Including Voices of the Poor*

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*Including the Voices of the Poor: Developing a decision-making framework for livestock disease prioritisation and the uptake of animal health technologies by poor livestock keepers.

Project Dates: Oct 2002 - Oct 2005

Executive Message

- There is now a concerted effort to direct livestock development research activities at poverty alleviation but little information exists on that groups priorities and specifically on which parameters are important to the uptake of animal health technologies.
- This project aims to create an integrated, animal health prioritisation framework, which is directly based upon the issues and problems outlined by poor livestock keepers themselves in India, Kenya and Bolivia. The project will produce a decision-making tool, an assessment of socio-cultural constraints and promote communication links useful to poor families.
- Project scientists have found that priorities for animal health differ significantly between the poor and experts. Priority differences also exist between women and men and between income levels groups within communities.
- 'A computer-based learning aid for farmers The Livestock Guru' has been developed to help poor Indian farmers to identify key diseases and obtain prevention and treatment information. The format is being adapted for Kenya where it will become the 'Daktari'.

Background

In recent years those involved in development have recognised the need to prioritise efforts in order to increase the impact of activities on poverty alleviation. There is now a concerted effort to direct livestock development research activities at poverty alleviation but there are a number of potential stumbling blocks.

First, little information exits as to how the poor prioritise livestock-related livelihoods in general or livestock disease more specifically. Secondly, the parameters important to the uptake of animal health technologies are often not known.

Objectives

This project addresses the lack of information on prioritisation by the poor and parameters to knowledge uptake by aiming to create an integrated, animal health prioritisation framework, which is directly based upon the issues and problems outlined by the poor livestock keepers themselves.

The framework will be in 3 distinct, yet linked, parts.

1. A decision-making tool will be created to enable livestock development practitioners to more effectively prioritise the needs of poor livestock keepers and hence improve the potential outcomes of animal health research and development.
2. An assessment of socio-cultural constraints to the uptake of specific animal health technologies in Kenya, Bolivia and India will take place so that researchers can modify present and emerging technology development.

3. The research will promote and enhance vertical communication pathways in which the voices of the poor can reach decision-makers.

**Highlights**

1) A decision –making tool:
**Developing a Framework for Prioritisation:**
Activities compared the findings of a previous project (R7359 *Delivering veterinary services to the poor.*) to other work on prioritisation. The analysis has demonstrated that there are large differences in livestock disease reporting between the experts and the poor as illustrated in the table for India below (Fig 1). Equally, there are further differences among income groups and genders. Hemorrhagic Septicaemia (HS) is ranked as a more significant problem by the better off, while diarrhoea was more important for the poor. Women prioritise livestock diseases that impacted household income i.e. mastitis; whereas, men tended to rank diseases with high mortality rates. Hence, the analysis has revealed the wide differences in perceptions and opinions of the different stakeholders.

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**Figure 1 Disease Priorities reported by different groups in India**

<table>
<thead>
<tr>
<th>The Poor (n=1314)</th>
<th>The Vets (Ram Kumar, 2002)</th>
<th>The Experts (Perry et al., 2002)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. FMD</td>
<td>1. Reproductive disorders</td>
<td>1. FMD</td>
</tr>
<tr>
<td>2. Diarrhoea</td>
<td>2. Mastitis</td>
<td>2. Reproductive Disorders</td>
</tr>
<tr>
<td>3. Fever</td>
<td>3. Digestive Disorders</td>
<td>3. Toxocara Vitulorum</td>
</tr>
</tbody>
</table>
Other activities include the following:

**Literature Review:**

A literature review of Existing Prioritisation Frameworks has been undertaken but tends to be bias towards human health at institutional level as that is the only information available. The literature makes a distinction between activities with a single objective vs multiple objectives. However, few prioritisation efforts have attempted to include the process involved.

**Disease prioritisation model**

The following model (figure 2) details the basic outline of disease prioritisation. The objective of the model is to relate household livelihoods to the poverty line and hence the impact of diseases and potential interventions. In this manner, the model attempts to offer evidence as to the poverty impact of livestock diseases identified by the poor as important.

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**Figure 2 Disease prioritisation Model**

2) An Assessment of social cultural constraints

Data Collection

So far 250 poor livestock-keeping households have been interviewed in Kenya. Stakeholder consultations have also been started.

3) Promoting and enhancing vertical communication pathways:

Developing a Communication Platform between Stakeholders:

‘The Livestock Guru’: A computer-based learning aid for farmers.

During 2002/3 significant progress has been made on the ‘Livestock Guru.’ The Guru will enable farmers to both identify key diseases and obtain prevention and treatment information. Implementation of the Guru will enable farmer’s choices and preferences to be detailed to decision-makers in a neutral manner. At present, the Livestock Guru is undergoing further development with new priority diseases added. The project is collaborating with an AHP-funded project in Pondicherry, India where the Guru is currently being field-tested. The format is also being adapted for Kenya where it will become the ‘Daktari’.

Next steps

The next part of the project will see major steps towards completing the decision making tool. Two major outcomes are expected.

- First, by completing the data collection activities in Kenya and Bolivia, primary information will be available regarding how and why poor households prioritise specific diseases and factors preventing or supporting the uptake of animal health technologies. This will help planners identify appropriate policy and practice.

- The second group of activities will assess appropriate strategies to help communications between decision-makers and the poor.

Dissemination

Selected Publications

Project findings were presented at:


Italy: Global Initiative on Livestock Services and the Poor, IFAD, Rome (March, 2003)

Target institutions to disseminate outputs

FAO Pro-Poor Livestock Policy Facility.
USDA/USAID.
Tufts University School of Veterinary Medicine. Rajiv Ghandi College of Veterinary and Animal Sciences, Pondicherry, India.
University of California, Davis School of Veterinary Medicine.
University of Nairobi, Faculty of Veterinary Medicine, Kabete.

Community level dissemination

Poor livestock keepers in Pondicherry, India are participating in field testing of the Livestock Guru in India and further testing is planned in Kenya of the Daktari.

Further collaborative links have been forged with the following NGO/CBOs for the field activities in Kenya:

- a. Mathare Outreach Centre, Nairobi
- b. Shirikisho Youth Group, Nairobi
- c. World Vision.
- d. Action Aid.
- e. Heifer Project International.

Selected Publications