

Sustainability of Community-Based Animal Health Programmes in Somalia Draft Code of Conduct

AU/IBAR/PACE

Community-Based Animal Health and Participatory Epidemiology Unit
for consideration at Somali Aid Coordination Body
Livestock Working Group

Objective:

The objective of this code of conduct is to establish a consensus on best practices for insuring the sustainability of community animal health (CAH) programmes for Somalia. The goal is to obtain a mutually binding set of principals that provide a harmonized and synergistic basis for programme implementation by all stakeholders.

Given that public sector resources are essentially non-existent in Somalia, strategies must be adhered to that generate incentives for all levels of re-supply and supervision. As commercial trading is an important component of Somali culture, privatized systems for animal health input re-supply are recognized as the best means to achieve this goal.

This document will focus primarily on the economic aspects of sustainability. However, it is important to emphasize that sustainability of CAH systems is also highly dependent on solid participatory and community-based approaches that include the completion of an appropriate participatory design process based on community and stakeholder dialogue.

Introduction:

The objective of community-based animal health is to establish sustainable and affordable animal health systems that respond to livestock owners' needs. These systems are often designed to serve remote, marginalized communities where professional services are absent or limited. In Somalia, formal veterinary services are mainly focused around urban centres and small market towns. Systems for rural areas are required and the CAH approach is well suited to extend the reach of veterinary services to pastoral areas.

All too often, CAH programmes are established utilizing re-supply and supervision systems that are either agency or project dependent. In the past, some programmes have heavily subsidized inputs with the justification that beneficiaries are poor, unable to pay, or in the midst of an emergency. The result has been that sustainable development activities and private enterprise have been undermined. The net effect is to reinforce the psychology of dependence, damage markets, and undermine longer-term development. The final effect is to actually increasing poverty. Such programmes generally collapse upon phasing out of the project. A better description for this approach is project-based animal health services.

Regardless of the financial framework, CAH workers should be active livestock herders selected by the community and answerable to the local community. Further, all stakeholders operating in Somalia are in agreement that professional veterinary technical supervision is required and that an appropriate standard of accreditation be met.

There are no short-cuts to sustainability. All sustainability concerns must to be adopted by mutual agreement through participatory dialogue where the community actually takes ownership of the design.

Somali Livestock Production is Market Oriented

- Somali livestock production is one of the most market-oriented systems in Africa (PACE Somalia project proposal, 2001).
- Field-based research and reviews generally find that Somalis are able and willing to pay for animal health inputs at market price levels (Catley, 1999). The AU/IBAR conference on Primary Animal Health Care Noted that poor livestock owners are usually willing and able to pay for animal health care and that access to sustainable services is the primary constraint to the receipt of services (AU/IBAR, 2003).
- A recent impact assessment of an NGO-implemented community animal health programme in Dollo, Ethiopia conducted by a team with representatives from PACE, the government of Ethiopia and an external NGO noted that the public was satisfied with CAHW services provided against payment and that the programme ‘created attitudinal changes’ that reinforced ‘the user pay philosophy (PACE, 2003).’
- It has also been noted that traditional social support mechanism exist that would provide needy pastoralist with access to commercially-priced services (Catley, 1999). Reinforcement of traditional mechanisms is preferable to subsidies as traditional support mechanisms do not have the negative livelihood effects associated with subsidies.

Some Guiding Principals:

- Community animal health networks should adopt a ‘strictly business approach’ to financial issues.
- Market-based pricing should always be utilized.
- Programmes should not undermine existing, credible informal and formal private veterinary business initiatives and should seek to facilitate growth of a regulated private sector where feasible.
- Before setting up CBAHPs, projects should carry out detailed feasibility studies to assess the economic and financial viability of the intervention.
- Project exit strategies should be discussed by all stakeholders and agreed prior to the implementation of activities.
- Community animal health workers can assist project-sponsored activities such as vaccination campaigns and disease surveillance; however appropriate incentives should be provided and adequately discussed with the communities and other stakeholders.
- Projects and agencies should minimize the direct employment of veterinarians and animal health assistants as staff members.
 - Veterinary professionals can be contracted for specific tasks for defined periods of time.
 - Payments should be made on the basis of the amount of work completed rather than for time spent.

Supervision

- Three primary supervisors and supervisory roles are recognized
 - Communities and community institutions
 - General performance
 - Veterinarian or veterinary assistant
 - Technical, commercial and ethical supervision
 - Public sector or local authorities
 - Accreditation and coordination of surveillance activities
 - Guidelines for the protection of public goods
 - Food safety, drug resistance, etc.

Source of Input Supply:

- Re-supply of community animal health workers should be done through local sources ideally managed by veterinarians or animal health assistants (AHA).
- The role of projects should be facilitation of the establishment of direct links between CAHWs and commercial suppliers.
 - Subsequently, projects should monitor linkages rather than act as intermediaries.
 - It is important that potential suppliers should be involved in stakeholder dialogue prior to the CAHW training.

- When viable and reputable practices, pharmacies or other commercial channels are not present, projects should seek to facilitate the establishment of such businesses.
- Efforts should be made to work with local suppliers to upgrade the quality and handling of pharmaceuticals where this is an issue.
 - Dialogue with pharmacy owners on range and quality of products at the start of the project.
 - Engagement and training of pharmacy owners as necessary
 - Strategies that bypass commercial sources of supply as a means to upgrade quality are not sustainable and strongly discouraged.
- Commercial suppliers and veterinary professionals are one of several key stakeholders, but they should not be treated as the entry point or gate-keeper for community-based animal health programmes. Community demand for services is the driving force and community institutions are the appropriate entry point for the establishment of community animal health programmes.

Pricing:

- Trainees or sponsoring communities should contribute significant amounts to the cost of initial kits.
 - Initial kits can be assembled locally or through normal project procurement procedures, but all inputs provided in the kits should be locally available. Drugs should ideally be purchased from the future supplier.
- Pricing principals should be provided rather than fixed price lists. These principals are:
 - cost + transport + profit,
 - market valuation,
 - negotiation between CAHWs, AHAs and veterinary supervisor/supplier on margins and incentives.

Emergency Livestock Interventions:

- Projects and agencies should engage in the direct distribution of subsidized interventions to CAHWs or livestock owners only if strictly necessary.
- The short and long-term impact of emergency interventions on markets and the disruption of sustainable market institutions must be considered.
- The short and long-term impact on the financial viability of animal health service providers must be considered.
- Voucher systems warrant testing and critically review through impact assessments.
- Local purchase of livestock for redistribution as food aid has shown some promise as an intervention mechanisms that supports local markets and emergency destocking.

Developmental relief approaches are recognized as best-practice in animal health interventions. Livestock are the primary indicator of wealth and well-being in pastoral societies. People who own livestock are not destitute. Livestock interventions in emergencies primarily seek to preserve livelihoods rather than save human lives and should not damage the long-term sustainability of livestock livelihoods through the disruption of markets. Short-term, life-saving interventions need to be carefully considered and may be better directed towards other aspects of household food security and human health.

Credit:

- Any CBAHPs should include business training for CAHWs.
- Projects should be discouraged from engaging in all forms of direct credit to CAHWs.
- Appropriate micro-credit schemes can be established at the community level utilizing experienced guidance.

In the past, implementing projects often talked ‘no credit’ and then their first action was to provide a kick-start or free training programme with a free drug kit. The verbal message was ‘no credit’; the much stronger non-verbal message (in the form of the kick-start or free kit) was that credit was available and practiced. Everyone was left confused by the mixed messages.

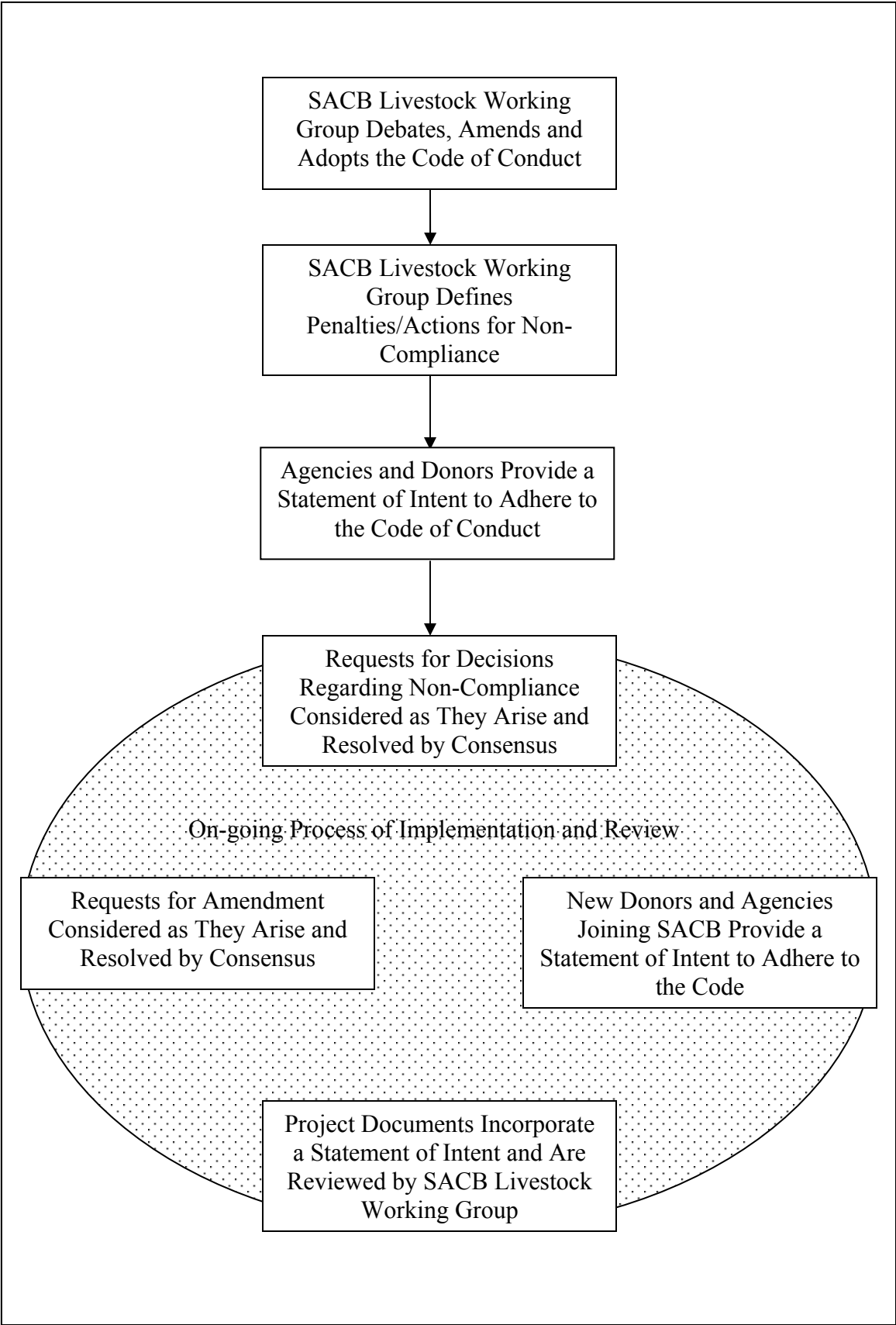
Training:

- Training programmes should dedicate a significant amount of time to sustainability issues using participatory methods.
 - Role playing of critical issues that allow trainees to work out constructive solutions to potential sustainability problems are a useful approach.
- Potential supplier/veterinary supervisors should be directly involved in the training to establish effective linkages from the outset.
- Trainees should contribute to the cost of training
- Identified suppliers should be encouraged to contribute to the cost of training to help establish relationships with CAHWs.

Adoption, Amendment and Enforcement:

- The SACB Livestock Working Group is suggested as the forum to take the code of conduct forward.

- This code of conduct will be debated, amended and adopted by consensus among the agencies, donors and local organizations currently active in animal health interventions in Somalia.
- Once adopted, all agencies and projects will state their intent to adhere to the code of conduct.
- The code of conduct will be reviewed by stakeholders at SACB Livestock Working Forum at least annually and updated as appropriate.
- New donors and agencies will be asked to endorse the code and adhere to its contents.
- All project documents should contain a statement of intent to adhere to the code and be reviewed for compatibility with the code by participants so delegated by the Livestock Working Group.
- Requests to amend the code will be considered as they arise and be resolved by a consensus of the stakeholder at the forum.
- Request for decisions regarding violation of the code will be considered as they arise and will be resolved by consensus of the stakeholders at the forum.



Reference List

AU/IBAR, 2003. Primary Animal Health Care in the 21st Century: Shaping the Polices, Rules and Institutions. Nairobi.

Catley, A., 1999. Community-based Animal Health Care in Somali Areas of Africa: A Review. Nairobi, The Participatory Community-based Vaccination and Animal Health Project (PARC-VAC) of the Organization of African Unity/Interafrican Bureau for Animal Resources.

PACE, 2003. Participatory Impact Assessment of the Save the Children USA Community-based Animal Health Project: Dollo Ado and Dollo Bay, Somali National Regional State, Ethiopia. Nairobi, Community Animal Health and Participatory Epidemiology Unit of the African Union Interafrican Bureau for Animal Resources.