Community Animal Health Worker Programme Best Practice Guide

Contents

Purpose of this guide

This will be a book/manual for facilitators with context, not a paper and to be translated to Zulu

1. Community Animal Health Worker Programme Overview

Purpose of a CAHW Programme

A community animal health worker (CAHW) is a specially trained local community member who helps farmers to raise healthy animals to maximise their benefits. CAHWs have a wide range of tasks to perform, like providing basic preventive health care, training and advisory services. Through regular household visits, they provide a critical link between farmers, livestock associations, local government offices and state vets. Various names are used interchangeably for CAHWs such as community livestock workers (CLW) or Para-Vets. The primary purpose of a CAHW programme is to help prevent animal mortality and disease outbreak while increasing productivity.

The Need for a CAHW programme

There are three primary factors leading to the need for a CAHW programme. These are the positioning of state vets, the cold chain process and farmers' limitations.

Limitations of a CAHW Programme

- 1. Limitations-a CAHW is not legally allowed to inject or dose a farmer's animal for profit. But he/she can charge for diagnosing and selling medicine to the farmer. This is South African law around veterinary practice and professionals charging for their skills.
- 2. Control diseases and zoo-onic diseases by their very nature are contagious and should be referred to vets.
- 3. Referrals-a CAHW identifying or suspecting a controlled disease outbreak or a zoonic disease must by law inform the state vet. Where there is an outbreak of a disease or condition that falls outside of these that the CAHW cannot identify what does not know how to treat they should initially request support from the state vet and production officials and if this is not forthcoming should take this issue to a private vet to try and get help.

The positioning of the State Vets

The state vets in South Africa have a very formalised role in terms of livestock health. They were set up based on legislature based on controlled diseases and their oversight of these controlled diseases. State vets are not responsible for animals that don't have controlled diseases. And these controlled diseases Rabies, Anthrax and Foot and Mouth. In this situation it is obvious that farmers cannot expect formal Veterinary support at a home or village level.

There are systems built around the monthly dipping at dip tanks of cattle but this does not cover any of the other livestock and does not include anything about antibiotics and nutrition or general health of any livestock.

Dr Modisane said that of the 2 400 trained veterinarians in South Africa, only 215 were working for the State, and very few of them were operating in rural areas. Dr Mulder said it cost the state R260 000 per annum to train a veterinarian, which was more expensive than the training required for a medical doctor. Veterinary and Para-Veterinary Professions Amendment Bill June 2012

Cold chain

Intrinsic to efficacy of veterinary products is a working cold chain, at the very least, from the drug manufacturer to the nearest shop. There should also be robust system of getting these products from the shop into the animal with some guarantee they are still active when used on the livestock. Currently outside the commercial sector and major towns, this cold chain does not exist for either the state or the farmer. Thus, regardless of how willing a farmer is to embrace veterinary interventions, the inability to get medicines in a viable state into his animals diminishes any possibility of the success of these interventions.

Farmers do not have critical mass of livestock as a result they cannot buy medicines appropriate there livestock numbers so have expired medicines or don't buy at all as they can't justify the purchase of a 100 dose bottle for 12 cattle.

Farmer's limitations

Rural African farmers and livestock keepers are generally older members of a community (to have amassed cattle or goats, it would some years). The literacy levels in this age group at not sufficient for people to read labels and work out dosages.

There is not a good culture of farmers investing in livestock or paying for interventions.

As a result of farmers not having access to affordable veterinary interventions, there is:

- High kid mortality in goats of up to 50%
- There are frequent outbreaks of New Castle Disease of chicken flocks across these rural areas. There are many avoidable mortalities in cattle.
- One of the stated reasons commercialisation never takes off because farmers never get a feeling of security or control of their livestock mortality.

4. Community Dialogue and CAHW Selection

A first step to starting a CAHW programme is the selection of the right people to fulfil this important role. Community dialogue and selection guidelines are key to ensuring this is done properly.

Key Selection Guidelines

- Able to read and write
- Trusted within the community
- Currently unemployed
- Over 18 and preferably under 35
- Interest in livestock and preferably has animals of their own
- Physically fit and energetic
- Emphasis towards women

Experience shows that regardless of societal rules around the livestock, young woman are often better than young men in these roles. As such, it is worth making sure that at least one of the CAHWs selected in the community is a young woman.

It is better to start with double the number of CAHWs you will need because there is a high attrition rate related to marriage, finding a job or realisation of what the job entails. Therefore, having a pool

of possible CAHWs that the community can fall back on is quite useful. The end goal is to have one CAHW per 100 farmers.

5. Census as a Starting Point

Very few of the areas that CAHWs will be expected to work in have good data sets on numbers of farmers or their livestock. It is thus imperative that to start this process the state agencies, the local community, and the CAHW agree on a baseline survey format so as to have a clear idea of the livestock that are expected to be worked on as well as their owners. After the format is agreed upon, the CAHW will undertake collecting the required information in the baseline survey as the starting point in his/her work. If it possible, it would be worthwhile to collect this information in collaboration with state structures.

In addition to collecting information on livestock numbers, this baseline must also collect the following information for the area: shops providing medicines, livestock association contact information, dip tanks, private vets and government services and staff. Common and notifiable diseases should also be collated and discussed with the farmers as these will inform any animal health intervention. A sample baseline is available on the Mdukatshani website under the CAHW tab.

This baseline survey should be followed up annually with sampling in areas of interest that the practitioner has but will show assumed trends across the whole group so as to also get a sense of how much change there has been in livestock numbers, herd sizes, and services that support the farmers. The ongoing annual surveys will also provide important information on trends in livestock sales and changes in marketing systems.

6. Community dialogue

In all these cases of initiating or creating a CAHW programme, the field worker must formally meet the body or system that controls livestock processes in the area. Generally, experience tell us that these structures are set up for cattle owners which are predominately male and older members of society. It is with these assumptions that the following processes are suggested.

CAHWs must be chosen, 'owned' and managed by the community that they will be servicing. This can often be difficult as the perceived leadership in any particular area will often try and choose family members rather than those who are known to have interest and ability in livestock management.

Case study- The most successful structure representing livestock owners in rural areas so far in South Africa has been livestock associations that were set up by the state and are quasi-independent. The livestock associations meet every month. The farmers who belong to the association pay annual fees that are used to facilitate their meetings and pay for transport for the EXCO structure. EXCO coordinates with the Department of Agriculture, including state vets, on accessing state infrastructure like dams and dip tank rehabilitation as well as fencing. They also coordinate monthly dip days for their members and coordinate getting medicine for these dip tanks. They also work closely with the Vet Department on getting lumpy skin, anthrax and Blackquarter vaccinations. They are responsible for coordinating with the livestock theft unit of the SAPS around the stock theft as well as branding and tattooing. They appoint a person who will be the only one allowed to provide tattooing and branding for the farmers in that area. They justify this as a way of preventing farmers branding cattle that don't belong to them. To this end the Department of Agriculture has provided

them with branding irons as well as registered a dip tank mark for every one of the 1600 dip tanks in KZN.

Based on this case study, it is advisable for the CAHWs to have a strong relationship with the livestock cooperatives. The only weakness to this dip tank system with livestock cooperatives is that they are almost exclusively for cattle owners who are dominated by older men. Thus goat owners who are often largely woman as well as chicken owners are left out of both communication thinking and support of any type in the structures. The CAHWs will often be servicing these people who are not part of the livestock Association.

7. CAHW Relationships

- a. Livestock owners- the CAHWs are essentially responsible to the livestock owners in the area they must have been chosen by them and should be held responsible by them. The CAHW thus needs to be trusted and available and known by the whole community so that any individual farmer can get hold of the CAHW and get them to come and work on the livestock. The CAHW is not a paid person who is responsible who is responsible for all the livestock in the area. They are providing services for a fee to people who are prepared to invest in their livestock. Implicit in this is that as the CAHW does not provide blanket coverage to the community the members that use the CAHW must pay for this particular service.
- b. Livestock Associations (Responsible Livestock Body) whether formally constituted or not, should be the managers of the CAHWs who decide the strategy that the particular area will use in both deploying the CAHW, how the payments for the medicines will be connected, what the CAHW can charge for its services and making sure that the CAHW has enough work to sustain them. They also needs to make sure that the CAHW has had sufficient training and that the CAHW gets refresher courses. If the CAHW is not working has another job or has become problematic for any reason it is thus livestock Association that needs to take it on themselves to find a replacement and replaced this particular CAHW.
- c. Department of Agriculture- the Veterinary and Production support staff from the local DOA offices are responsible to provide training and support to the CAHW and to assure the attendance at monthly dip days. The governmental staff should use them to support the government staff in dipping, vaccination and treating and use this as an opportunity to check them in the proficiency in these fields. The CAHW must be used to support Departmental communication to farmers and must be used to report on disease outbreaks, control diseases and particular problems that they have been unable to resolve. If and where possible this Department should also use the CAHWs to extend and support the vaccination campaigns. Lastly the Department needs to maintain oversight and feedback to the livestock Association and the shop owners that the shops have medicine that is within sell by dates, maintained within a cold chain and is in quantities and types that are useful to the farmers.
- d. Department of Agriculture- Animal Production section staff must support the CAHWs in providing training either themselves or through a third party in veterinary and production issues around livestock they should work together in the field meeting

farmers and supporting initiatives and programs. Unresolved production issues should be brought in by the CAHW to the technicians who should then be able to provide answers that the CAHWs can take back into the field.

e. Private Vets-There are very few private vets that service the rural areas. Nonetheless, there is definitely a need to formally link with them at one level so they do not feel undermined but on another level so that their professional skills are used efficiently by farmers. The CAHWs should have a referral system between themselves, the farmers and the vets where they are able to take problems that are unsolvable at a local level to the local vet for support answers or treatment.

Alternative Livestock Support Structures- A CAHW needs to have access to community members that are not represented by the Livestock (Cattle Dip) Association. The simplest way to do this in communal areas is to use the dominant social political structure that is already present. This could take the form of the tribal authority, civic body, political councillors or NGO. Often there is tension between these structures as they feel they are competing for the same audiences. Often livestock issues are hot button issues in communities because of herding and stock theft. This is another reason why these structures need to be brought into the CAHW programme.

- f. Local Project Leadership- where the CAHW programme is a multi-stakeholder process, it is necessary to have a coordinating committee. If there are more than one party supporting the CAHWs it would be useful to have a co-ordinating committee so as to mitigate conflicting interests and positions towards the CAHWs.
- g. Minicipality-if the ultimate goal of the CAHW programme is that these CAHWs become small businesses then the local municipality must be on board from the beginning so as to support the small businesses in the long term institutional support. The municipality also needs to see them as a first step in creating value chains around livestock for that particular area.
- h. Agrivet shops-most small towns have a particular shop or shops that do sell some veterinary equipment. Relationships need to be built between these shops and the CAHW in terms of guarantees of efficacy and volume and supply demands. A further incentive to this relationship would be an agreement involving the local DoA officials guaranteeing the supplies' efficacy.
- i. Animal Health Product Companies (e.g. Intervet) the major veterinary medicine suppliers need to support the agri-vet shops in the local towns by creating innovative ways to support the cold chain from the wholesaler to the farmers home. They need to have information days. As well as advise on appropriate dose sizes and provide dosage tools like weight belts.

8. CAHW Primary Role

- 1. Create a baseline of animals in the area
- 2. Manage livestock registers (annual counting of randomised sample)
- 3. Give advice regarding medicines and vaccines

- 4. Bulk buy medicines and sell to farmers
- 5. Maintain the vet kit for that particular dip
- 6. Maintain a recording system of treatments, dosage and interventions
- 7. Keep farmers updated on vaccination calendars and strategic medicinal interventions (e.g. anthrax, blackwater vaccination campaigns)
- 8. Provide basic animal health care at dip-tank level
- 9. Assist in disease surveillance (early detection)
- 10. Promote Animal identification through tattoos, ear tagging and branding
- 11. Provide grazing management skills towards feeding during winter bottlenecks
- 12. Provide support around breeding and selection skills
- 13. Provide the service of castration and dehorning
- 14. Mobilize farmers around marketing and value adding
- 15. Mobilize farmers to provide animals at times of sales or auctions
- 16. surveillance and reporting of controlled diseases
- 17. Provide supportive role to Departmental Technicians on dip days and veterinary campaigns
- 18. Provide theme day trainings at dip days and other gatherings

9. Management of Community Animal Health Workers

- a. An agreement would be entered into with the CAHW that would cover aspects not excluding amounts to be charged for work done, responsibilities and reporting systems, job descriptions, ownership of the vet kit. This agreement should be signed by the CAHW, the community representatives and department officials.
- b. Training the training of the CAHW can be done in three sessions of three days each with the third day each session being a practical in the field. At which, with each student gets tested on the skills that they have learnt. Each set of trainings will cover a livestock group. This curriculum is based on covering all the topics in the MRDP Animal Health Book which is available for free from the Department or on the Internet at www.mdukatshani.com on the downloads tab. Refresher training should be conducted quarterly in three day sessions.
- c. Quality Assurance-The state veterinary technicians should be at these trainings. The training must be done by a registered trainer following the curriculum. A competency book needs to be kept for each CAHW and this needs to be filled in and signed at each and every training. This book can be presented as proof of training is done and trainings passed to anyone who wants to see it. It is also imperative that the CAHWs do not get trained by only one training institution or body but also get trained by departmental officials and separately veterinary control officers. This gives an opportunity for the trainers to pick up discrepancies in trainees abilities. It also creates a better trust in these people if they have been trained and have passed trainings set by different institutions.
- d. Reporting-reporting should be to the structure or institution that chose them and represents the community. CAHWs need to also be present and report on training and interventions at dip tanks and livestock association meetings.
- e. Mentoring- A CAHW should not be allowed to practice without a period of mentoring. This mentoring of the CAHWs should be done by either staff from the NGO or government department that initiated the process and should involve being in the field with the CAHW and watching them work and giving them a formal feedback session of what was seen in the field with a follow up of training specific to any problems that were noticed.

10. Sustainability of CAHW Programme

- a. CAHWs are not state officials. They must be either private small businesses or an extension of livestock Association support services. Various models have been tried internationally on how to fund them initially as well as over the longer term. The most successful of these has been where farmers pay for the services on a dose by dose basis and they essentially run as micro businesses.
- b. An initial kit needs to be acquired to go with the training process this kit should cover the basics of what the CAHWs expected to do but what should be kept in mind is that the more complete the kit the more likely it is that the CAHW will be able to be self-sustaining. The non-consumable parts of the kit needs to be negotiated case by case with the structure that is overseeing the CAHW. These parts have a finite life span and will need to be replaced. The consumables need to be replaced either by the group that is being serviced or the CAHW through payments through dosages. The CAHWs time and transport to farmers' homes needs to be factored in to the dosage costs if this is what is driving the economic model.
- c. The state cannot and will not provide medicines like antibiotics, non controlled disease vaccines or treatments. For these the CAHW needs to charge the farmers a rate that will allow the CAHW to recoup the costs and buy more stock.
- d. The state provided medicines and treatments are random and unreliable. As a result can create conflict between CAHWs and farmers who feel they have been charged for free medicines. A labelling and pricing agreement has to be agreed upon between the CAHW, the department.
- e. Implicit in sustainability is that the CAHW has enough farmers to work with that they get enough income from. Currently, MRDP is working with 200 farmers that are perspective clients to the CAHW.
- f. The issue of farmers accepting a CAHWs services on promise of paying the money at a later time is very problematic and needs to be avoided.

11. CAHW model comparison

There are various financing models for sustaining a CAHW intervention that could be considered for each intervention area. Below are the five possible models and ideas on the respective strengths and weaknesses.

- a. Stipends from state or NGO-in this model the state or an NGO would provide stipends to the CAHW as well as a kit and medicines. The advantages of this is that it will be largely successful while it is funded, the vet kits stays as the possession of the NGO or Department. The disadvantages are that the ownership of the CAHW and its management are not in the farmers hands so there is little investment from the farmers in this person, there is also no long-term thinking into how to transfer vision this into small business, farmers do not get into the habit of paying for their own medicines as a result they waste them and don't learn to invest in the livestock. In this system there is enough extra time invested to get production records baselines and the like.
- b. Weaning System-and the system they would be in an initial outlay of a vet kit as well as start-up medicines and stipends that decrease by 20% every year so that the end of five years this person has either succeeded or moved on. The advantage is that it gives that a best case opportunity to work and everybody learns about the possibilities and the markets steadied itself but from the very beginning is paying something for these medicines and as the habit becomes established learns to pay more and more to invest in the livestock which should be improving. The disadvantages are the weaning wharf

process or transfer vision needs to be handled very carefully from even before the planning phase and neither NGOs nor the state have a very good track record of weaning off people from their processes. The vet could also needs to be donated to the management body rather than the individual and as the individuals leave the management body takes control back and handed to the next person. In this system the records will only be kept for a short while and also stop being kept once the organisation paying starts the weaning process.

- c. Hybrid Government pays for campaigns. Farmers pay for the services-in international literature this is seen as the best case scenario where the state has no presence in the field and works exclusively through CAHWs to implement state campaigns and pays the CAHWs accordingly. The farmers pay for anything other than campaigns be a treatment deworming de- ticking branding or antibiotics. This works well as it makes a clear differentiation between what farmers need to pay for and what is provided for free by the state. This disadvantages are that for a person to be employed by the state to do controlled disease support they need advanced training and person by person registration onto a government database that needs to be regularly updated. The state is weary of handing over control of this process.
- d. Farmers paying themselves-in this model the farmers would pay annual fees that would be pooled and medicines bought and they would agree on a stipend that day directly paid the CAHW monthly. All the farmers were just pay a straight fee for services rendered. The advantages of this are that it is totally self-sustaining and once it gets going it needs no further interventions beyond training and follow-up training but because the farmers are not supervising it they have no control whether the particular CAHW is going to follow up trainings or not. Another disadvantage is that very few farmers have any experience of CAHW processes or indeed paying for their own treatment from non-vets so there may be an issue here of uptake.
- e. Hybrid provide capital (equipment/kit) & then CAHWs runs it themselves-in this model and organisation or state's Department would provide seed funding for start-up in terms of equipment and the kit they would then give it to theatre to individuals and set them on their way as small businesses. The advantage of this is that the big capital outlay to start with that often stops people being able to enter this sector would be covered and the long-term weaning would be unnecessary. The disadvantage would be that it would be unclear what happens when this particular individuals CAHW files that the kit then just get sold off as a private asset or doesn't get handed off to someone else.

12. CAHW Training Curriculum

- a. Overview
 - i. Role of CAHW
 - ii. Conducting Baselines
 - iii. Monitoring and Record Keeping
 - iv. Cost Recovery and Record Keeping
 - v. Coordination with Government Services

After the initial training of overview, the CAHWs will be trained in animal specific training modules in the points below by each animal type. Further modules will be for other animals the CAHW might be dealing with or refresher courses if they only have certain types of animals they are working with.

b. Animal Type Specific Training

- i. Basic anatomy
- ii. Animal restraint
- iii. Livestock diseases, prevention and control
- iv. Parasites prevention and control
- v. Animal nutrition and housing
- vi. Animal breeding
- vii. General management (castration, tagging, hoof trimming, body condition, etc.)
- viii. Drug handling and equipment use

Training Methodologies

- ix. Field practical
- x. Trainee assessment and "certification"
- xi. Refresher courses
- xii. Field days/learning exchanges

13. CAHW Kits

Equipment- all relevant to the animals to be worked on

Non Consumables

Digital Thermometer

Vacuum flask for vaccinations

Syringes- 1 20ml non disposable, 3 10 ml disposable, 2 5 ml disposable

Needles- needles for non-disposable syringes (pack of 10/12); needles for disposable 1 box

(for goats)

Gloves

Face masks

Burdizzo

Hoof trimmers

Ear tag applicators

10 litre knap sack sprayer

Cooler bag for all equipment

Weight belt- cows and goats

Blades

Cotton gauze

Dettol type handwash

Medicines

Berenil RTU 20ml

Revenil 100 100ml

Long acting antibiotic (such as Terramycin)

Short acting antibiotic (such as oxytetracycline)

Sulphur based antibiotic (such as Disulphox) for treating coccidiosis

Calci 50 Ini 100ml

Glucalmag 500ml

Milk Cream 500g

Broad spectrum dewormer (wireworms, flukes and tapeworms)- Eradiworm, Prodose

Wound spray

Tick grease

De-ticking medicines- Tactic

Vitamins- Vitamin 3AD (cattle), Multivitamin

Injectable solution- mange, lice (Ivomect, Ecomentic)

Terramycin powder (antibiotic powder)

Eye powder

Karbadust (chickens)

Black shoe polish (chickens)

Consumix Plus (chickens)

Iodine spray

Iodine drops

Copper Sulphate

Chicken book

Animal Health Manual

Goat Manual

14. Samples of Animal Health and Treatment Records, Assessment, Certificate, Job Description, baseline documents are all availe on www.mdukatshani.com on the CAHW's tab.

LIVESTOCK CENSUS for	r area
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Dip tank/ward and area:	
Name CAHW/interviewer:	

Number and date of interview	Surname of kraal/municipal number	cattle	goats	chickens	th t	aths ir e last hree onths	Do you vaccinate with/for what	Do you have your own medicines- name	Do you have own equipment – describe it	Do you buy animal feed –what feed and how much spent this month	Do you have your own brand mark	Do you use CAHW	For what disease or problems	Are you are W or M headed household
1.														
2.														
3.														
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18.							12							
19.														
20.														
21														

CAHW Name								
Course	Date and place and trainer	Trained theoretical	Duration of course	Trainer signature	Practical	Done at	Trainer signature	Follow up when
	1	•	1	General	1	-	1	
Roles and Responsibilities of CAHW								
Conducting baselines, routine monitoring and recordkeeping								
Cost recovery and business management								
	1	•	N	lethodologies	1	-	1	
Castration								
Injecting –intramuscular and subcutaneous								
Tattooing								
Branding								
Taking and understanding temperature								
Girth weight belt								
Famacha								
Vet kit contents								
Animal Restraint								
Basic cold chain								
principles								
				Diseases				
Chickens								
Newcastle disease								
Fowlpox								
Gumbora								

	T	1	1	T	T	
Bumblefoot						
Diarrhoea						
Goats and Sheep						
Heartwater						
Pneumonia						
Orf						
Abscises						
Joint ill/naval ill						
Diarrhoea/Coccidiosis						
Eye infections						
Abortions						
other						
Cattle						
Redwater						
Blackquarter						
CA						
Sweating sickness						
Anthrax						
Foot and mouth						
Mastitis						
Warts						
Lumpy skin						
Bloat						
Vibriosis						
Gall sickness						
Rabies						
Milk fever-						
hypocalcaemia						
Hypercalcaemia						
Grass Tetany- low						
magnesium						

Ketosis					
			Parasites		
External					
Ticks					
Mites/tampans/mange					
Other					
Internal					
Tape worm/cysts					
Wire worm					
Flukes					
Roundworms					
		Va	lue adding		
Animal housing			nac adding		
Ruminant Nutrition					
Feed Requirements for					
dairy animal					
Dehorning					
Farmer Record Keeping					
Breeding and Selection					

CAHW work shee	<u>et</u>
CAHW name	
Area of work	

Date	Name of farmer	Identification of animal tattoo etc	Type and Weight of animal	Famaacha and temperature	Treatment or intervention type	Type of medicine used	Dosage used	Dosage cost	Total Charged to farmer	Cell phone of farmer	Farmer signature
Total											

Igama leCAHW:
NGO/Govt official:

CAHW models

Model Name	Ownership of Vet Kit	Financial Sustainability of CAHW	Management & Decision Making & Quality Control	Transition to Sustainability	Advantages/Disadvantages
Standard Model	Livestock Association or NGO	CAHW paid stipend by NGO or state for limited term while farmers get into the habit of paying for inputs	State, NGO and Livestock Association	Becomes small businesses post stipend on the assumption farmers are in the habit of paying	Advantages- it has momentum to at least run for a couple of years without being tested. The stipends theoretically give the luxury of compiling baselines and record keeping. Disadvantages- people get used to not paying full price for the service.
Weaning System	Ownership is gradually handed over the CAHW.	CAHW is paid stipend that reduces 20% every year.	NGO, Livestock Association	20% reduction every year means that by year 5 they are totally self- sufficient but you are seeing whether it works after year 1 after price increases take effect.	Advantages- it gives the community and the CAHW time to establish a market and steady it. It also gives space for a baseline and at least initial record keeping. Disadvantages- It takes a few years to see if it is going to work. Neither state or NGOs have a good track record of weaning.
Hybrid Government	International literature suggests	The CAHW earns money for servicing	Self-management. Government	No transition	Advantages- it is clear who pays for what.

Farmers Paving	that this is the best model. Livestock Association or NGO	the farmers. Fee based system. The state uses these people for their campaign and pays them by campaign. Government is subsidising them to make this economically viable for the CAHW.	manages them during the campaigns.	From the hoginains	This person gets sufficient cash flow but the campaigns give them the opportunity for them to be retrained and quality controlled. Disadvantages- person has to registered on a government database in order to inject on behalf of government. The state is weary of handing over control during the campaigns.
Farmers Paying Themselves	Livestock Association	Farmers pay for treatments but pool their money and buy the medicine to replenish the kit	Self-management	From the beginning it's set up to be sustainable	Disadvantages- no planned trainings post initial training Very few farmers have experience with CAHW process so uptake may be problematic.
Hybrid	The CAHW but it is bought by NGO or government plus an initial dose of consumables	Paid by farmers for services rendered	Self- management	Transition happens post training and vet kit handover	Advantage- big capital outlay gives people enough momentum to possibly succeed. Disadvantage- if CAHW fails to work hard enough, the capital outlay gets sold or handed over without any control.
Heifer model					

Community Animal Health Worker Job Description

Responsible to:

Trained by:
Coverage area:
Working hours:
Provision of medicine/vet kit from:
How will services be charged:
Own transport/charge for transport:
Will be given vet kit with the following:
This part of the vet kit you will replenish:
Ownership of the vet kit:
Relationship with state vet:
Relationship with the livestock assn:
Relationship with DoA Livestock Production
Relationship with private vet:
Relationship with project executive committee:
Relationship with NGO project staff:
Roles and Responsibilities
1. Create a baseline of animals in the area
2. Manage livestock registers (annual counting of randomised sample)
3. Give advice regarding medicines and vaccines
4. Bulk buy medicines and sell to farmers

7. Keep farmers updated on vaccination calendars and strategic medicinal interventions (e.g.

6. Maintain a recording system of treatments, dosage and interventions

5. Maintain the vet kit for that particular dip

anthrax, blackwater vaccination campaigns)

8.	Provide basic animal health care at dip-tank level
9.	Assist in disease surveillance (early detection)
10	. Promote Animal identification through tattoos, ear tagging and branding
11	. Provide grazing management skills towards feeding during winter bottlenecks
12	. Provide support around breeding and selection skills
13	. Provide the service of castration and dehorning
14	. Mobilize farmers around marketing and value adding
15	. Mobilize farmers to provide animals at times of sales or auctions
16	. surveillance and reporting of controlled diseases
17	. Provide supportive role to Departmental Technicians on dip days and veterinary campaigns
18	. Provide theme day trainings at dip days and other gatherings
Signatı	ures:
Livesto	ock Association
Traine	<u></u>
CAHW	
CAIIW.	
NGO_	