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# ACTUALIZATION OF STRATEGIES FOR PRIVATIZED PREVENTIVE VETERINARY SERVICES TO NOMADIC HERDSMEN IN SOUTHERN NIGERIA

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*Des stratégies ont été proposées pour répondre aux besoins et aux problèmes de privatisation des Services vétérinaires consacrés aux troupeaux nomades Fulani. Une étude de ces problèmes a été conduite. En résumé, de fréquentes visites amicales des pasteurs Fulani, basées sur une confiance mutuelle ont été réalisées. Les pasteurs étaient interpellés sur les options d'actions de prévention et de contrôle en comparaison aux actions thérapeutiques chaque fois que de besoin (souvent au paroxysme du besoin). Furent considérés à la fois les problèmes nutritionnels et sanitaires.En dernière analyse, les pasteurs préférèrent les actions préventives et étaient préparés à les financer raisonnablement. Les maladies endémiques telles que la trypanosomiase, les helminthoses, la peste bovine et la PPCB étaient prises en considération prioritairement. Les problèmes liés à l'accès à l'eau en saison sèche, à la disponibilité en fourrages et en compléments ainsi qu'aux ressources alimentaires alternatives étaient également avancés. Des rendez-vous à des dates spécifiques ont été proposés pour assurer les campagnes de vaccination et les traitements collectifs. Au cours de ces visites prévues, des vaccinations de masse et des traitements prophylactiques contre diverses maladies ont été effectués. Toutes ces actions étaient coûteuses. L'investissement initial pour le transport, les équipements vétérinaires de base et le logement a été assuré par la «VetAcademic Resource Foundation» (VARF). Il est convenu que la continuation de tels efforts, basé sur les circonstances épizootiologiques des troupeaux migrants et sédentaires résultera en une privatisation effective des pratiques vétérinaires préventives pour les pasteurs Fulani du Nigeria-Sud. Dans de telles circonstances, il est recommandé une stratégie de ce type. Les bailleurs de fonds et les gouvernements peuvent appuyer les Organisations Non-Gouvernementales (telles que VARF) dans l'orientation et l'établissement de jeunes vétérinaires pour démarrer une pratique rurale dans le pays.*

## INTRODUCTION

### DEFINITION OF THE PROBLEM

Nomadic herdsmen are pastoralists who move from place to place with their livestock in search of the natural pasture for the stock and security for themselves and their animals. In Nigeria, such stock usually consist of cattle, sheep and sometimes goats. The country is divided into five grass belts1 - according to the dominant species of pasture grasses in each of the geographical belts. The pastoralists may be transhumant or at least temporarily settled in an area surrounded by possible grazing land. But when there is danger of either disease outbreak or communal strive, they are ready to move at short notice to other regions in the State or country - either for good or only for a while. To be effective, the veterinary service system for such an area must be equipped with at least a strong Motorcycle, or ideally and eventually a four-wheel drive jeep or land rover. Hence the capital investment is often beyond the reach of most young veterinarians - who are otherwise adequately qualified and even motivated to take on the challenge.

### ELABORATION

The fact that the Nomads livestock sometimes destroy crops and crop farms in their daily rounds to glean whatever forage there is around - especially during the dry months - and along their routes, makes them natural enemies of the local crop farmers. As a result, the Nomads themselves are usually quite wary of contact with unfamiliar neighbours - who, as far as they could guess might have some terrible things in stock for them. They therefore view every strange visitor to their kraals (i.e. Gaas) and the surrounding with suspicion. Such is the mien of the nomadic herdsmen and their lives in Southern Nigeria.

In the good old days (as all days when old are good - are gone - s.i.t.m.), the maintenance of livestock health was ensured by government agents. Regular visits for routine vaccinations and interventions were carried out free of charge, except for the usual willing hospitality of the herdsmen to the visiting veterinary officers and their auxiliary staff. Later, livestock extension services were introduced. Would it were Veterinary Extension Services (VES) - for there is a great and important distinction between the two - though yet, those who should, do not seem to know the difference. That is also a problem. Whereas in fact, to the Nomadic Herdsmen - the difference is only too clear. Veterinary Extension Services are more than what strictly merely covers the husbandry component and goes by the name Livestock Extension Services(LES). Whereas, in addition to covering problems of breeds, breeding and genetics, feeds, feeding and nutrition (including watering), management and environmental concerns, VES also covers clinical and preventive measures for animal, human and environmental health problems, and has the means to appreciate, initiate and in most cases undertake the necessary extension, protection and interventions - that would lead to salutary results - in financial, economic and social health terms. That is a key statement. No wonder, the Nomadic Herdsmen - like any other reasoning men would often prefer VES to LES. In fact, this was one of the reasons why the Senate of the University of Ibadan - in 1984, approved a course named Advances in Veterinary Extension Promotion and Delivery (PVM703)2 .

### JUSTIFICATION FOR NEW APPROACHES

With that coverage, the official veterinary system has a lot to do, but was mostly unable to do much due largely to problems of negative aspects of the human factor. Cultural, social and political problems readily erode the

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capacity of Ministries of Agriculture to think aright and perform proficiently in the management of animal health and husbandry problems. Only lip-service was paid to some important aspects of Veterinary Public Health3, and no service at all to humane and preventive veterinary aspects. The situation was in chaos, money was dwindling, political instability was taking its toll, while the animals were being decimated quite fast. The 1983 catastrophic resurgence of Rinderpest was one of the cardinal outcomes of official failures to pay due attention to preventive veterinary medicine practice and veterinary extension services.

At this point, the ideas of privatization, market forces in a free economy, drug revolving loan and subsidy plans were initiated by the Federal Government and the World Bank. But these required input of appropriate physical, social, legislative and cultural infrastructure. This was not easy either. Nevertheless, privatization was already going on - propelled by conditions created by the Structural Adjustment Programme (SAP), leading to intense social stresses. Today, all these things, apparently good on paper, remain - in actual fact - as mere vapourware. Then with political instability and bureaucracy, the system was unable to cope. Recently however, concerned citizens - even though with limited resources, started making moves to meet the crying needs of the nomadic herdsmen - who control more than 90% of the cattle and sheep resources of this country. It is for this reason that VetAcademic Resource Foundation (VARF)4 was founded. Its main concern is the development of human resources that will in turn develop the livestock and related material resources of the country - at the grassroots, in the villages and rural settings generally.

#### OBJECTIVES OF THE STRATEGIES

a. The objectives of VARF in this project is to establish a model preventive veterinary medicine practice - taking care of the usual odds, while achieving desired results in a socially acceptable manner.
b. The mode of operation is meant to be transferable to young enterprising veterinarians in the rural areas. Therefore, VARF aims at producing realistic benefit/cost scenarios that are convincing enough to motivate young graduates towards adopting such strategies.
c. VARF then intends to promote and support the adoption of the strategies by conducting continuing and veterinary extension education seminars and workshops that will disseminate the workability and profitability of tested and proved strategies. This is therefore a development-oriented strategic programme.

## THE STRATEGIES

#### THE HYPOTHESES

i) If we design and present a suitable preventive veterinary practice strategy - based on a deep knowledge and appreciation of the nomadic way of thinking and living - to Nomadic herdsmen, it would be acceptable and supported by them, and they would be willing to pay for its operations cost-effectively.
ii) The health of extensively managed cattle herds in such circumstances, would be cost-effectively and convincingly improved - especially in the prevention and control of preventable diseases such as Rinderpest, Contagious Bovine Pleuropneumonia (CBPP), Blackquarter, Helminthiasis and Trypanosomiasis.
iii) Again, if such a strategy also takes care of the seasonal nutritional requirements of Nomadic Herdsmen, and it could be repeated in other parts of the country - starting from those areas in the same vegetational and ecological belt and extending to other parts with necessary local adjustments - it would go a long way towards solving a major national problem.
iv) A mutually healthy Nomadic Herdsmen - Veterinarian relationship will lead to mutual confidence and benefits - resulting in profitable and sustainable development of cattle production in southern Nigeria.

#### VARFS CHOICE OF STRATEGY

Although various options were considered, the one favoured, chosen and is currently being operated by VARF. was a programme of comprehensive, integrated, social-sensitive and responsive interactive services. Such a system is meant to be centrally coordinated - with appropriate local, regulatory, subsystems of reporting and accountability. It will also have scope for preventive, control and veterinary extension services to the nomadic herdsmen. It would afford young veterinarians the opportunity to get introduced to and learn the art and science of rural veterinary services and self-management. Supporting courses are to be provided by VARF to meet needs relevant to veterinary internship, orientation and motivation for veterinary services to food animal producing villages and rural communities. Some of such courses - already designed should be able to cushion foreseeable effects of frequent political disruptions and violent social changes. It is from the results of some of our findings so far that this presentation is made. This option ensures community-based participation, mutual understanding and confidence. It depends on harnessing the resources of the thought patterns that accept the importance and therefore adopt the principles of judicious uses of biomedical literacy, biostatistical numeracy, socio-economic cost-consciousness and psycho-ergonomic engineering skills and expertise - la modern epizootiologists.

## PROJECT IMPLEMENTATION

The strategy that has been chosen is meant to be tested extensively. A pilot study whose outcome is reported here is the commencement of that extensive study plan. It was designed in such a way that whatever is achieved in the pilot study would be applicable - with minimum modifications - to other parts of southern Nigeria. By southern Nigeria we mean the vegetational and ecological belt along grid reference 7o 45' N of the Equator and below - in the current map of the country. This whole area falls within the Pennisetum and Hyparrhenia grass belts of Nigeria1. The predominant and characteristic grasses in this area are Pennisetum, Pernicum, Andropogon and Hyparrhenia species that thrive in the cleared forest areas and the derived guinea savannah zone of southern Nigeria.

#### THE PILOT STUDY

This project is located within a well known cattle production area of Oyo State - with the centre in Eruwa - which is also the Headquarters of Ibarapa Local Government Area. Eruwa is a growing Yoruba town on geographical

grid reference 3o 17'E and 7o 32'N. It is approximately 72 Km S-W of Ibadan and about 60 Km N-E of Abeokuta 5. By yet unconfirmed census figures of 1991 the population of the entire Ibarapa Local Government Area is 57,014 - with Eruwa forming the bulk of the entire population5. This is a rich agricultural countryside - where both crop and livestock agriculture are thriving - supplying more than the local needs and feeding the nearby large cities like the State Headquarters itself - which is Ibadan. It is typical of the sort of mixtures of crop and livestock agriculture with known interaction problems along that belt.

**ACTUAL SITUATION**

Cattle herds in this area are organized in settlement units (Gaas - as they are called) and are located in all geographical directions from Eruwa township. Altogether, there are 18 cattle settlement areas. Each of these however, consists of between 1 and 11 settlement units. In all, we are dealing here with 72 such units - consisting of resident cattle herds only. The cattle population in each of the 18 settlement areas vary between 53 and 539. However, the number of animals in each of the (72) settlement units varies from 15 to 53 - although there are a few odd ones which are up to 93 head of cattle in size. These figures, however, do not include populations of visiting migrant herds - which are usually larger. The needs of the livestock population area with particular reference to cattle and sheep health and production, may be covered under the following headings: Human, Animal and Environmental needs. The needs of the herdsmen themselves include a sustainable organization that will promote the survival and prosperity of the family unit - while doing their cattle business in peace and harmony with other members of the local community - for some generations. Hence, the various units have come together in settlement areas without devastatingly disrupting events. Their social life is easy. Their economic life meets subsistence needs. Provisions are made for the home education of the growing children in their chosen and established way of life. A few of them send their children to the normal schools in nearby towns and villages. They seem to live agreeably to the nature of their external environment. Many of them are generally happy. They welcome strange visitors with suspicion. But, once friendship is established, they are very hospitable and cooperative.

## RESULT SO FAR

Under the circumstances established, it was discovered that the Nomadic herdsmen are appreciative of and have willingly paid economic charges for such services as chemoprophylactic and chemotherapeutic treatments for trypanosomiasis, acariasis, anthemintics, babesiosis, bacterial diarrhoea, exudative pneumonia, footrot, kerato-conjunctivitis, wounds and even phosphorus deficiency. They are also willing to pay for dehorning, castration and treatment of lamenesses. With news or rumors of a Rinderpest outbreak in nearby herds - they will earnestly demand for rinderpest vaccination. Unfortunately, Governments policy to make such vaccinations free was never backed up by timely provision of the Tissue Culture Rinderpest Vaccine (TCRV). Whereas, the Herdsmen often resist CBPP vaccination; this is probably their natural response to previous vaccinations which were accompanied by severe local reactions at the point of injection. Demand for Anthrax Spore Vaccines (ASP) is often nil. But some may be persuaded to allow the vaccines to be used on their animals. Response to Blackquarter vaccination (BQV) is similar to that to ASV. But once allowed, the herdsmen are often well-disposed to make, at least, token payments.

## CONCLUSION

In conclusion, the chances of privatized preventive veterinary medicine practices being acceptable to Nomadic herdsmen nation-wide are quite high. It is highly recommended that a young veterinarian setting out to establish such a private practice would first need to carry out a realistic feasibility study and produce a report with appropriate guidelines for the take off and running arrangements. This will in tune with VARFs support programme for Human Resource Development and Management6. Regular provision of Government subsidy, incentives, vaccines, laboratory diagnostic support and provision of infrastructure may be all that would be needed to sustain the institutionalization of the recommended practices.

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