_abstract&research_paper_id=3425. Last accessed 4/14/2009

de Haan, C. and Bekure, S. (1991) Animal Health Services in Sub-Saharan Africa: Initial Experiences with Alternative Approaches. World Bank.

This paper outlines the types of reforms introduced in animal health services over the past decade in Sub-Saharan Africa, summarizes past experiences, provides a preliminary assessment of their impact, and indicates what lessons need to be taken into account in future policy adjustments and project investments. The discussion concentrates on World Bank-supported initiatives, because of the easier accessibility of the data to the authors. This resource can be found at: <http://www.fao.org/Wairdocs/ILRI/x5518E/x5518E00.htm>. Last accessed 4/14/2009

DFID East Africa (2002) Project Completion Review of DFID-funded DAH/EVK Project Phase 1, April 1999–March 2002. Matrix Consultants, Nairobi for DFID East Africa. Nairobi, Kenya: Matrix Consultants/DFID East Africa.

This is the report of an end of project output to purpose evaluation of the EVK/DAH project. Output 1 of the project was: DAH and EVK concepts and approach supported by senior policy makers and development agencies. The evaluation felt that this Output had been largely achieved. The report states: 'Most of the key stakeholders in the dialogue on DAH may recognise and acknowledge the importance of DAH and CAHWs, but the details and degree of this support is varied. Some stakeholders support the concept and approach, but feel it is only a stop-gap service provision solution, not a long-term solution to animal health care. Others support it, but only in ASAL areas. Even though there is an acceptance of DAH, many strongly disagree with the details of the draft bill on DAH thus actual legislation could be elusive.'

DVS (2000) Report of the Strategic Workshop of Stakeholders on the Review of Policy and Laws Relating to Delivery of Veterinary Services and the Management of Animal Health Products and Marketing, held at Roswam Hotel, Kerugoya, Kirinyaga District 30th July–5th Augu Nairobi, Kenya: DVS.

A report of the first government-organised workshop to review the policy and legislation governing animal health provision. Key recommendations included (p40) 'The Department of Veterinar Services shall promote collaboration with all key players in the delivery of veterinary services in ASAL areas for the purpose of developing a private, veterinary-supervised animal health delivey system, including those that are community-based'.

DVS (2002) Official Opening Speech of Dr William K.T. Chong, Director of Veterinary Services for the 10th DAH workshop, held at Lake Bogoria Hotel, 8th–11th September 2002, DVS, Nairobi. Nairobi, Kenya: DVS.

In his opening speech for the 10th DAH workshop the DVS said 'The DVS supports an arrangement that can result in the attainment of permanent solutions to the problems prevailing in ASAL areas. In as much as training and utilisation of CAHWs is useful at least for the time being this should be seen as a stopgap measure and we must focus far ahead' and 'the veterinary department accepts the suggestion given by some pastoral communities that more CAHWs secondary school leavers from ASAL are trained at AHITs. This accepted cadre would return to their respective rural areas to provide quality services including opening agro-vet shops and ultimately phase out the CAHWs.'

DVS (1999) Animal Health Providers Workshop North Eastern and Eastern Kenya, Garissa, 28th November–1st December 1999. Department of Vet Services, Ministry of Agriculture and Rural Development, Nairobi, Kenya. DVS.

A report of one of the regional follow-up workshops after the 1999 Meru Workshop. The workshop recommended that CAHW systems should be continued, a common approach and syllabus should be developed, they should incorporate existing vets and AHAs in the area and that the training should be done by Vets. The KVB were asked to recognise other cadres of animal health service providers, should define the roles of each, standardise curricula and continue to regulate the profession.

DVS (2000) Memorandum of Understanding (with SNV for delivering livestock services in Northern Kenya). DVS.

An MoU describing the continuation and expansion of a pilot trial of community-based animal health programme which started in 1997 as a collaboration between the DVS, PARC-VAC and the EU. The second phase was to be implemented by SNV, VSF(Belgium) and OAU/IBAR.

FAO (1997) An Electronic Conference on Principles for Rational Delivery of Public and Private Veterinary Services. FAO.

The electronic conference provides a wide range of views on the topic. The overview paper (David Ward and Andrew Speedy) in particular provides a good context of the main issues and a useful framework for 'rationalizing delivery of veterinary services.'

Hubl, Dr K., Gathuma, Prof J.M. and Kajume, Dr J.K. (1998) Improved Delivery of Animal Health Services in Kenya, Volume 1. Nairobi, Kenya: Ministry of Agriculture and Rural Development.

IFAD (1993) Animal Health Services Rehabilitation Programme – Kenya. IFAD.

The principal aim of the programme was to evolve a viable and sustainable institutional setting in a bid to enhance the delivery of animal health services and to rehabilitate existing health facilities in Kenya. This resource can be found at: http://www.ifad.org/lrkm/region/pf/ke_188.htm. Last accessed 4/14/2009

Ilemobade, A.A. (1997) Privatization of Veterinary Services within the Context of Structural Adjustment in Zimbabwe, Namibia and Ghana.

This survey analyses information on privatization of veterinary services arising from a detailed questionnaire and associated discussions with Directors of Veterinary Services, government veterinarians, veterinarians in private practice, representatives of producers' organisations and other bodies, and others involved with delivery of animal health, during visits to Zimbabwe, Namibia and Ghana. Contrary to expectations privatization of the veterinary services had not yet been initiated in any of the three countries and therefore those questions (27) dealing with the implementation and outcome of privatization could not be answered. However, a certain level of cost recovery was being practiced by the three governments. The number of questionnaires/interviews carried out are 7, 10, and 6 in Zimbabwe, Namibia and Ghana respectively.

ITDG (1993) Vets Workshop, Hunters Lodge, Ukambani, April 1993. ITDG, Nairobi, Kenya. Nairobi, Kenya: ITDG.

The third ITDG vets workshop included 14 government vets (out of 32 participants) including District Veterinary Officers, the Provincial Veterinary Officer for Eastern province and representatives from the KVA the National Veterinary Research Laboratory and the Vet School in Nairobi. Dr Kajume (PVO

Eastern Province) described the DVS privatisation policy and said 'Paravets or Wasaidizi' have definitely a role to play in pastoral areas. Dr Kariuki (NVRL) said that the departments approach to privatisation would be to focus on the control of contagious disease rather than on provision of drugs or clinical services and that livestock farmers already know what their problems are and that the Department should engage with them in bottom-up planning, then decide how to help them

ITDG (1994) 4th Annual Vets Workshop, Isiolo, July 1994. ITDG, Nairobi, Kenya. Nairobi, Kenya: ITDG.

A report of the 4th annual vets workshop held in Isiolo. The opening speech, read by Dr Gituma on behalf of the Director of Veterinary Services stressed the importance of livestock; the fact that veterinary services are inadequate in the pastoral areas; that wasaidizi had a useful role to play, and could also help the livestock department by reporting information on disease incidence and by publicising vaccination programmes.

ITDG (1999) Proceedings of the 8th Decentralised Animal Health Workshop, May 1999. ITDG, Nairobi, Kenya. Nairobi, Kenya: ITDG.

Report of the 8th decentralised animal health workshop held in Meru. The theme of the workshop was: practice, policy and the law in the delivery of animal health services particularly in arid and semi-arid lands. This, the largest DAH workshop so far was attended by 72 participants including vets from the DVS, KVB, KVA, University, Research Institutes, NGOs and donors. The workshop aimed: to review the state of the laws and policies governing the delivery of animal health services in arid and semi-arid lands; to identify the constraints in animal health services delivery; to evaluate the place of community animal health services and to set in motion a process of addressing constraints in animal health service delivery. Workshop outputs included: raising the awareness among the stakeholders on the policy and legal issues affecting the delivery of animal health services in the region; identification of major gaps in the legal and policy framework and what needed to be done and by whom; shared experiences on the delivery of animal health services by the stakeholders in the region and the establishment of a committee task force to carry the process forward to the 9th DAH workshop.

ITDG (2000) Proceedings of the 9th Decentralised Animal Health Workshop. Theme: Strengthening Animal Health Service Delivery in Arid and Semi-Arid Lands, June 2000. ITDG, Nairobi, Kenya. Nairobi, Kenya: ITDG.

The 9th DAH workshop was a follow-up of the 8th workshop. Most of the discussions focused on the results of work which had been identified at the 8th workshop and undertaken by the DAH Task Force. The workshop was opened in person by the DVS (the first time he had actually attended, although Deputy Directors had read out speeches on his behalf at previous workshops). In his speech the Director said 'The Department of Veterinary Services is keen to work closely with other development partners in promoting and facilitating livestock health and productivity especially on ASAL through availing resources and in exploring options for improved animal health services delivery. Towards that end, the department considers community-based approach a possibility in the delivery of animal health services in the ASAL environment.

ITDG (2000) Community-based Animal Health Care in East Africa: Experiences and Case Studies with Particular Reference to Kenya. ITDG East Africa, Nairobi, Kenya. Nairobi, Kenya: ITDG.

A 130 page book covering all aspects of decentralised animal health care in East Africa. Chapters cover: historical development; the legal framework and advocacy; setting up a CAHW system; standardisation of training; monitoring and evaluation; comparison of CAHWs in asal and high potential areas; socio-economics and sustainability; gender; institutional support; the international perspective; and the future etc.

ITDG (2000) The Role of Community-based Animal Health Care in Rural Development: ITDG-EAs Experience. ITDG East Africa, Nairobi, Kenya. Nairobi, Kenya: ITDG.

The trend for all development work is geared towards the strengthening of local institutions to run the affairs that affect the development of the community. ITDG-EA strongly believes that there can be no sustainable development without full participation of beneficiaries. Hence we focus on enabling the beneficiaries in their projects to fully participate in the project cycle.

ITDG (1991) Vets Workshop, Baragoi, Samburu, November 1991. ITDG Nairobi, Kenya. Nairobi, Kenya: ITDG.

The second ITDG Vets workshop was attended by 9 government vets (out of 26 participants) including an Assistant Director from Nairobi, a Professor from the Faculty of Veterinary medicine, and a scientist from the Kenya Agricultural Research Institute.

ITDG and IIRR (1996) Ethnoveterinary Medicine in Kenya: A Field Manual of Traditional Animal Health Care Practices. Nairobi, Kenya: ITDG / IIRR.

A pioneering field guide to traditional animal health care practices in Kenya. It covers more than 60 diseases in camels, cattle, chickens, dogs, donkeys, goats and sheep. For each disease or problem, the manual gives the signs, causes, prevention and treatment measures.

James, L., Heffernan, C. and Sidahmed, E. (1999) IFAD and the Delivery of Veterinary Services to the Rural Poor. IFAD.

In recent years, there has been a change of strategy and IFAD has more frequently attempted to facilitate the delivery of veterinary services by the private sector at the community level. Even here, a number of different approaches are possible. Two of the best known, and apparently the most effective, have been the creation of revolving drug funds (RDFs) and the training of paraveterinarians or community animal health workers (CAHWs). Both strategies are discussed at greater length later in this report. However, other community-level options have also been tried. This resource can be found at: <http://www.ifad.org/lrkm/theme/vet.htm>. Last accessed 4/14/2009

Jones, B.A., Deemer, B., Leyland, T.J., Mogga, W. and Stem, E. (1999) Community-based Animal Health Services in Southern Sudan: The Experience So Far.

The experience of facilitating community-based animal health services (CAHS) in southern Sudan is reviewed. Operation Lifeline Sudan livestock programme started a community-based rinderpest control programme in 1993. In 1994, the programme widened to control of other diseases through development of CAHS; activities included participatory baseline surveys, community dialogue to identify priorities and develop social contracts, training of community-based animal health workers, Animal Health Auxiliaries and Stockpersons, development of Veterinary Coordination Committees, and monitoring. Currently there are 1,057 animal health workers providing services to 80% of agro-pastoralist areas. There has been a 12% drop out rate. More than 1 million cattle have been vaccinated against rinderpest annually since 1993 and increasing numbers of other vaccinations and treatments provided for cattle, sheep, goats and poultry. Constraints include insecurity, poor access, lack of mobility, minimal infrastructure and trade, lack of veterinarians and climatic extremes. CAHS in an under-developed agro-pastoralist community such as southern Sudan is a viable method of delivering basic animal health services, and can form the base on which to build a sustainable private veterinarian-supervised CAHS. This resource can be found at: <http://www.vetwork.org.uk/baj-sudan.htm>

Kajume, J. (1998) Community-based Animal Health Services Delivery Strategy: Justified or Not? 8th DAH Workshop, Meru, Kenya. Nairobi, Kenya: ITDG.

A paper presented at the 9th CAH workshop in Kenya quoted the DVS opening address at the Kenya Camel Forum Workshop in Namanga in March 1999 in which he said 'we shall continue to avail officers in ASAL areas to render the much needed services while at the same time exploring other options for the improved delivery of animal health services in pastoral areas where most of our camel population is found. In this regard, we are in consultation with relevant development partners with a view to promoting establishment of recognisable community based animal health services in ASAL areas. We do believe that community based animal health service providers have a place and a role to play in Animal health Service network especially in camel husbandry in ASAL areas.'

Kajume, J. (2001) Delivery of Animal Health Services: Policy Framework. The Kenya Veterinarian 22, 69.

This article reviews the historical development of and current policy framework governing the delivery of animal health services in Kenya

Kajume, J. (2001) Community-based Animal Health Service Delivery in Kenya: An Overview. Paper presented at the Annual Workshop on Goat Development, Meru, September 2001, Department of Veterinary Services, MoA&RD, Nairobi. Nairobi, Kenya: Ministry of Agriculture and Rural Development.

This paper presents an overview of the development of community-based animal health services in Kenya. It states (p6) that '..the Department of Veterinary Services, the Kenya veterinary Board, the Kenya Veterinary association, Development agencies involved in the provision of animal health services and other policy influencing institutions have recognised the important role of CAHWs in animal health service provision. It is envisaged that the on-going animal health policy review process will incorporate and recognise community-based animal health service delivery systems as an integral part of the overall animal health service delivery strategy'.

Kajume, J. (2002) Policy Advocacy: End of Contract Report. Nairobi, Kenya: ITDG.

Julius Kajume was retained for 6 months as a policy advocacy adviser for ITDG Kenya

Kasiye, F. and Silkin, T. (2002) Veterinary Policies in the Horn of Africa. Nairobi, Kenya: OAU/IBER PACE.

Describes the history of animal health services in East Africa, the emergence of CBAHC programmes primarily in the NGO sector, veterinary privatisation and the policy review process up to 2001. The Kenya section notes that 'the debate on CAH between NGOs and the professional bodies was adversarial. There is now more collaboration and progress is being made in identifying suitable models of animal health care for pastoral areas' and 'Pastoralists have historically been marginal in Kenya society, although their livestock represent an important economic resource. The PRSP consultative process has created opportunities for successful lobbying for their interests.'

Kimanzi, R.S. (1997) Welcoming Remarks at the Graduation Ceremony for the AHITI.

In his welcoming remarks at the graduation ceremony for the AHITI, Ndomba, Kirinyaga, in April 1997, Dr Kimanzi, the Director of Veterinary Services said 'The DVS is fully committed to facilitating the review and amendment of the Veterinary Surgeons Act and the Pharmacy and Poisons Act with a view to enabling these graduates and their predecessors to carry out limited veterinary practice but of course without compromising professional conduct, ethics and quality. It may take some time to resolve, but let me assure them of our commitment to this end'.

Kimanzi, R.S. (1999) Official Opening Address for 5th Kenya Camel Forum, Namanga, March 1999.

In his opening address for the 5th Kenya Camel Forum in Namanga in March 1999, Dr Kimanzi, the Director of Veterinary Services said 'On our part as the Department of Veterinary Services, we are committed to working closely with other development partners in camel health and production. We shall continue to avail officers in ASAL areas to render the much needed services while at the same time exploring other options for the improved delivery of animal health services in pastoral areas where most of our camel population is found. In this regard we are in consultation with relevant development partners with a view to promoting the establishment of recognisable community based animal health services in ASAL areas. We do believe that community based animal health services have a place and a role to play in Animal health service network especially in camel husbandry in ASAL areas'.

Kimanzi, R.S. (2001) Official Opening Address for the Commonwealth Veterinary Conference, Nairobi, 2001.

The Director of Veterinary Services (Kenya) opening address for the Commonwealth Veterinary Association meeting in Nairobi 1999, in which he said 'we have initiated a review of laws governing the delivery of animal health services with a view to harmonising them with the changing environment in the livestock sector'.

Kithinji, C., Kajume, J. and Kahi, I. (2000) Rural Agriculture and Pastoralism Programme, Decentralised Animal Health Support Unit External Evaluation Report, March 2000. Nairobi, Kenya: ITDG.

By 1999 there were clear indications that DAH care approach, including training CAHWs was widely accepted by many interest groups including government veterinary services, reflecting a significant change of policy in favour of the DAH approach. The DAH unit played a crucial and important role in bringing this about.

KVA (2000) Minutes of the KVA Annual General Meeting in Mombasa, April 2000, KVA, Nairobi, Kenya. KVA.

Taking into account the training background of paraveterinarians and Community Based Animal Health Workers (CBAHWs), this AGM resolves and recommends that, the paraveterinarians wishing to practice any of the disciplines of the veterinary profession should first undergo further training in that discipline and thereafter practice under direct supervision of a veterinary surgeon, whereas CBAHWs should not practice at all.

KVA (2002) Workshop Proceedings: Delivery of Quality Veterinary Services to Preserve Animal Health in ASAL Areas. Silver Springs Hotel, Nairobi September 2002. Kenya Veterinary Association. KVA.

Report of a meeting convened by the KVA to discuss the delivery of quality veterinary services in the ASALs. Included 20 KVA members and 6 representatives from NGOs. The meeting agreed that a vet linked to AHAs linked to CAHAs could be one model for animal health services in the ASLS but there is no one model suitable for all situations. Furthermore that 'CAHWs are a stopgap measure and not a long-term solution. It should be noted that most of the trained CAHWs are also traditional animal health workers....The main aim is to have a CAHC system that is professionally supervised'.

KVA (2002) A Letter to the Permanent Secretary MoA&RD and DVS, 6th March 2002, Kenya Vet Association. KVA.

A letter in response the proposed new Veterinary Practitioners Act in which the Association expresses its strong objection for example 'We are greatly alarmed by the contents. The proposed legislation is careless, mischievous and ill-advised work. It smirks (sic) of complete contempt for the veterinary profession'... 'With just a stroke of a pen...all the illegal practices by unqualified persons

becomes legal, all players of all cadres become veterinary surgeons even incredulously the community based animal health workers who have been given just 2 weeks of training’.

KVA (2002) Annual General Meeting held on 25th April 2002 at Golf Hotel Kakamega. KVA.

KVB (2002) Minimum Standards and Guidelines for Training of Community-based Animal Health Workers in Kenya. Uthiru, Kenya: Kenya Veterinary Board.

This document describes the minimum standards and guidelines for training of community animal health workers in great detail including an outline syllabus. The Foreward, signed by the Dr Chong (DVS) and Professor Mbugwa (Chairman Kenya Veterinary Board) states that ‘New approaches beyond the market dependant privatisation are therefore needed to update the quality of service delivery in these [ASAL] areas. One such approach is the training of a lower cadre of service provider the Community Animal Health Worker (CAHW) who will live and work with specific communities all year round. There are various CAHW training manuals currently in use country-wide especially in the ASALs, which make some of the courses suspect. Many of these are deficient and do not address issues in the areas the CAHWs are expected to operate. To address this problem the Kenya Veterinary Board and the Director of Veterinary Services have adopted this manual as the basic training manual for CAHWs in Kenya’.

KVB (2002) The Veterinary Practitioners Bill (2002) DRAFT. Nairobi, Kenya: Kenya Veterinary Board.

A draft bill to replace the Veterinary Surgeons Act (1953), developed through a process of workshops and discussions following the Meru workshop in 1999, and drafted by a lawyer in Nairobi. It contains a clause (p3) ‘registered veterinary surgeon means a person whose name appears for the time being in the register and includes veterinary surgeons, animal health technicians and community based animal health workers’.

Leonard, D. (1997) Comment on Paper by Otieno. FAO E-Conference 1997. FAO .

Spontaneous private veterinary practice has taken off in Kenya and this paper conclusively demonstrates it. The methodology by which these data were generated is not made clear, however, and that makes it difficult to interpret some of the material presented. This resource can be found at: <http://www.fao.org/WAICENT/FAOINFO/AGRICULT/AGA/AGAH/Vets-I/c58.htm>

Leyland, T. and Akabwai, D.M.O. (1999) Delivery of Private Veterinarian Supervised Community-based Animal Health Services to Pastoralist Areas of the Greater Horn of Africa.

Within the context of restructuring of government veterinary services and the liberalisation of pharmaceutical supplies, various models using participatory techniques are being developed to establish fully privatised pastoral veterinary practices. The paper describes and discusses the various approaches being used to establish such private practices. Major lessons learnt in delivering community-based animal health services (CAHS) and key issues to address in order to make such services sustainable are highlighted. Diagrammatic models of the delivery systems used are described. The paper discusses methods in which these relatively new, privatised and CAHS might best and most rapidly be adopted, by various levels of decision-makers. The paper concludes that private pastoral veterinary practices could be both economically viable and provide needed services if national governments put in place specified policy and legal frameworks that create an enabling environment for them to operate within This resource can be found at: <http://www.vetnetwork.org.uk/tl-horn.htm>. Last accessed 4/14/2009

Leyland, T. and Catley, A. (2002) OAU/IBAR PACE Programme.

This paper uses evidence from various authors and discusses how CAHWs can make a useful

contribution to improving veterinary services. The paper states that 'To make the best use of CAHWs they need to be brought under the control, responsibility and guidance of the veterinary authorities both at regional and national level. To achieve this, authorities need to define the roles of the various cadres of 'para-veterinarian' in revised legislation' and concludes that 'developing countries chances of attaining quality veterinary services as guided by the OIE are enhanced by the adoption of well planned and regulated CAHW systems'.

Leyland, T., Akabwai, D. and Mutungi, P. (1998) Delivery of Private Veterinarian Supervised Community Based Animal Health Services to Arid and Semi Arid Pastoralist Areas – Are they a Viable and Sustainable Option? Vetaid Conference, Tanzania 1998.

The Abstract reads 'Within the context of restructuring of government veterinary services and the liberalisation of pharmaceutical supplies various animal health delivery systems, using participatory techniques, are being developed to establish fully privatised pastoral veterinary practices. The paper describes and discusses the various approaches being used to establish such private practices. Major lessons learnt in delivering community-based animal health services and key issues to address in order to make such services sustainable are highlighted. Diagrammatic models of the delivery systems used are described. Case studies are used to show the impact, viability and sustainability of these community-based animal health delivery systems (CAHS). The paper concludes that private pastoral veterinary practices are economically viable if national governments put in place policy and legal frameworks that create an enabling environment.' It included Case Studies of Community-based Animal Health Services (CAHSs). There is also a piece by Dr Boniface K Kaberia related to ParaVets in Meru. There is also a Participants List. This resource can be found at: <http://www.vetaid.org/publications/arusha98/index.htm>

Leyland, T., Akabwai, D. and Mutungi, P.M. (1999) Delivery of Animal Health Services in Eastern Africa. Proceedings of a Workshop held in Arusha, Tanzania, December 1998. Case Studies of Participation in Privatised Community Animal Health Services.

The paper examines the sustainability of privatised community animal health services (CAHS) for remote areas in East Africa. Using a series of case studies from Kenya, Sudan, Ethiopia, Malawi, Afghanistan, Chad and Somalia the authors examines differing approaches to establishing and delivering CAHS and look at lessons learned

Leyland, T., Akabwai, D. and Mutungi, P.M. (1999) Delivery of Animal Health Services in Eastern Africa: Establishing Pastoral Veterinary Practices: What are the Implications for East Africa. Community-based Animal Health and Participatory Epidemiology Unit (CAPE), OAU. CAPE, OAU.

The paper describes and discusses the various approaches being used to establish private pastoral veterinary practices

LID (1997) Private Veterinary Services for the Poor. from FAO E-Conference 1997, Livestock in Development, Crewkerne UK. FAO.

If neither private nor state veterinary services reach the poor – then what are the alternatives? Presumably there are many – but do we have the data to describe the relative merits of different approaches? Government contracts to private veterinarians have been used elsewhere as a means of enabling private practice to establish in rural areas. The Morocco paper describes in more detail the impact such a measure can have on private practice viability. What we lack however is quantified data that describes the impact of such a programme on the availability and quality of services to a range of different farmer client groups. Without such evidence it can be difficult to persuade state veterinary services of the merits of supporting the development of the private sector – be that through the use of subcontracts or any other policy tool.

Martin, M. (2001) The Impact of Community Animal Health Services on Farmers in Low-Income Countries: A Literature Review. Vetaid.

Community animal health services have been promoted in many of the low-income countries over the last 20 years. Recently there has been a growing interest in monitoring and evaluating all types of development projects. Implementers of community animal health projects have also attempted to measure the impact of their work.

Martina, M., Mathias, E. and McCorkle, C. (2001) Ethnoveterinary Medicine: An Annotated Bibliography of Community Animal Healthcare. ITDG Publishing.

This volume contains some 700 abstracts from around the world relating to peoples animal healthcare, otherwise known as ethnoveterinary medicine. Each abstract, many of them substantial, contains where possible detail of the livestock's disease, the name of the treatment, its method of preparation and administration. The abstracts cover the treatment of animals in 115 countries. The bibliography is aimed at all involved or interested in ethnoveterinary medicine: botanists, animal production professionals, veterinarians, anthropologists, social scientists, rural development professionals and anyone interested in Indigenous Knowledge. This book replaces ethnoveterinary medicine: An annotated bibliography, which was originally published in 1989 as the premier sourcebook in its field and will be of great use and interest to many active in the Indigenous Knowledge field.

Masiga, W. (1999) The Veterinary Profession in a Changing Environment. Opening Address for the Commonwealth Veterinary Association Meeting, Nairobi 1999, AU/IBAR. Nairobi, Kenya: KVA.

In his opening address to the Commonwealth Veterinary Association Conference in Nairobi in 1999, the Director of AU/IBAR said 'We are currently exploring ways of reaching remote areas through community based animal health workers...In our opinion it is important that State Veterinary Services should recognise the virtues of these alternative systems and their appropriateness for the pastoral and remote areas of the continent'.

Mbela, D. (1997) A Speech by the Hon Darius M. Mbela MP, Minister for Agriculture. Livestock Development and Marketing on the occasion of the Graduation Ceremony at AHITI, Kabete, 3rd April 1997.

In his opening speech on the occasion of the graduation ceremony at AHITI, Kabete on 3rd April 1997, the Hon Darius M. Mbela MP, Minister for Agriculture, Livestock Development and Marketing said 'Currently plans are underway to improve the present legal framework to allow 'Para Vets' graduating from the AHITI institutes to operate more freely as a back up to the delivery of veterinary and clinical services at the grassroots level'.

McCorkle, C. (1997) Paraveterinary Healthcare Programs: A Global Overview (FAO Electronic Conference on Principles for Rational Delivery of Public and Private Veterinary Services).

If primary animal healthcare services are ever to reach a majority of the world's livestock, then as WHO recognized for human patients nearly two decades ago it is imperative to tap all possible practitioner resources, including traditional healers and localized paraprofessionals. This imperative is particularly acute wherever livestock are dispersed across large or remote rural areas and/or are nomadic or transhumant, as is the case in many nations of the tropics

MoAandRD (2001) Pan-African Programme for the Control of Epizootics, Kenya National Project (March 2001–October 2004), Ministry of Agriculture and Rural Development. Nairobi, Kenya: Ministry of Agriculture and Rural Development.

The plan for PACE Kenya approved by the MoA&RD describes the use of private veterinarians and CAHWs in disease surveillance and control 'In the marginal areas, PACE Kenya will promote active

participation of private veterinarians/NGOs in surveillance, sample collection, and disease reporting and control campaigns through sanitary mandating. Here CAHWs will be linked to private veterinarians/NGOs who will in turn report to the DVO’.

MoAandRD (2002) Policies and Strategies for the Delivery of Veterinary Services in Kenya. Department of Veterinary Services / Kenya Veterinary Board.

The final draft of the revised policies and strategies, for adoption by the MoA&RD. Contains references to CAHWs under the Kenya Veterinary Board Services (p43) ‘To regularly review the Veterinary Surgeons Act and Board policies to cater for animal health technicians and other animal health service providers’

MoAandRD (2002) Speech by Hon Elijah K Sumbeiywo, E.B.S., MP Assistant Minister for Agriculture and Rural Development at the Official Launching of the Community-based Animal Health Network at the Nairobi Safari Club.

At the official launching of the community-based animal health network at the Nairobi Safari Club, the Assistant Minister for Agriculture and Rural Development said in his opening speech ‘I am particularly aware of the effort and contribution made in the establishment of community-based animal health service delivery systems closer to the deserving communities. These initiatives may not be perfect and indeed are lacking in many ways, but definitely they play a significant role in animal health service provision and are a relief to livestock owning communities in pastoral areas. I urge all players involved, with the Department of Veterinary Services taking a leading role, to systematically work out the modalities of improving these initiatives so as to make them deliver quality service in a sustainable and viable manner’.

Mt Kenya Vet (2001) Kenya Veterinary Association, Central Region, Newsletter.

Newsletter produced by the Kenya Veterinary Association Central Branch which included a paper prepared by Dr Kamau Mungai, Executive Officer of the KVB, outlining progress with reforming the veterinary profession. The paper describes the establishment of and members of the Decentralised Animal Health Service Committee and some of the initial ideas developed by the Committee’s workshop in Garissa in November 1999.

Muchina, M. and Wabacha, K. (2002) Community-based Animal Health Care in Kenya: Kenya’s Experiences in Re-engineering its Structural, Policy and Legal Frameworks. Nairobi, Kenya: Faculty of Veterinary Medicine.

Chapter for a forthcoming book about decentralised animal health care policies. Using the principles of excludability and rivalry, the authors argue that curative services should be funded by the livestock keeper, and delivered by the private sector. Efficient veterinary service delivery in the ASAL would require the participation of private practices, but to be viable, these would in turn need to operate in partnership with CBAHWs

Munyua, M. and Wabacha, K. (2002) Community-based Animal Health in Kenya.

Kenya provides an example of a country where the veterinary establishment, at the instigation of the Kenyan Veterinary Board (KVB) has been working towards developing a legal and policy environment which supports Community-based Animal Health (CBAH). In this document, the authors review the reasons behind these moves. They also reflect on Kenya’s emphasis on community participation and preferred models for community based livestock service supply. The Kenya case reflects the experiences of all countries that are changing the face of veterinary service supply

Munyua, S.J.M. and Kahiu, I.G. (1999) Can the Veterinary Education Curriculum and the Provision of Veterinary Services Evolve with Time or Resist Change? Paper presented at the CVA Conference, Nairobi, 1999. Nairobi, Kenya: Faculty of Veterinary Medicine.

In this paper, Munywa and Kahiu said of CAHWs 'Clearly you [vets] are the best people to determine how this [veterinary service delivery] is best achieved'

Mwaisaka, P.E. (1998) Opening Address by the PS Ministry of Agriculture at a Meeting for Provincial Directors of Veterinary Services, Principles of Training Institutes, Officers in Charge of Regional VILs and Senior Officers at the HQ, Kabete, AHITI, Kabete, 25th–26th Novembe

In his opening for this meeting the PS Ministry of Agriculture said: 'I am aware of the recent study, namely 'Improved Delivery of Animal Health Services' which was undertaken with full participation of the Department. I expect all parties to come out with a way forward for the benefit of pastoral communities who are the primary target'; also 'As a Ministry we fully recognize and appreciate the contribution of all stakeholders including farmers, farmers' organisations, private sector, donor community, bilateral development agencies and NGOs among others. I urge you all, especially the Provincial and District Heads, to take inventory of those partners, and play a leading role in co-ordinating their efforts. In particular I wish to single out the involvement of NGOs. I am informed that there are more than 30 NGOs involved in the delivery of animal health services. I highly doubt of the Provincial Heads present can give an account of all NGOs involved in the delivery of animal health services in their Provinces! I wish to point out that it is your responsibility as a Department to ensure that the NGOs and other players in the delivery of Veterinary Services are working towards national goals and objectives.'

OAU/IBAR (1997) Report of the OAU/IBAR/IGAD meeting of Directors of Livestock Production, Kampala 8th–10th December 1997. Nairobi, Kenya: OAU/IBAR.

A report of the OAU/IBAR/IGAD meeting of Directors of Livestock Production in Kampala where the concept of CAHWs was presented by Chip Stem (Tufts). Participants in the Animal Health Sub Group recommended (inter alia) 'In pastoral areas, veterinary-supervised community-based / alternative delivery systems should be researched and developed'

OIE (2001) Regional Commission for Africa Meeting, Arusha, January 2001. Paris, France:

Agenda item 1 of this meeting was to discuss the role of para-veterinarians in the delivery of veterinary services in Africa. The conclusions recognised the need to improve animal disease surveillance and control measures especially in remote areas; that there are too few vets and AHA; that CAHWs can play a useful roles, but that the case studies presented at the meeting covered too few ecological and geographical areas in the region; the absence of regulatory frameworks; and the need for more discussion at national level on the most appropriate frameworks.

OIE Regional Commission for Africa (1999) 13th Conference of the OIE Regional Commission for Africa, Dakar, Senegal, 26th–29th January 1999. Paris, France: OIE.

A report of the 13th regional conference of the OIE Regional Commission for Africa. Recommendations included (p49) 'Community livestock workers are necessary for the improvement of animal production in remote and pastoral areas'...(p50) 'Community livestock workers also benefit from the setting up of an appropriate legislative framework, adequate continuing education and better integration into animal health networks'.

Okwiri, F.O., Kajume, J.K. and Odondi, R.K. (2001) An Assessment of the Economic Viability of Private Animal Health Service Delivery in Pastoral Areas of Kenya. Nairobi, Kenya: Global Providers International Ltd/OAU/IBAR.

A study commissioned by the CAPE project of AU/IBAR to assess the economic viability of private vet services in the ASAL areas. The study explored various models of CAHC and found CAHAs to be 'crucial for the effective delivery of animal health services'. The model where an AHA supports a network of CAHAs to be the most profitable, and could generate enough profits to attract veterinarians in the long term.

Omore, A. (1997) Comments on Otieno Paper and to Leonard's comments. FAO E-Conference 1997. Nairobi, Kenya: FAO .

If it is true that the farmers surveyed in the Kenya Paper are representative of the clients of private practitioners, and that the sample was not skewed by a few large farms as already pointed out by the editors, then the problem of smallholders not accessing private veterinary professional services must be very severe indeed. Are the majority of smallholders going without veterinary services? Are they only consulting unlicensed para-veterinarians who provide cheaper services? Or have they resorted to ethno-veterinary knowledge since the collapse of publicly delivered services?

Otieno, L., Upton, M., Mukhebi, M. and McLeod, A. (1997) Animal Health Services in Kenya. Paper from FAO 1997 E-Conference, KARI, Socio Economics and Epidemiology Project. Nairobi, Kenya: FAO .

Delivery of animal health services in Kenya has undergone reforms since 1986. These reforms are aimed at improving the services that had been deteriorating since 1980. By reducing the role of the public sector and encouraging the private sector to deliver some animal health services, the government of Kenya hopes to improve the efficiency and effectiveness of animal health services delivery.

Wamukoya, J., Gathuma, J.M. and Mutiga, E.R. (1995) Spontaneous Private Veterinary Practices Evolved in Kenya Since 1988.

Following independence in 1963 the Department of Veterinary Services (DVS) provided all types of veterinary services free of charge to farmers. New veterinary graduates found automatic employment by the DVS. Few if any engaged in private practice. In 1988 the government abandoned its policy of automatic recruitment of veterinarians. Privatization of A.I, clinical and dipping services shortly followed in 1991. Cost recovery for meat inspection and vaccination programmes have since been introduced. Largely unaided by government or donor support, the private sector has rapidly developed in response to these changes. There are now at least 150 private practices with many more veterinarians operating without a license.

Ward D., Otte, J. and Cheneau, Y. () International Experiences with Commercialization / Privatization of Veterinary, Artificial Insemination and Other Livestock Services. Agridoc .