

# **POLICY PROCESSES FOR VETERINARY SERVICES IN AFRICA**

**Sun n Sand Hotel  
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**Workshop report produced by Ian Scoones and William Wolmer**

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## SECTION 1: The training programme

### Overview

This is the report of the first of three phases in a training programme being run between September 2004 and February 2005. It is a collaboration between the Institutional and Policy Support Team (ISPT) of AU-IBAR and the Institute of Development Studies at the University of Sussex, UK.

The three phases are:

1. Understanding policy processes - training workshop, Mombasa, Kenya, September 20-22, 2004.
2. Case study analysis of a particular policy process by course participants (October to December 2004).
3. Strategies for policy change. This will occur at a workshop in South Africa, January 31 - February 3, 2005, where the group will review the case study results and examine their implications. Training will focus on strategies for influencing policy.

Participants in this training programme come from a number of east and southern African countries, and are mid-senior level veterinarians and policymakers (see list of participants, Appendix 4). All participants have committed to the full programme, including the preparation of the case study.

By the end of the phase reported in this document, course participants have:

- a conceptual understanding of policy processes;
- be able to use a series of applied research methods for understanding policy processes;
- be able to apply this practically to the animal health sector; and
- worked up a research case study plan for phase 2 (see below).

The phase one training workshop was facilitated by Professor Ian Scoones and Dr William Wolmer, both from the Institute of Development Studies (University of Sussex, UK), in collaboration with members of staff of the CAPE unit "Institutional and Policy Support Team" (IPST) at AU-IBAR. The workshop was informal in approach, combining a limited number of presentations with group exercises and discussion (see programme, below). The aim was to draw on the extensive experience of participants, allowing participants to reflect on this in the light of conceptual understandings of policy processes. The overall aim was to develop a set of practical skills which can be made use of in work settings following the training programme.

### Introductions

The 26 participants came from 10 countries in east and southern Africa. In the introductory session they highlighted their expectations of the course (see Appendix 2). In addition they highlighted some of their engagements with policy processes in their own countries. A rich experience within the group was quickly evident. Below are some anonymised quotes from the introductory session.

*'I thought all I had to do was explain the science and all would change – I was wrong'*

*'Policy says something and implementation on the ground is something else. How do you reconcile these?'*

*'We've seen government policy change but it is slow. Seeing things on the ground helps change policy'*

*'Governments used to run everything but they are now shrinking. What should we do now?'*

*'The seeing is believing method helps change policy'*

*'When we started the veterinary services we had a lot of subsidies but now we must get the community to take some of the burden'*

*'There are so many interests around policy. It's like moving a big wheel. It's a long struggle.'*

*'The challenge is to balance the interests of cattle producers with the need for an animal health policy being maintained.'*

*'Trade issues are becoming more and more important but they are new. Our bosses don't know what to do.'*

*'Where there is not policy you can actually do quite a lot ... government is stopping things getting done.'*

*'Enabling things to get done requires a good understanding of constraints and of the way governments work.'*

*'Without enabling policies you can only do so much at the field level'*

*'We have influenced policy. But with hindsight how could we have done it better?'*

*'We have learned that stakeholder involvement in policy processes is essential'*

*'I have mostly been an end-user of poverty. Sometimes I have even been consulted.'*

Participants' experience varied from field-level implementation to national and international level policy formulation. The recognition that policy mattered was universal. But what is policy? And how does it change? This was the focus of the first workshop session which involved an overview lecture presentation summarised in the following section.

## SECTION 2: An Introduction to Policy Processes

Policy-making must be understood as a political process as much as an analytical or problem solving one. The policy-making process is by no means the purely technical rational activity that it is often held up to be.

### 1. What is policy?

The usual starting point is:

*Policy comprises decisions taken by those with responsibility for a given policy area, and these decisions usually take the form of statements or formal positions on an issue, which are then executed by the bureaucracy (from Keeley, 2003)*

Policy also has a wide range of broader definitions including:

*The allocation of values and resources - politics" or "whatever governments choose to do or not to do (Dye, 1984).*

Dye's definition implicitly includes written or stated declarations of intent or plans, and actions, which may turn out to be very different to what was intended in the plans, or may, in fact happen without any explicit declaration or plan. A very general definition is:

*'A purposive course of action followed by an actor or set of actors' (ODI, RAPID website)*

But... things are not necessarily as clear as this. Other commentators have observed:

*"Defining policy is rather like the elephant – you know it when you see it but you cannot easily define it" (Cunningham, 1963, cited in Keeley and Scoones, 1999:4).*

*'The whole life of policy is a chaos of purposes and accidents. It is not at all a matter of the rational implementation of the so-called decisions through selected strategies' (Clay and Schaffer, 1984: 192).*

Policy is complex and dynamic, and the term embraces a range of different aspects. Policy *statements* (e.g. white papers) are what one might think of firstly as policy. But what led to their formulation (e.g. broader strategies and plans), and are they always put into practice?

The *processes* by which policy is informed and formulated are highly significant. These were the focus for this workshop. Understanding processes also highlights particular *measures* for policy implementation (e.g. laws, regulations, or institutions/organisations/programmes). These are necessary to ensure that policy can be put into practice, and need to be seen together. Furthermore, policy and policy making is conditioned and shaped by the political, social and economic *context*, as well as historical factors.

To reiterate: Policy-making must be understood as a political process as much as an analytical or problem solving one.

### 2. Conventional views of policy

The conventional view envisages a series of stages - from agenda setting, through policy formulation to implementation and evaluation.

This model of policy making views it as a **linear** process in which **rational** decisions taken by those with **authority** and responsibility for a particular policy area. This approach views policy making as involving a number of stages that lead to a decision:

- Understanding the policy issue or problem [**agenda setting**];
- Exploring possible options for resolving the problem;
- Weighing up the costs and benefits of each; and
- Making a rational choice about the best option [**decision-making**].
- **Implementing** the policy
- Possibly evaluating outcome

Within this model, policy **implementation** is viewed as a separate activity that begins once policy decisions have been made. Policy implementation should lead to a resolution of the original problem.

This model assumes that policy makers approach the issues rationally, going through each logical stage of the process, and carefully considering all relevant information. If policies do not achieve what they are intended to achieve, blame is often not laid on the policy itself, but rather on political or managerial failure in implementing it (Juma and Clarke 1995). Failure can be blamed on a lack of political will, poor management or shortage of resources, for example.

- There is a separation of fact (a rational policy approach, based on evidence, science and objective knowledge) and value (seen as a separate issue dealt with in the political process):
- Policymaking is bureaucratic/administrative. [or where politics is considered: a split between policy making and implementation – politics surrounds decision making (realm of value – above) but implementation is purely technical or administrative (realm of facts)]
- Expertise is independent, objective, scientific. i.e. delivery of judgements based on 'sound science' or 'evidence-based policy' [a familiar refrain]

The traditional approach to the policy process has, however, proven to be an inadequate reflection of reality. Several alternative views, highlighting a whole range of other factors that impact on, and influence policy-making have been proposed.

### 3. What are policy processes?

If we shift the focus from policy analysis to **policy process analysis** a range of questions come to the fore:

- How do policies get created, by whom?
- How do ideas about what makes a 'good' policy evolve and change?
- Whose voices and views are taken into account in the policy process?
- How are boundaries drawn around problems and policy storylines elaborated?

The important point to get across here is that these processes include some perspectives at the expense of others – and it is the perspectives of the poor and marginalised that are often excluded.

A study of **policy process** should look at the complex and messy processes by which policy is understood, formulated and implemented, and the range of actors involved. Contrary to traditional views of policy making as linear and rational, with decisions being taken by those with

authority and responsibility for a particular policy area, the policy process is now more commonly recognised as being having the following characteristics:

- Policy-making is **incremental, complex and messy**: a process “of disjointed incrementalism or muddling through” (Lindblom, 1980). It is iterative, and is often based on experimentation, learning from mistakes, and taking corrective measures. Hence, there is no single optimal policy decision or outcome.

i.e. it ‘departs from the standard assumption that policymaking happens in neat step-by-step fashion, tidily informed by problem-free technical knowledge. It is argued instead that policy processes are frequently distinctly non-linear; political, incremental and haphazard’ (Keeley, 2003)

- There are always **overlapping and competing agendas** – there may not be complete agreement among stakeholders over what the really important policy problem is.
- **Decisions not discrete and technical**: facts and values are intertwined.
- Implementation involves discretion, **negotiation** etc by front-line workers (giving staff more scope for innovation than they are often credited with).
- Technical experts and policymakers ‘**mutually construct**’ policy – ie jointly negotiating what questions need to be answered and what knowledge can be provided to answer them [experts contribute to setting the agenda for policy by defining what evidence they can produce and by making claims about its significance for policy-makers. The negotiation process works both ways, however, and policymakers also delimit areas for scientific enquiry in the process of effectively cutting off certain avenues of research, and the very possibility of the creation of certain facts]

The study of policy processes therefore involves understanding the mechanics of decision-making and implementation pathways – and just as importantly it requires an understanding of more complex underlying practices of policy framing [**framing** = The way boundaries are drawn around problems; how policy problems are defined and what is included and excluded from consideration]; the policy storylines elaborated and the networks associated with them.

Three key concepts/tools allow our understanding of policy processes and allow us put some order on the ‘chaos of purposes and accidents’ that is policy:

- **Knowledge/Narratives**
- **Actors/Networks**
- **Politics/Interests**

Understanding these three influences on policy enables us to start to answer the question: Why are some of the ideas that circulate in the research/policy networks picked up and acted on, while others are ignored and disappear?’ This is a more complex question than the more standard question: ‘how can knowledge be transported from the research to the policy sphere?’

Similarly a shift in focus from policy analysis to policy process analysis implies a different response to ‘bad’ policy. The technical approach would be to explain why it is misguided and suggest how it might be improved. However, if there is something intrinsic to the policy process that means that policies invariably take a particular shape, then technical policy analysis may have limited utility, and what may be needed is a more wide ranging examination of policy-making itself.

#### 4. Policy narratives

Policy narratives [dominant ones being ‘received wisdoms’] are stories with a beginning, middle and end that describe events, or define the world in certain ways, and that shape policy decisions.

These cause and effect story lines define a problem, explain how it comes about and show what needs to be done to avert disaster or bring about a happy ending: what is wrong and how it must be put right

They often gain validity despite (or even because of) the fact that they frequently simplify complex issues and processes. This simplification is seductive in that they sidestep fuzziness and suggest a programme of action. This is what makes them appealing to politicians or managers – sweeping people along. Some narratives tend to gain more authority, and persist at the expense of others, and hence have more bearing on policy decisions.

A good example of an influential and persistent narrative is the one that has shaped perspectives on natural resources in Africa from colonial times. The storyline goes that because people are poor they don’t know how to look after the environment and natural resources around them, or can’t afford the luxury of doing so. The poor will exert a disastrous impact on precarious environments and this is exacerbated by relentless population growth. Other well-known narratives include: the ‘Tragedy of the commons’, Desertification, soil erosion, biodiversity loss etc. Many are narratives of crisis, demanding attention and urgent solutions.

Narratives such as these have provided the rationale for an array of colonial and post-colonial state policies that ‘protect’ environments from people and avert the dire predictions associated with the narrative. Yet in the process dispossessing communities of their resources ( eg denying farming in wetlands and attempts to ‘improve’ and modernise farming); or evictions from protected areas.

Narratives are sometimes criticised because it is believed they cause ‘blueprint’ policy, that is, a prescribed set of solutions to an issue used at times and in places where it may not be applicable.

Received wisdoms/narratives can stick with great tenacity, despite contrary perspectives and practices . Why?

- Most obviously – they suit certain political interests (more below)
- Such messages are easily communicated, they make for good sound-bite political marketing, and they fit well with the demands for clarity and measurable manageability of large-scale bureaucratic organisation.
- The storylines and metaphors are so taken for granted that they limit thinking about particular areas – this becomes the way things are thought about over time. Narratives reduce the ‘room for manoeuvre’ or ‘policy space’ of policy makers, that is, their ability to think about new alternatives or different approaches (below).
- Become embedded in particular institutional structures or actor-network groups.

### **Box 1: BSE in the UK**

This was illustrated during the UK's BSE crisis. A number of narratives interacted, and together they acted to suppress debate, making the crisis worse. For example, the responsible ministry in the UK government's (MAFF – Min of Ag, Fisheries and Food) had the dual task of promoting commercial interests of farming and food industry and ensuring food safety and consumer protection. But a core economic and political agenda dominated: that of keeping the market stable and maintaining UK beef sales domestically and internationally so shoring up economic viability of food industry. This was underpinned by a reassuring technocratic narrative that the knowledge/science surrounding BSE/CJD was certain (and not clouded by uncertainty) – and science was the sole determining factor in policy making, that the priority concern of the authorities (MAFF) was public health [rather than commercial interests – a misrepresentation]. MAFF argued that the risk to public health was zero or negligible and policy was robust [science-based and consumer-orientated].

However being locked into this narrative made MAFF unable to revise its views. It could not cope with new evidence which undermined the reassuring narrative. So they got locked into a situation and became deaf and were unable to learn until things became catastrophically bad.” Challenging advice was removed from reports, and scientific investigations that had the possibility of provoking controversy were scrapped. “[L]ow cost steps ... were avoided, partly to avoid damaging the competitiveness of the meat trade, but also to sustain the illusion of zero risk” (van Zwanenberg and Millstone, 2003: 34)

When the government acknowledged BSE in 1996, they appeared to have been intentionally misleading the public with disastrous consequences for public trust in government and science. This had major ramifications for the FMD outbreak in 2001 (see below)

### ***Policy narratives research questions*** (see Keeley 2001 p. 17):

- What is the narrative?
  - What is the basic problem being addressed – how is it framed?
  - What sources of information or experience helped share this view?
- Whose interests and perspectives are included and excluded?
  - Who does the narrative bring to centre stage?
  - Who gets more power, who gets more resources from this narrative?
  - Whose perspectives and interests are ignored?
- How could this be reframed?
  - If the problem is set up like this, where will we end up concentrating our energies?
  - Which groups need to be repositioned in the narrative?
  - Are there any other ways of looking at the problem?
  - Are there issues being left off the map?
  - How can we make coherent links between these excluded issues, perspectives and groups?
- What might be a counter-narrative?
  - Is the story clear and simple?
  - Does it suggest a course of action?
  - Does it acknowledge complexity and uncertainty?

## 5. Actors, networks, coalitions:

Networks, coalitions, alliances of **actors** (individuals or institutions) with a shared vision (ie. similar belief systems, codes of conduct and established patterns of behaviour), are important in spreading and maintaining narratives through chains of persuasion and influence, which can include journals, conferences, being taught by the same person or informal introductions. Through these networks “norms of good and bad practice are reinforced, research agendas are set, and orthodoxies or conventional wisdoms are reiterated and, very often, dissenting opinions or unconventional views are suppressed” (Keeley and Scoones, 2000: 20).

In the BSE case (Box 1), MAFF, together with politically well-connected farmers and the food industry formed a strong, core actor network. They built a strategic alliance with certain ‘on-side’ scientists, while “dissident experts who publicly articulated their interpretations ... were discounted, disparaged or ridiculed” (van Zwanenberg and Millstone, 2003).

In any given policy domain actor networks are not exclusively confined to state institutions but link up parts of the bureaucracy and government with the private sector, donors and actors in civil society such as journalists, researchers and NGOS.

This means that on the other hand the existence of actor-networks can make for **pluralist** policy-making involving a range of different stakeholders or actors. Processes of negotiating and bargaining between competing interest groups are central to policy making. And networks can also gradually change narratives as well as reinforcing them – as they bring people together who strategise and catch the attention of the right people

Actor networks occur across different scales and national borders. Networks and connections link global and local sites – particularly in settings where national science capacity is weak or under-confident. This is certainly the case in African veterinary policy.

### ***Policy networks, coalitions: some questions***

- Who is inside and outside a policy network?
- Are there alternative networks outside the mainstream?
- How do people and institutions become enrolled into networks?
- How do ideas circulate through a network? (role of connectors, policy entrepreneurs, salesmen)
- What core beliefs define a network?
- Where is the mainstream network strong and weak?
- What new coalitions might form outside the mainstream?

## 6. Political interests

Perhaps it seems obvious that policy is inherently political and contested. But the conventional view of policy in which fact and value are separated (above) denies this. Politics shapes policy processes in several important ways:

1. The **political context** includes factors such as the interests of particular regime authorities to remain in power. Competition also exists between groups in society, based on their differing interests with regard to, for example, allocation of resources, or social interests.

2. The policy process is influenced by a range of interest groups that exert power and authority over policy-making. These influences affect each stage of the process from agenda setting, to the identification of alternatives, weighing up the options, choosing the most favourable and implementing it. The **vested interests** of various actors in policy - government agents, officials of donor organisations, and independent 'experts' - might be served by the perpetuation of certain narratives.

3. Policy is set out as objective, neutral, value-free, and is often termed in legal or scientific language, which emphasises its rationality. In this way, the political nature of the policy is hidden by the use of technical language, which emphasises rationality and objectivity. But **the technical is always in some way political.**

And bureaucrats are not just neutral executors of policy, but have their own personal and political agendas to negotiate. Bureaucratic politics, such as battles within ministries for control over policy arenas, are relevant.

But where do we draw the boundaries between political and technical/administrative issues? For example, land management is often framed purely as a matter of good technical practice. But as southern African experience shows framing issue in this way obscures more political and power laden controversial issues such as land tenure and land reform.

To return to extreme BSE example (Box 1). The then UK government portrayed policy as purely technically driven with consumer protection and food safety as priority and made repeated claims that government policy was rooted in sound science. Yet as we have seen UK BSE Policy makers were aimed at maintaining British beef sales domestically and abroad. Consumer protection and public health were subordinated to an economic and political agenda. Ministers were reluctant to intervene for fear that regulation would undermine confidence in exports.

Thus policy-makers made important policy decisions, prior to soliciting expert advice, and then sought to obtain a spuriously scientific endorsement for those decisions. Recommendations which were represented as based on objective science were in actual fact tempered by political pressure.

In other words, there were strong vested issues in playing down uncertainty and portraying risk as zero or negligible (even deliberate concealment and denial as private veterinarians were intentionally kept ignorant). The supposedly sound science driven policy masked the political agenda (van Zwanenberg and Millstone 2003)

***Politics/interests: some questions:***

- Who is engaged in the policy process?
- How many stakeholders are there?
- Is there political interest in change?
- What is the macro-political context (democracy, governance, media freedom, academic freedom)? + external environment: 'war on terror', EU accession, PRSP processes (i.e. big incentives); impact of key donors
- Are there clear vested interests in this policy area?
- Is the process essentially inside a bureaucracy or outside?
- How much capacity exists within the bureaucracy to reflect on policy aims and management?

- What types of informal relationships occur within a bureaucracy? Are certain ministries or departments dominated by people from one geographical area, disciplinary background, political party or academic institution?
- What is the room for manoeuvre for pushing different ways of doing things (what 'policy spaces' exist?)

The final point relates to the extent to which a policy maker is restricted in decision making by forces such as the opinions of a dominant actor network or narrative. If there are strong pressures to adopt a particular strategy a decision maker may not have much room to consider a wider set of options. There may be times, on the other hand, when an individual has a substantial amount of leverage over the process, able to assert his or her own preferences and mould the way policy choices are considered fairly considerably.

While certainly nonlinear, the policy process, we would argue, is not simply chaotic and down to chance and accident. A combination of these different tools highlights both the complex interplay of narratives, networks and political interests driving policy processes. But they also highlight potential opportunities for action and changing policy

Understanding policy processes through an examination of knowledge/narratives, actors/networks and politics/interests can help with identifying policy spaces. For example, the articulation of alternative narratives is possible where there is a weakness in the articulation of a dominant narrative. This in turn requires identification of spaces within networks [spaces to join networks or key actors in networks that can be enrolled into and alternative network].

Phase 3 of this training programme (at the workshop in South Africa) will turn to a deeper examination of strategies for changing and influencing policy. At this workshop the notion of policy space was introduced. Six types of 'space' were identified

- Invited spaces [e.g. consultations on policy led by government agencies involving selective participation of stakeholders]
- Popular spaces [e.g. protests, demonstrations led by social movements put pressure on formal policymaking]
- Practical spaces [e.g. pilot field based projects initiated by NGOs/fieldworkers, providing opportunities for 'witnessing' by policymakers]
- Bureaucratic spaces [e.g. formal policymaking spaces within the government bureaucracy/legal system, led by government civil servants with selected input from external experts]
- Electoral/political spaces [e.g. formal participation in electoral system allows voting on policy position of competing candidates]
- Conceptual spaces [or discursive spaces, e.g. where new ideas are introduced into debate, and circulated through various media]

Depending on the policy issue, there may be important interactions between such 'spaces', including across scales from the very local to the national to the regional to the global.

### **SECTION 3: Country issues**

Following the overview of policy process themes, participants broke into regional or country groups and brainstormed on what the key policy issues were in their setting. The follow were the results of this session.

#### **Zimbabwe**

1. The need to review existing livestock policy in line with changes resulting from recent land reform and changes in land use and production objectives resulting.
2. The need to learn lessons from past policies. Implementation of policies has not been effectively monitored due to inadequate resources.
3. Policies that safeguard trans-boundary animal health strategies were seen as critical, especially given regional trade requirements and recent disease outbreaks.
4. The relationship between livestock and food security policies.

Several factors were identified as driving the debate. These were:

- Failure to trade.
- Post land reform challenges.

#### **Zambia**

1. Privatization of veterinary services has been a major policy push. This has meant an accelerated engagement of the private sector, with government taking up monitoring and regulatory roles. This has not always worked out smoothly. A review of this experience was seen as critical.
2. Veterinary and drugs control legislation was recently proposed and seen as essential given the new context for delivery of vet services.
3. Trans-boundary disease control was seen as vital to enhance possibilities of livestock trade.

Factors influencing the policy debate included:

- Sustainability of different service provision arrangements.
- The level of private sector involvement.
- Food safety issues.

#### **East Africa (Uganda, Kenya, Tanzania)**

A number of key policy areas were identified:

1. Water for livestock.
2. Marketing of livestock and livestock products.
3. Land use - for different users.
4. Service delivery in the under-served areas.

5. Decentralization of livestock disease control.
6. Marginalization and poor representation of livestock sector in policy processes.

A number of factors were identified which contribute to these policy challenges:

- Under-representation of livestock sector in budgetary/planning sessions.
- Perceived low revenue generation from livestock sub sector.
- Lack of recognition of diversity of livestock production systems.
- Longer time frame to show results from livestock based interventions.
- Poor organization of the producers and traders in the livestock sector.
- Over-specialization of veterinary professionals, and their frequent inability to articulate policy issues effectively.

### **The Horn (Ethiopia, Sudan)**

A number of key policy areas were identified. These were:

1. Veterinary privatisation.
2. Marketing and trade.
3. Centralization vs decentralisation.
4. Capacity to implement policy.
5. Nomadic settlement.

A series of factors influenced the policy debate:

- Socialist history (in Ethiopia).
- Push towards decentralization.
- Requirements of importers in Middle East especially.
- Structural issues in government.

### **South Africa, Namibia, Botswana**

The following policy debates were identified as central:

1. Trade of animals and animal products.
2. Trans-boundary animal diseases (FMD, CBPP).
3. Service delivery (access).
4. Trans-frontier parks.

A number of factors influencing policy were highlighted:

- Traditional/customary priorities.
- Land reform initiatives.
- Land use planning - for crops, wildlife, livestock.
- Economic development priorities - rural/urban etc.
- Poverty alleviation and food security objectives

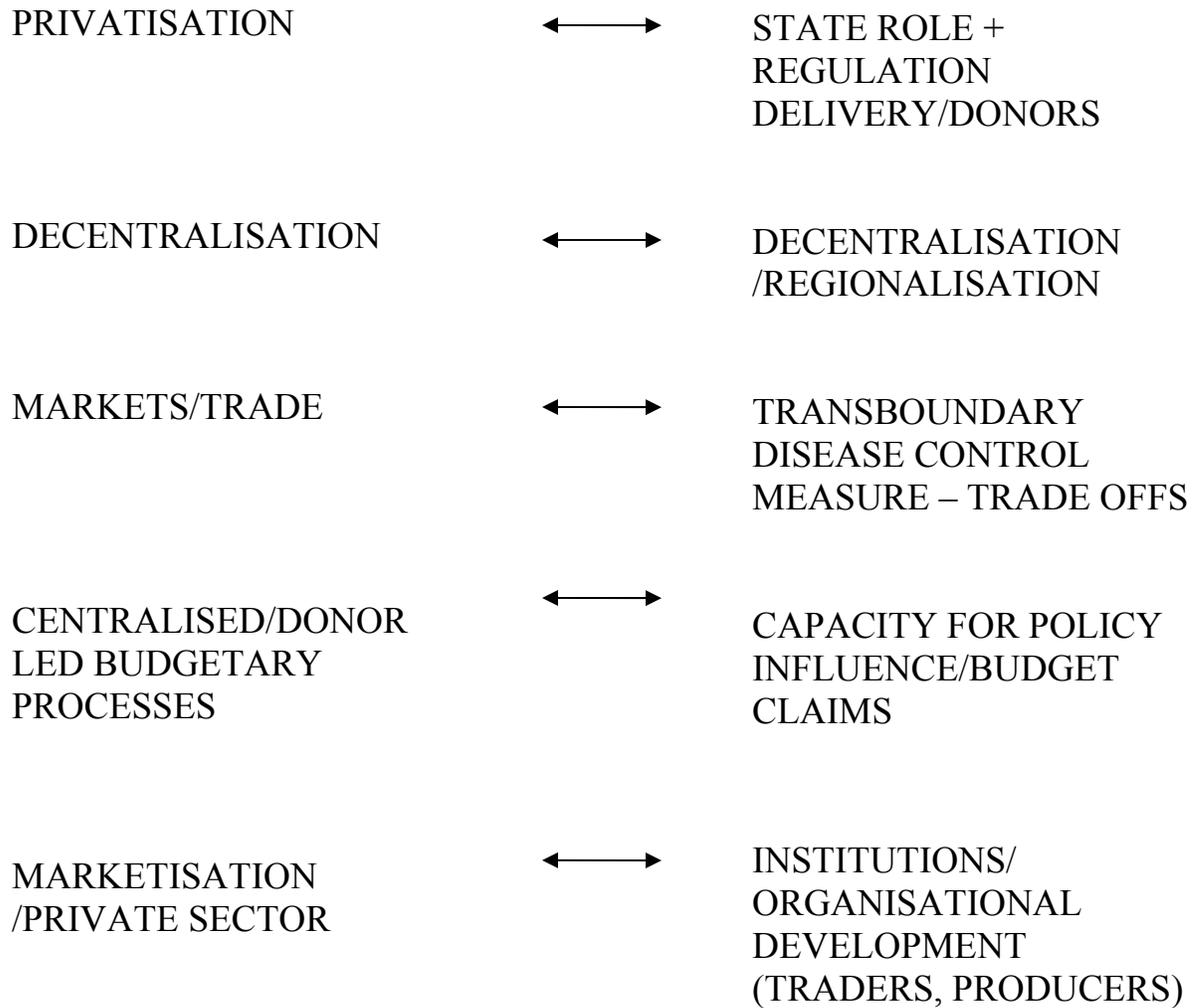
### **Summary**

Overall a number of strategic questions for policy were identified across the countries. These focused on the question: 'what is the vision for the livestock sector'. It was clear from a number of presentations that this strategic issue was not always clear, with conflicting objectives pushing in different directions.

- Poverty/livelihoods: how do livestock contribute to poverty reduction and livelihood enhancement? Is this through trade, or local on-farm production? Or both? What is the role of livestock in contributing to food security strategic objectives?
- Post/Pre land reform: what are the priorities of livestock owners in settings that have recently undergone land reform? Are these the same as in the pre-land reform setting?
- Settlement/movement: How can policy accommodate the need for livestock movement? What is the role of settlement policy in this regard, and how can this be squared with the challenges of ensuring a vibrant livestock sector?
- Forex/markets/trade: How can livestock contribute to increased trade with foreign exchange earning opportunities? How does this focus match with a poverty/food security objective?
- Land use: What are the implications for land use of different visions of livestock development? How are livestock to be integrated with cropping, wildlife management, (peri)urban development?

These broader questions were summarised at the close of the session. The wider question of what constitutes a 'pro poor livestock' strategy/policy will be the focus for one of the opening sessions of the South Africa workshop. Being clear on strategy/vision makes deciding on policy change options easier. In many cases the strategic visions had not been settled. This highlighted a number of important policy trade-offs or tensions, with implications for veterinary services/policy. These are listed in Figure 1 below.

**Figure 1. Trade-offs**



## SECTION 4: Narrative analysis

With key policy areas, trade-offs and tensions identified, the group moved to the first of three methods oriented workshop sessions. This was focused on narrative analysis. Drawing on the questions highlighted in the overview, each group was given a text to analyse. These were drawn from different sources to highlight a dominant narrative on veterinary issues and a) science, b) trade, c) poverty and d) service delivery. The task for each group was to:

- Identify the core narrative
- Identify the underlying assumptions, and whose interests these serve
- Identify (from participants' own knowledge) alternative narratives
- Identify who is promoting these.

### Group 1: Science

Source document: *Reducing Poverty by Eliminating Constraints to Market Access due to Animal Diseases*. Pre-proposal for a CGIAR Challenge Program, submitted to the CGIAR Science Council, August, 2002.

#### *Story Line*

"Poverty alleviation of the rural poor will occur by eliminating animal diseases that constrain local and international market access. This will be achieved by the development of new technologies of diagnostics and vaccines by an international network of collaborative research at a cost of US\$92 million".

#### *Assumptions*

- Development of new (bio)technologies will be successful
- New technologies will reach the farmers
- The eight major diseases are the poor farmers' major problems
- Diseases will be eliminated
- Trade will increase and benefit the poor.

#### *Interests*

Researchers (mostly international) and (potentially) private companies.

#### *Alternative narratives*

- Rural poor farmer's poverty is actually caused by production related diseases (i.e. not the ones identified). More investment should go into controlling these diseases.
- Trade in livestock products could be addressed by food processing and promoting commodity based trade (i.e. disease 'elimination' may not be the constraining factor)
- Trade in livestock products could be targeted to less stringent markets (i.e. meeting OIE standards and EU markets may not realistically be an option). Intra-African trade should be first initiative.

#### *Interests*

Farmers, local traders and national governments would be better served by these alternative narratives.

## **Group 2: Trade**

Source document: Zepeder, C., Salman, M., and Ruppanner, R. (2001). 'International trade, animal health and veterinary epidemiology: Challenges and opportunities'. *Journal of Preventative Veterinary Medicine* 48 (261-271).

### *Storyline*

Trade in livestock/products may result in spread of TADs. A policy assuming zero risk is not defensible. Therefore SPS/OIE requirements are reasonable and science based (i.e. identify acceptable levels of risk). Therefore, trade should be based on science based risk analyses and decisions analysis.

### *Assumptions*

- Epidemiological knowledge (of African diseases) is sufficient to carry out accurate risk assessments.
- Uncertainties are negligible and decision models can be used.
- SPS/OIE standards make sense in the African context

### *Interests*

- Epidemiologists
- OIE collaborating centres
- WTO/OIE/SPS systems and developed countries

### *Alternative narratives*

There are different ways of organising 'safe trade' other than those stipulated by current OIE standards. These involve such approaches as export zones, export systems and commodity based trade. These have different requirements for epidemiological risk assessment, and can cope with uncertainties in different ways more compatible with African disease settings and disease surveillance/response capacity.

### *Interests*

Safe trade for developing countries

## **Group 3: Poverty**

Source document: Perry, B.D., Randolph, T.F., McDermott, J.J. and Thornton, P.K. (2001). *Investing in animal health research to alleviate poverty: Animal healthcare as a strategy for poverty reduction*. ILRI.

### *Storyline*

70% of the rural poor depend on livestock. Livestock productivity and marketing is hampered by disease. Pro-poor research on animal disease can help alleviate poverty directly. Reliance on policies of economic growth that rely on trickle-down benefits may not work.

### *Assumptions*

There is inadequate data on disease occurrence and its impact on the poor. This can be filled by further research. Experts in veterinary services departments, universities and research institutions are best placed to fill this.

### *Interests*

Primarily researchers, although the intended beneficiaries are the poor.

### *Alternative narratives*

- Participatory epidemiology is a sufficiently rigorous alternative to expert-led research on animal diseases which affect the poor
- Decentralised animal health care systems are a means of directly addressing poverty.

### *Interests*

Poor farmers, national governments

### **Group 4: Service Delivery**

Source document: C. McCorkle (n.d.) *Community-based Animal Health Workers: The Story so Far*.

### *Storyline*

A gap exists in veterinary service delivery due to government incapacity, changes in technology and an institutional vacuum. To fill the gap, CBAHW are proposed as means to complement service delivery for reasons of accessibility, simple/short training, low cost, acceptability and use of local knowledge. Therefore, CBAHW should be promoted as a sustainable option for improving veterinary service delivery.

### *Assumptions*

- Local demand
- Legal recognition
- Indigenous knowledge level is similar to livestock keepers

### *Interests*

- livestock keepers
- government/politicians
- CBAHWs employed
- Pharmaceutical suppliers/vets

### *Alternative narratives*

1. People are too poor to pay and the private sector is weak, only government can provide vet services.
2. Livestock keepers who receive only basic training cannot provide accurate diagnosis and use of vet drugs. Only people trained in government institution should provide the service.

### *Interests*

1. Vets and government officials.
2. Vets, assistant vets/technicians.

## SECTION 5: Actor-networks

This section describes some of the results of a workshop session looking at actor network analysis. Six groups were established, each focused on one disease in one region/country. Each group developed a diagram using coloured cards of different sizes to illustrate the connections between different actors, and the networks that formed. Discussions of each actor network diagram highlighted a number of contrasting patterns. The following questions were asked by each group.

1. Who are the key actors? (individuals, organizations)
2. Who are the most important in influencing current policy?
3. How are they connected (or not)?
4. Why?

### Case 1: Rift Valley Fever, Ethiopia and Sudan



This diagram highlighted the importance of the links between the exporting country government, traders/abattoir owners and the exporting country government. Despite a wide array of other interested actors, ranging from international organisations such as as WTO, WHO, FAO and

others, as well as regional/national research organisations, the focus for the policy process - particularly following the ban of livestock exports from Ethiopia to Saudi Arabia was seen to be on the complex inter-governmental political and trade connections. This involved actors including Saudi officials/members of the royal family, abattoir owners and key traders. These interactions were seen to be intensely political, and sometimes not wholly transparent. A clear challenge for the RVF policy process - in Ethiopia at least where the ban persists - is to unpack the different interest groups and seek an acceptable compromise to allow for safe trade in the region. Disease control policies would flow from this resolution it was argued.

## Case 2: East Coast Fever, East Africa



This diagram highlighted the importance of competing control measures for ECF - acaricides and vaccines. Government departments in charge of control in the centre of the policy process were seen to be being pulled in different directions depending on scientific/research advice/interests (e.g. for new biotech vaccines - often pushed by donors and international research centres such as ILRI), existing vaccine producers (e.g. through AU-IBAR) and drug companies in the region producing acaricides. Uncertainty over both the importance and the efficacy of different solutions prevails. Private vets, together with drug producers, have an important influence on what is delivered on the ground.





## Case 5: Avian Flu, South Africa



The South African avian flu case highlighted the immensely diverse array of actors involved. It was clear that this was not just a simple technical disease control issue. Politicians, the media, influential special interest groups (such as pigeon fanciers), big business (KFC, food processors etc.) and environmentalists were all involved. The international dimension - through the WHO etc. - was also emphasised. Pressure on the veterinary department to come up with a strategy was being pushed by politicians who were being lobbied from all sides.

## Case 6: Trypanosomiasis and tsetse control, East Africa



This case highlighted the varied actors involved at an international level, each with a particular view as to how tryps/tsetse should be controlled. With external money each were seen to be pushing a particular line. These pressures were in turn mediated at national level by a range of actors, with the central government ministries being key.

### Overall

The actor network diagramming exercises demonstrated:

- The wide array of actors involved, including some not normally associated with vet issues
- The complexity of the interactions between actors, across scales (from national to global)
- The changing nature of these interactions over time, with some policy debates being in flux
- The push of resources - from donors, commercial interests etc - on policy debates
- The remaining central role of government, but differences within government and the growing role of other private actors - especially in implementation'
- The often highly political nature of livestock disease policy, with power relations being key to many interactions

## SECTION 6: Timelines

This was the final session on methods focused on timelines. These were seen to be useful in:

- Seeing how a policy evolved over time
- Identifying different actors involved, including key champions
- Identifying key moments/policy spaces when things changed (or didn't).

The workshop exercise focused on how the CBAHW debate unfolded in different countries. Three cases were offered

### 1. Kenya

(from: Young et al, 2003: [http://www.odi.org.uk/rapid/Publications/RAPID\\_WP\\_214.htm](http://www.odi.org.uk/rapid/Publications/RAPID_WP_214.htm))

- |          |  |
|----------|--|
| 1970s    | - Professionalisation of public services   |
| 1980s    | - Structural adjustment (Sessional paper, 1986)  |
|          | - Collapse of public services  |
|          | - Paravet projects emerge  |
| Late 80s | - 1988 first ITDG project workshop   |
|          | - ITDG projects: collaborative action research   |
|          | - Privatisation  |
|          | - ITDG Paravet network   |
| 1990s    | - Rapid spread in north, NGO supported   |
|          | - Change in DVS at top, 1992. Reduced support for paravet approach                               |
|          | - 1993 International workshop in Kenya, raised profile   |
|          | - 1994 Kimazi became head DVS, and Kajume deputy director, resulted in shift in perspective      |
|          | - Kenya Vet Board letter, January 1998   |
|          | - The Hubl study, 1998, demonstrated effectiveness of CAHW approach.                             |
|          | - Multistakeholder workshop, 1999 in Meru – new policies outlined. Kajume acting director backed |
| 2000s    | - Change in DVS directorate  |
|          | - Policies still not approved/passed formally  |
|          | - Reduced role of ITDG in livestock/vet sector   |
|          | - Increased regional acceptance of CAHW approaches, support from AU-IBAR etc.                    |
|          | - Kenya DVS draft guidelines for training. New policy framework developed                        |

## **2. Uganda**

1962	Centralized veterinary service
1971	Military regime – collapse in service provision
1980	New government – centralized service reestablished
1986	New government; public services reviewed – liberalization
1990	Privatization; training of CBAHWs
1992	Ministries of Agriculture + Veterinary Services merged. Training institutes established
1996	Constitution advocates decentralization including veterinary services
1998	Vet privatization initiative
2000	Sectoral policies reviewed: recognition of non-profit service providers. Review of regulations attempted
2002	CBAHW training efforts increased with vet medicine faculty and NGOs. Increased harmonization of approach.
2003	CBAHW training curriculum task force established
2004	Dept of Livestock Health establish Community Animal Health unit; private practice seen as central

## **3. Ethiopia**

1940s	Modern vet service, first vaccine produced
1970s	Vet scouts introduced in pastoral areas through World Bank project which paid salaries
1980s	Phase out of World Bank project.. and vet scouts. Socialist Derg government – farmers trained as extension agents.
1994	CAHWs trained as part of rinderpest eradication (PARC/VAC and Govt).
1995	CAHW seen as key to eradication of rinderpest
1997	Evidence of success documented. CAHW idea increases in popularity in policy departments of government. Strong support from Ethiopian Veterinary Association.
2002	Policy established at country level, drafted national legislation, and government proclamation
2003	CAHW Unit institutionalized

## Issues highlighted

These cases highlighted a number of issues:

- **Contexts** – Structural adjustment and the collapse of public services, trends towards privatisation (issues way beyond the vet/livestock sector).
- **Actors** – Key champions (individuals) – in and outside formal policy organisations.
- **Bureaucratic politics** – Opening up and closing down spaces for debate/deliberation.
- **Events/moments** – Political shifts, changes of government can be important ‘tipping points’. Timing is all.
- **Technology shifts** – New technologies may allow a very different set of options (e.g. biotech vaccines, heat-stable vaccines and rinderpest etc.).
- **Focus** – Policy efforts may start in one area (e.g. 'remote', pastoral areas) and move to others (e.g. more core farming areas).
- **Networks** – alliances and coalitions form and reform over time
- **Policy and practice** – practice on the ground (action research) is often moving faster than policy on paper. Practical evidence allows for ‘witnessing’ and policy change.
- **Role of international debate and actors** – international meetings, NGO networks, AU-IBAR. Changing narratives, shifting actor networks, creating spaces.

## SECTION 7: Science policy issues

Focusing on the FMD outbreak in the UK in 2001, and making use of a TV documentary 'Outbreak' (Channel 4), this session focused on two learning objectives:

1. A review of the key features of policy process analysis. Participants viewed the 50 minute documentary and identified: key narratives, key actor-networks and key political interests.
2. A discussion of the role of science in policy. Picking up on the themes introduced around BSE in the opening lecture, a discussion on issues of science, uncertainty and risk in policy was initiated.

The session opened by putting the particular events of 2001 in broader historical context. A timeline was used to demonstrate how:

- Policies being used in 2001 had a long history - since 1839!
- The original policies emerged - just as now - out of pressures from particular interests
- Policies had become embedded in government bureaucracies
- Despite things having changed since the early 20<sup>th</sup> century, policies remained (more or less) the same
- Alternative views on control measures (used elsewhere in Europe) were not considered

### FMD in Britain - a policy time line

1839	FMD first appeared in Britain. But largely ignored by farmers (low mortality, mild symptoms)
1864-66	Cattle plague outbreak. Legislation passed to enable mass slaughter by state, movement restrictions etc.
1869	Application of legislation to other contagious diseases, inc FMD. Pushed by small group of rich influential pedigree breeders. Overriding interests of other farmers less interested in high productivity output. Disease largely died out in subsequent decades.
1910s	FMD returned - slaughter policies applied, and became routine. But not major impact.
1922-24	Major FMD outbreak. Diseased and contact animals slaughtered, compensation paid. Pedigree herds - isolation policy applied. 250k animals slaughtered. 'Primitive' policy criticised.
1923	Govt established Pirbright FMD research station
1920s -	Slaughter policy applied. Import restrictions. Requirements to boil swill.
1930s	Latin American nations identified as source. Diplomatic efforts aimed to encourage control at source.

30s-40s	Vaccine research underway elsewhere in continental Europe. Ignored in UK. Early 30s serum experiments - deemed 'unreliable'
1939 -	WWII - FMD as potential biological weapon. More UK vaccine research.
1940s	Transformation of UK livestock industry post WWII. Increasing focus on high productivity/export based livestock policy, where declines in milk productivity etc. concern. FMD control seen as imperative. Export of slaughter policy/movement control etc, to British colonies.
1952	Major FMD outbreak. Slaughter policy apply, not vaccines in UK. Vaccines used successfully in Europe.
1954	European Commission on FMD established via FAO. Aim to eradicate disease in Europe. UK scientists pushed slaughter policy as method. Pirbright recognised as World Reference Centre on FMD.
67-68	FMD outbreak. 400000 livestock slaughtered. Vaccines not used by Ministry.
70s-80s	Vaccine use declined in Europe as disease incidence decreased. Many thought disease had been beaten in Europe. Greater effort in international arena via trade standards/OIE.
2001	Major UK outbreak, after 33 year absence. Epidemic cost economy £8 bn.

Source: Abigail Woods. [www.chstm.man.uk](http://www.chstm.man.uk)

### **Themes raised by the TV documentary**

Discussion following the documentary centred on the trio of policy process analysis themes, as well as the interaction between science and policy

#### *Knowledge and narratives*

The policy narrative focused on 'crisis' for the UK livestock industry, requiring strong (military-style) response. Strong metaphors and images were used to reinforce narrative: 'raging out of control, fire break'; 'war, battle, fight, frontline, pre-emptive strike'... etc. Narrative about 'stamping out' as the mechanism for control well entrenched in veterinary bureaucracy. A long history of institutionalised practice (slaughter policy) embedded in bureaucracy since early 20<sup>th</sup> century. This is what we do – we must be allowed to get on with it.

Yet such narratives can block out doubt and eliminate questioning (e.g. about alternative control approaches, viz 24/48 slaughter policy vs ring vaccination etc) despite different views in continental Europe, as well as within vet establishment/external expert groups

#### *Actors and networks*

Policy is about networks – who links with who, and with what power (e.g. NFU-scientists-MAFF-PM's office. There are changing axes over time). Science and policy mutually intertwined. Science does not exist in a vacuum: truth speaks to power (Minister of Agriculture, MPs, PM all involved, each seeking different scientific/expert advice).

#### *Politics and interests*

Bureaucratic imperatives (of MAFF) and political/commercial interests (NFU and UK meat industry) vs, other constituencies – farmer livelihoods, animal welfare, small scale ‘hobby’ farmers, tourist industry, human health/water supply etc.

### *Science and policy*

Scientists and experts were used as a political resource (notably the modellers by the Chief Scientist and the PM). Actual decisions were made in relation to other factors (e.g. election dates, public opinion, interest group pressure), and justified by science (in this case the models – which proved to be only partially accurate).

FMD outbreak overshadowed by extreme uncertainty and much ignorance. Yet policy must deal with facts/certainties. Scientists tried to offer assurances to politicians about the course of the outbreak. But clearly no one really knew what was going on.

The assumption of a ‘sound science’ (or particular type of) approach to policymaking laid bare, as surprise always catches up when uncertainties are rife. Suppressing uncertainty meant that the surprise was a big one – with major consequences. If uncertainties had been debated (and openness to alternative interpretations/suggestions countenanced), maybe the outbreak could have been reduced in magnitude.

Public trust in expert institutions – and politicians – was at a low point in the UK (post BSE, GM crops etc.). Politicians saw the need to be assertive, to act decisively and gain public trust (in spite of great uncertainty/ignorance). This back-fired.

There is no one (sound) science. There are multiple traditions of science dependent on experience, training, data, models (e.g. population biology modellers, UK field veterinarians, European vets).

Scientific authority arises in different ways. The models and the power of numbers (despite simplifications) – combined with the good connections of the Imperial College modellers in Whitehall – overrode the practical field experience of farmers and vets on the ground. This was poorly used by the Chief Veterinary Officer, and their concerns were not responded to until too late. The field vets therefore lost out in the struggle for who was the authoritative voice in determining policy.

### **Science and policy: some reflections on the BSE case**

The FMD case had some resonances with the earlier experience with BSE (see above). A paper by van Zwanenberg and Millstone (2003. BSE A paradigm of policy failure. Political Quarterly] Political Quarterly, 2003) was distributed. This highlighted a number of important points about the relationship between science and policy in the arenas which are prone to scientific uncertainty and are highly contentious (i.e. many veterinary policy issues). Their reflections on BSE are thus more broadly relevant:

#### *Concealing policy objectives, misrepresenting expertise*

The objectives of policy were concealed and/or misrepresented, risks were seriously and consistently understated, and the degree to which the available evidence and expert advisers supported these policies was misrepresented....

#### *Understating uncertainties*

Selectively understating scientific (and other forms of) uncertainty is too often a conditioned reflex in government circles, partly because politicians do not want to reveal how poorly informed they often are, but also because they want to close off what might otherwise be seen as plausible and legitimate grounds for contesting policy.

*The pretence of sound science in decision-making*

[there is a need to] abandon the pretence that their decisions are based on, least of all only on, sound science. It will be also necessary to disclose, rather than conceal, scientific uncertainties and differences of opinion.

*The role of scientists*

If scientists are to comment... they need to know what the objectives of policy are, what courses of action are under consideration, and which could be implemented.

*Experts are political too: the need for deliberation*

The solution is therefore not to pretend that experts deliberate in a vacuum or that scientists are indifferent to any and all competing social interests or values, but rather that those considerations should be dealt with in an open and accountable fashion.

## SECTION 8: Case studies

### Case study groupings

The final day was dedicated to the preparation of concept notes by the course participants outlining their proposed case study analysis to be conducted between October and December 2004. It was suggested that the case studies might fall within one or more of the following thematic groupings:

- **Disease focus** – control policies, prioritisation of diseases etc.
- **Trade/marketing focus** – export oriented or informal/local community-based etc.
- **Organisational focus** – restructuring, centralisation/decentralisation etc.
- **Delivery focus** – CAHWs vs professionals, privatisation, willingness to pay etc.
- **International focus** – donor policies, OIE, RECs, African harmonisation etc.

### Methodology

In preparing the case studies certain key techniques will be applied:

- **Sampling** – from a range of different actors to elicit different perspectives.
- **Historical** – time-depth; how does the past affect the present? What are the cycles of policy interest?
- **Triangulation** – cross-checking results with different methodologies; comparing different perspectives.
- **Critical (self) reflection** – recognising that the analyst is also an actor, with views of their own

### An example case study outline

**Research theme:** Understanding the policy processes around FMD control in southern Zimbabwe

#### **Research questions:**

- What key moments have guided policy?
- What have been the guiding narratives determining FMD control policy over the years?
- Who have been/are the key actors pushing narratives?
- How have these actors interacted?
- What are the interests and embedded assumptions/commitments?
- What are the trade-offs between positions?
- What are implications for designing more effective pro-poor livestock disease policy?

**Timeline: FMD in southern Zimbabwe**

1931	First FMD outbreak in country
1970s	<b>War</b> - stock thefts; disruption of animal disease control
1977-83	c.3000 buffalo shot in southeast lowveld
1980s	<b>Export</b> of beef from FMD-free zone to <b>EU</b> negotiated  Growth of safari industry and tourism: Shift to <b>game ranching</b> , wildlife translocations
1990s	<b>Structural adjustment:</b> <ul style="list-style-type: none"> <li>- budgetary constraints to veterinary services means reduced vaccination + repair of fences</li> <li>- increased transboundary smuggling of livestock (Botswana, South Africa, Mozambique)</li> </ul>
1991	Establishment of Save Valley <b>Conservancy</b>
1992	Ban on FMD vaccination in EU  Severe <b>drought</b> [reduction in national herd from 7 – 4.5m]
1994	DVS <b>institutional reforms</b> /restructuring initiated (shift to commercialisation, cost recovery, focus on core functions)
1995	WTO <b>SPS Agreement</b> – Introduction of increasingly strict SPS standards for EU exports(livestock identification and traceability schemes – tagging etc)  <b>Re-introduction</b> of wildlife species including <b>buffalo</b> to conservancies
1996-	Declining ability to meet EU Beef Protocol quota
1997, 1999	FMD outbreaks bordering SVC
2000	<b>Farm occupations; land reform</b> <ul style="list-style-type: none"> <li>– fences become snares [missed by risk assessments of SVC]</li> <li>– theft of energisers</li> <li>– driving of cattle into ranches (and from red into green zones) and settlement inside conservancies, poaching</li> <li>– unrestricted livestock movement; + movement of buffalo/antelope outside of conservancies/parks</li> </ul>
2000-	DVS severe budgetary constraints, staff shortages + ongoing restructuring, fuel and vehicle shortages; shortages of forex to buy vaccines etc further impair capacity of DVS
2001	Great Limpopo <b>Transfrontier Park launched</b> – no formal policy on animal health and disease control  <b>UK FMD outbreak</b> Multiple FMD outbreaks (18 in Mat North, 2001)  EU beef <b>export ban</b> [Further reduction in commercial herd 1.4m – 250,000]
2003-4	354 FMD foci reported nationally, 943 000 head were vaccinated.

## ***FMD in southern Zimbabwe – Policy Narratives***

### **1. 'Blame the game'**

The eradication of game allowed southern Zimbabwe to be put to productive use ('taming the wilderness'). The only solution to FMD is the complete removal of wildlife (particularly buffalo). The conservancies and transfrontier park are a potential biological bridge for diseases.

### **2. Building fences**

'Uncontrolled' people, cattle and game movements are the problem. These need to be controlled and fences are the answer. Fences and zonation (alongside vaccination) allow export zone. Zimbabwe needs to re-establish controls, recapture EU markets and establish larger export zone.

### **3. Creating an ecosphere / wilderness landscape**

'Carrier cattle' not wildlife often to blame. Fences obstruct animal migration trails – free movement of wildlife desirable both ecologically and for lucrative ecotourism/safari industries.

### **4. FMD control not an issue for the poor**

FMD control not an issue for poverty reduction – except in relation to draught power. Scrap movement controls which impose constraints on livestock management and marketing; endemic FMD means cheaper beef and cattle; DVS cattle-bias inappropriate.

Dominant narrative is 2 but 3 becoming increasingly powerful.

### **Actors** (a sample only)

#### **National**

- DVS (esp Field Epidemiology and Disease Control Branch + Veterinary Public Health Branch); Provincial Veterinary Office; District Veterinary Office; Animal Management Health Centres + Veterinary Services Council (stakeholder forum)
- Beef industry: CFU, Cattle Producers Association, CSC
- Government of Zimbabwe Depts: Lands, Agriculture; Environment

#### **Regional**

- Government of SA, Ministry of Environment – pushing TFPs
- Peace Parks Foundation
- Africa Wildlife Foundation
- AHEAD working group
- SADC

#### **Local**

- NGOs : CESVI, WWF
- Communal area livestock owners
- Newly resettled farmers

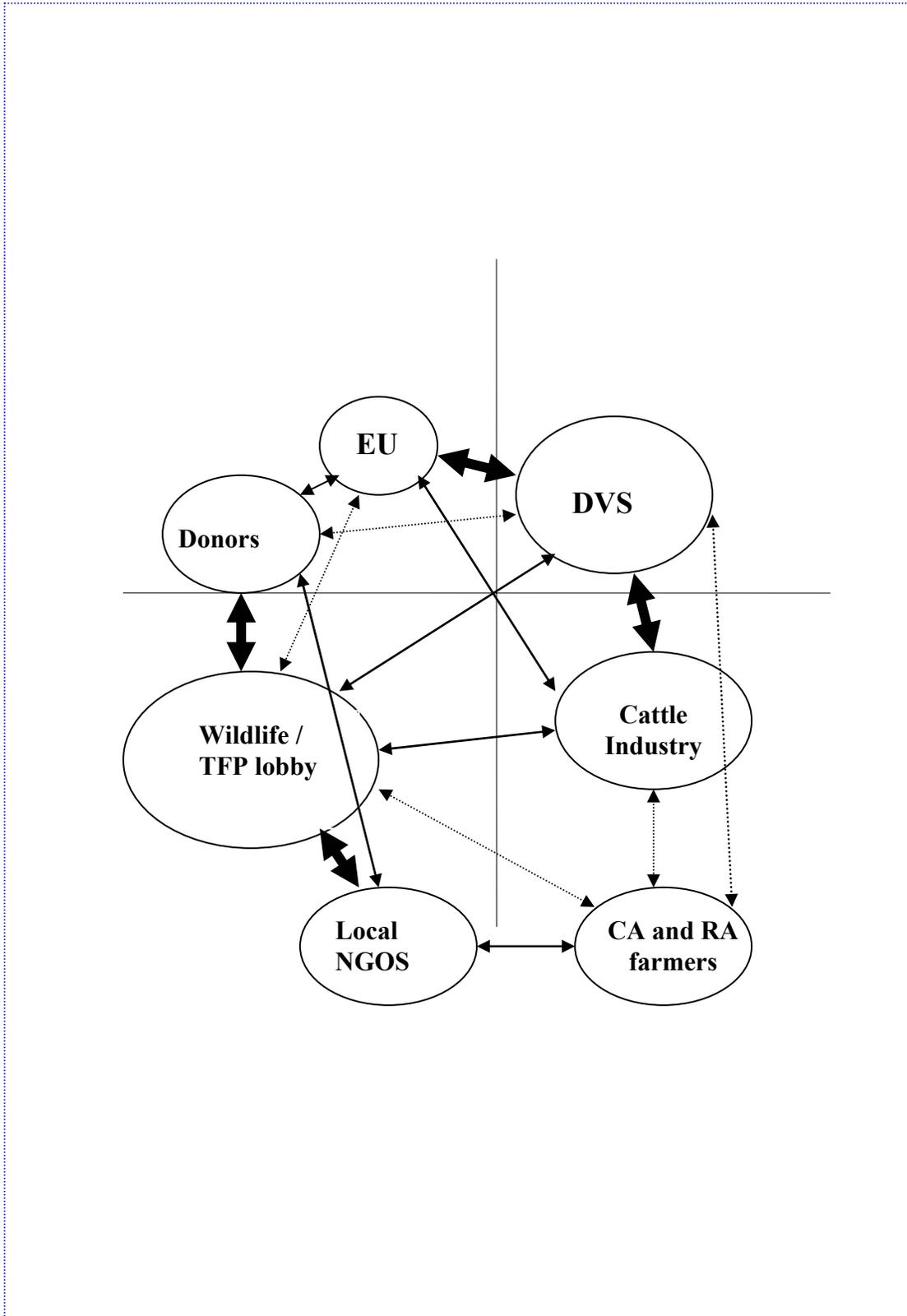
#### **International**

- Donors: DFID, USAID, GTZ, EU

- International implementation bodies: Emergency Prevention System (EMPRES) programme of FAO
- EU regulators
- WTO
- Libya and Malaysia (new beef export markets)

**Network**

Outline of dominant narrative only – connections and proximity to policy



## ***Some interests***

### **Political**

Government of Zimbabwe historic antipathy to non-productive game ranching and desire to redress colonial legacy of land alienation through large-scale land reform. Rhetorical shift to prioritising needs of the poor. Forging new (and 'non-imperialist') links and export markets (e.g. Libya, Malaysia)

South Africa and Botswana governments want to safeguard borders against illegal migrants and livestock diseases

### **Bureaucratic**

DVS remains tied to deeply embedded history of institutionalised practice. e.g ranch bias: 'In the communal sector a whole communal area where an outbreak occurs will be generally considered an infected zone and shall be treated just as a commercial property'

### **Commercial**

TFP/Peace Parks agenda informed by range of interests. Southern African business constituency want to market a massive wilderness landscape and reinvigorate tourism and attract further investment. Open borders to tourists and elephants.

## ***Trade-offs***

- Prioritising beef exports and forex generation with strict control regime vs emphasis on rural livelihoods
- Prioritising beef exports and forex generation with strict control regime vs developing a wildlife based tourism and safari hunting industry based on tranfrontier parks and game conservancies
- Maintaining a healthy and productive communal herd vs encouraging community wildlife management programmes
- Encouraging free movement of wildlife and tourists vs implementing constraints on cattle movements, border jumping and cross-border trade/smuggling
- Providing technical support: focus on beef cattle or on draught animals, small ruminants and poultry
- Clients for veterinary services: large-scale commercial ranchers, A2 small-scale commercial farmers; or communal area livestock owners?

## ***Implications***

- Not simply a technical argument to be solved by combination of epidemiology and econometrics – political issue
- A pro-poor livestock disease policy means getting the voices of Communal Area non-export oriented livestock producers into the policy process

- Listening to these voices might, for example, encourage livestock disease policy to be more geared towards smallstock / poultry production and less towards attempts to recapture EU markets

### Case study titles

<b>Name</b>	<b>Title</b>
<b>Adela Mroso</b>	What are the policy processes around Newcastle disease control for traditional poultry keepers in Tanzania?
<b>Alec Bishi</b>	Understanding the Policy Processes Involved in the Expansion of the Foot and Mouth Disease Free Zone of Namibia
<b>Alice Tembo</b>	CCBP control in Zambia
<b>Andy Catley</b>	Where This Is No Policy: the case of developmental relief in the livestock sub-sector in Africa
<b>Asegid Shiferaw</b>	Trade of Livestock and Livestock Products, Ethiopia
<b>Berhanu Admassu</b>	Understanding the Policy process on regulation of veterinary professional and para-professionals in Ethiopia
<b>Elizabeth Mvula</b>	Understanding the Organisational Rearrangement in the Provision of Animal Health Services in Zambia
<b>Gavin Thompson</b>	Politics of policy at the OIE (tbc)
<b>George Gitau</b>	Rinderpest control policy in Kenya and current status
<b>John Kasirye</b>	Challenges associated with rolling out Community Animal Health Service Providers in marginal areas in Uganda.
<b>Karen Iles</b>	Training methodology in development of CAH services: the case of Southern Sudan
<b>Kidanemariam Awoke</b>	Centralization or decentralization implications on Animal Health services in Ethiopia
<b>Moerane Rebone</b>	Analysis of the policy on the control of Avian Influenza disease in the Republic of South Africa
<b>Mohamed Abdel Razig</b>	Understanding constraints to improve livestock marketing and export in the Sudan
<b>Poncho Mokaila</b>	Bovine Brucellosis Eradication Scheme in South Africa, why is the battle not won yet?
<b>Mulualem Tarekegne</b>	Assessing the policy process of veterinary privatization in Ethiopia
<b>Neo Mapitse</b>	An analysis of Newcastle Disease control policy in poultry, Botswana
<b>Ntando Tebele</b>	“To dip or not”: Understanding the policy on ticks and tick borne disease control in Zimbabwe.
<b>Otieno Mtula</b>	Formulating Livestock Marketing Policy for Poverty Alleviation in Kenya
<b>Ronnie Sibanda</b>	Insights into the policy process of commercial beef trade in Zimbabwe
<b>Rose Ademun</b>	Understanding policy processes for the control of Foot and Mouth Disease in Uganda
<b>Solomon Munyua</b>	Delivery of animal health services: Can other service providers be recognized and accommodated?
<b>Thomas Dulu</b>	Understanding the policy process around CBPP control in North Eastern Region, Kenya
<b>Tim Leyland</b>	How do Eastern and Southern African Regional Economic Communities formulate Agricultural Policies?

## **APPENDIX 1: Outline programme**

### **Day 1 - Monday September 20<sup>th</sup> 2004**

*am*

Introductions: sharing of experience, expectations, challenges

Introduction to policy processes: overview of concepts (narratives, actor-networks, politics-interests)

*pm*

Brainstorming session: key policy issues, trade-offs, challenges, controversies in the veterinary/animal health sector by country/region (including political/governance contexts for policy).

*Group work (method I):* examining policy narratives: what are the assumptions, storylines, implications of different viewpoints on veterinary/livestock policy in Africa? Who are they associated with? Who and what are excluded?

### **Day 2 - Tuesday September 21<sup>st</sup> 2004**

*am*

*Group work (method II):* actors, networks, politics and interests (looking at different diseases - e.g. FMD, tryps, CBPP, ECF, RVF - identify key policy actors involved, how they are connected, and what interests are evident. What actors are well-connected, who are excluded?).

*Group work (method III):* timelines (looking at the evolution of a policy process over time, examining key events, policy spaces and moments: inclusions and exclusions).

*Group work (method IV):* organisational mapping (looking at the organisational set-up of e.g. veterinary service/market arrangements, relationships between different components, power dynamics/force-field analysis etc.).

*pm.*

Video - 2001 outbreak of FMD in the UK

- Reflection on issues of science and policy (risk, uncertainty, trust)
- Reflection on narratives, actors/networks, politics/interests, organisational/power relations

*Evening*

Individual discussions on first ideas for case studies

### **Day 3 - Wednesday September 22<sup>nd</sup> 2004**

*am*

Review of methods and possible approaches to a case study: issues of sampling, triangulation, sequencing etc. in research study design; presentation of example of an outline for a case study.

Individual work: preparing case study outlines

*pm*

Discussion with faculty

Plenary feedback on case study proposals

Evaluation and close

## **APPENDIX 2: Expectations of the course**

### **Individual cards at beginning of workshop**

- Identify gaps in regional policy institutional frame work with regards to livestock health policies.
- Learn from regional experiences regarding animal health policies.
- Learn how to identify policy gaps and how to deal with them.
- Understand various methods acceptable to develop policy.
- Understanding fundamentals of policy evolution.
- Enhance understanding of livestock policy formulation.
- Challenges of having a uniform policy across the region.
- Improved skill on policy formulation and implementation.
- Learn actual development of the policy process.
- How to make and involve role of governance on policy implementation.
- Improved understanding of how to get appropriate and effective policy.
- Understanding policy review/analysis.
- Learn methods of policy formation.
- Identify policy issues that have not been attended to in my country and develop ways of ensuring all areas are covered.
- Be able to identify weaknesses in policies and means of improving on them.
- Synthesis of policy analysis tools.
- Learn how to select and engage grass root stakeholders in policy and legal debates.
- Better understanding of policy process and make use of the process in developing i) livestock development policy ii) animal health policy.
- How to bring about change.
- Development of policy analysis skills.
- Consensus on what are institutions.
- Challenges in the harmonisation of animal health policies.
- How policy spurs livestock development in the region.

- Improved understanding of policy process.
- Acquire knowledge and skill how to integrate policy with practical implementation.
- Role of political economy in policy making.
- Creative effective linkages between different players in policy making.
- To gain knowledge on policy formulation particularly pertinent to livestock and livestock products export trade.
- How to change policies to make animal health service delivery effective.
- Public/Private sector partnerships and the way forward.
- Better understanding of drivers of sound policy formulation processes.
- Be trained on policy issues.
- Learn of successful case studies on policy changes in animal health.
- How to integrate livestock management with environmental protection. Policy options and implementation strategy.
- Exposure to experiences elsewhere on policy issues.
- Qualities of policies that would better promote reduction poverty.
- Veterinary service delivery system be liberalized and decentralized. Therefore we need strong policy alternatives to achieve this goal.
- Learn the policy development process.
- Planning skills improvement.
- Ability to communicate ideas/policies more clearly to all levels.
- A clear framework for doing follow up on case studies.
- Ideas for strengthening AU/IBAR policy reform work.
- Making (creating) appropriate institutions for effective pro poor policy making.
- How to get higher authorities to agree with policy proposal.
- Learn about other countries' experience.
- Clear understanding on how appropriate policies are formulated.
- Policy development (methods).
- Pro-poor livestock development policy process.
- How to accommodate all stakeholders opinions in a policy.

### **APPENDIX 3: Course evaluations**

Overall the workshop was positively evaluated. Average scores (out of 5) for the following criteria were:

1. Use for my work: **4.5**
2. Venue, logistics and organisation of workshop: **4.5**
3. Background materials and handouts: **3.7**
4. Overall workshop facilitation: **4.2**
5. Effectiveness of methods training sessions: **4.0**

In addition to positive comments on both the course content and the way it was facilitated there were some comments requesting further input on the following:

- Poverty focus and policy
- Relationship between institutions and policy
- How to change policy and influence policymakers

These themes will be included in the curriculum for the second course which will focus more particularly on how to change policy towards a pro-poor direction.

## APPENDIX 4: Participants list

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