

Sustainable Livestock health services In North Karamoja; M4P Model.



By

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Background

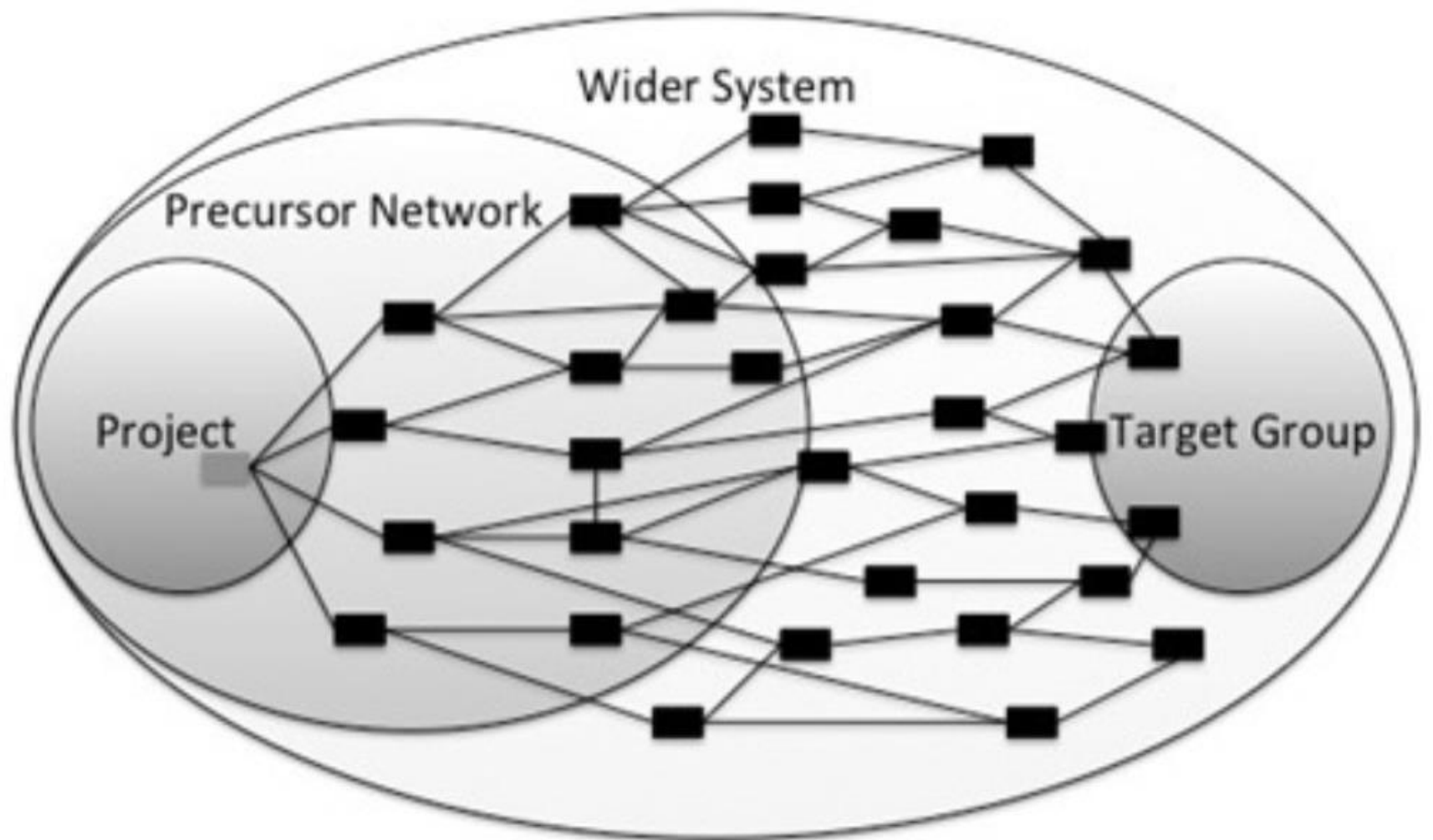
Karamoja; covers 30,000 sq. Km, 7 districts

- ❑ average annual rainfall of 600mm.
- ❑ Prone to frequent droughts; probability of over 60% crop failure.
- ❑ Human population: approximately 1million (Census,2002).
- ❑ Livestock population; Cattle 2,253,960, goats 2,025,300, sheep 1,685,500, chicken 1,362,820, pigs 58,360 (livestock census 2008)
- ❑ Only 7 qualified vet surgeons and less than 20 para-vets (2011), extremely low livestock/vet ratio.
- ❑ the region has 2.4% of Uganda's livestock

Background...

- ❑ Livestock contributes 20% of total agricultural output, Behnke & Nakirya (2011)
- ❑ Decline in livestock production productivity; *raids, Kraal system, diseases, poor vet services supply model (access & affordability), no regional pharmaceutical distributor, ungainly vet drug supply chain, few drug shops with low operational capacity*
- ❑ Supply models of veterinary drugs; NGO-Community support (22.6%), Private Veterinary Practitioner (16.1%), CAHWs (9.7%), Community Animal Health Workers Association (41.9%), Duka (3.2) and a fast growing black market drug dealers

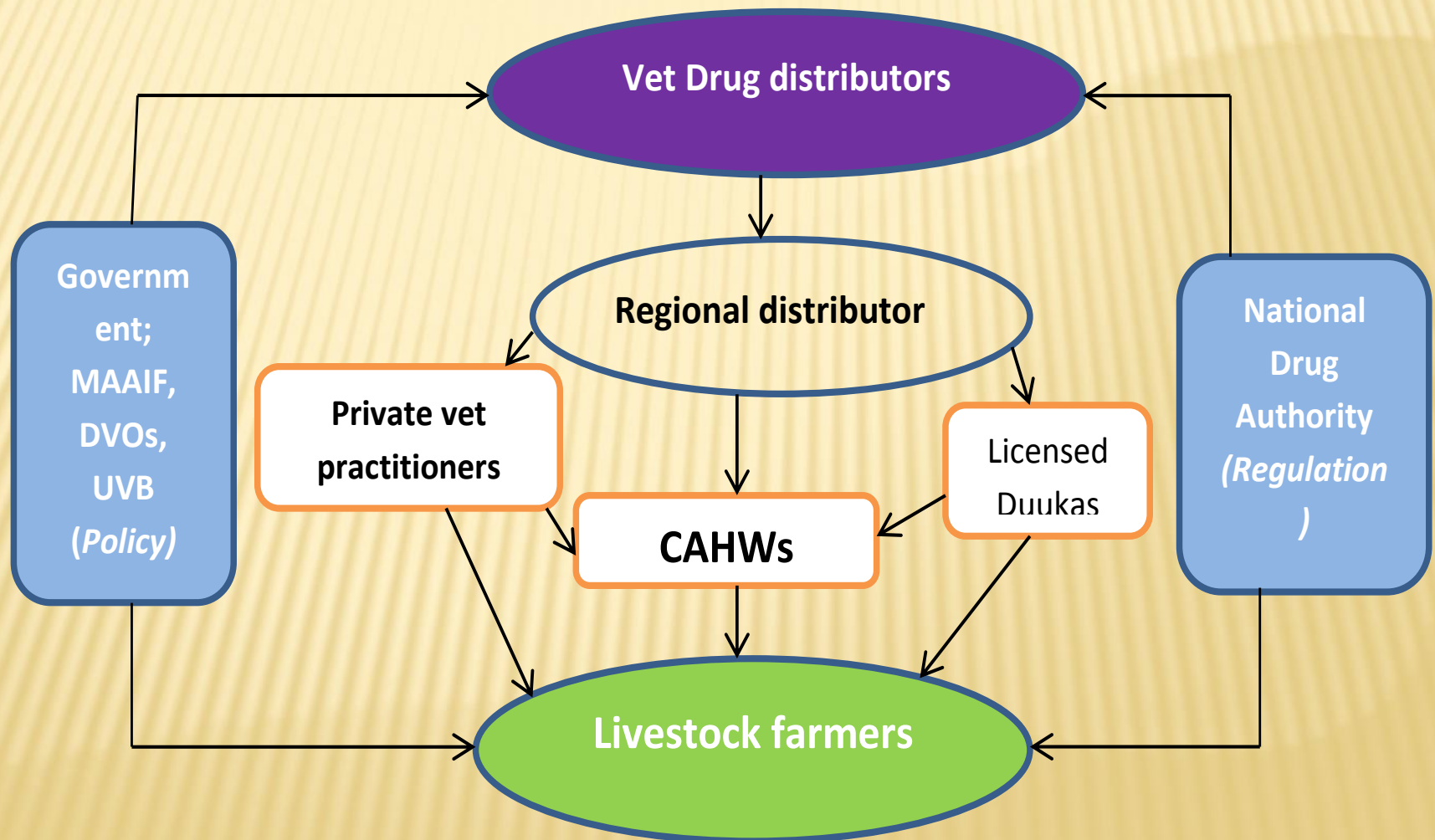
m4p model



m4p model

- ❑ Sector holistic system approach; institutions, processes, factors, agents and their actions
- ❑ Market oriented services; cost sharing and full payments
- ❑ Sensitivity of external environment; actor's actions and reactions
- ❑ Indirectness and depth of impacts; un intended results
- ❑ Private sector led growth but government regulated
- ❑ Business to business (B2B) relations; linkages and networks
- ❑ Partnerships; drug distributors, MAAIF, local government, drug shops, local government, civil society, SACCOs, MFI, NDA, vets
- ❑ Financial inclusion; strengthening SACCOs
- ❑ Filling knowledge gaps; financial & records management
- ❑ Gender inclusion

Community based commercial livestock health services model



Challenges

- ❖ Dependency syndrome, “*akoro*”
- ❖ Allowances syndrome; local government
- ❖ High expectations
- ❖ Social constraints; beliefs & perceptions
- ❖ Free supply of vet services/drugs by NGOs
- ❖ Infrastructural bottlenecks; social and physical
- ❖ Conflicting NGOs’ philosophies; 30+ NGOs
- ❖ Gov’t; bureaucracy, delayed processes
- ❖ M4P approach; Unique, pioneer, invisible results

Opportunities

- ❖ Coordination & collaboration among dev't agencies
- ❖ Security(disarmament,settlement,resettlement)
- ❖ Growing number of vets/Paravets
- ❖ Embedded credit finance
- ❖ Coping livelihood strategy; agro-pastoralism, community solidarity systems
- ❖ Budding, robust private sector
- ❖ More \$, 30+ NGOs & INGOs
- ❖ Flexibility of USAID in programme designs
- ❖ Learner-centred program design

Lessons

- ❑ Local solutions for local problems
- ❑ Continuous cultural analysis; systems are dynamic
- ❑ Bottom-Top & dynamic programming approach
- ❑ Donor flexibility
- ❑ Too many cooks spoil the gumbo
- ❑ Quid pro quo; incentives and motivation
- ❑ Private sector driven growth, high spillover impacts
- ❑ Local ownership of the programme and programme benefits
- ❑ Clear exit strategy; NGOs
- ❑ effective animal health system; sustainable restocking

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