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ETHNOVETERINARY AND SLAUGHTERING PRACTICES CAN CONTRIBUTE TO DEVELOPMENT AND DROUGHT RESPONSE IN PASTORAL AREAS

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ABSTRACT Research by university professors of Japan on humanitarian assistance in East Africa focused on the concept of the articulation sphere which is the local and the universal. The concept of the articulation sphere is to be appreciated in future humanitarian assistance as the assistance will continue due to recurrent drought and other hazards in pastoral areas. One area of focus is the use of ethno-veterinary that was not touched by the researchers. During drought pastoralists try to save their animals through mobility in search of grazing material and water. They treat their animals using local herbs and other materials available in their areas. They take their animals to salt pan and mineral soil site to deter ticks and mange mites. Government policy of encouraging voluntary sedenterization restricts traditional practices which were based on mobility. Ethno-veterinary/traditional veterinary practices knowledge requires documentation for future research as the knowledge is transmitted verbally. Government veterinary service intensifies vaccinations against highly morbid diseases and treatment against internal and external parasites during period of drought. Slaughtering of non-breeding animals and feeding targeted breeding animals is an intervention done by FARM-Africa in Afar during the drought.

Key Words: Anti-biotic; Drought; Ethno-veterinary; Conventional; Humanitarian assistance.

INTRODUCTION

This commentary is made to supplement the presentations made by Japanese university professors who have worked in East Africa on humanitarian assistance. Pastoral people are often faced with recurrent drought and emergency humanitarian assistance. The assistance has not been based on local interest or did not consider local requirements. The presentations dealt on food assistance, medicine and others. Ethno veterinary, although not mentioned in any of the presentations, requires support to be recognized, researched, improved and used as local while being complemented by modern veterinary practices. This approach is more effective and affordable and is available to local people. I have been advocating the blending of conventional and ethno-veterinary practices. But this has not been incorporated in the study.

My comment try to see from the veterinary context as a contribution to ethno veterinary where ethno means for me is very near to you to the anthropological thinking. I try to examine the contribution of modern and ethno-veterinary in times of drought and disease outbreak.

I heard about articulation sphere approach for the first time when I got the paper from Professor Shinya Konaka and I was very, very surprised because I never thought things in such a way. The livelihood of pastoralists cannot be seen in isolation without considering the humanitarian assistance because I think humanitarian assistance is becoming a norm as it was said.

These days farming communities are also in need of assistance. I am just talking from the Ethiopian context. Even the highland of Ethiopia is no more enjoying the previous years' abundant rainfall. No place in Ethiopia is exempted from hazards and drought. Right now, there is severe drought in Ethiopia. The government says 8 million people are affected. Others also say it is more than that. Others also say it is more severe than it was in 1983–1984 which was even mentioned in Professors' paper. I think humanitarian assistance to about 15 million people is going to be demanded in this drought. Right now, when I was starting from Addis, it was completely dry and we have lost two seasons of rainfall which was very supportive for growing cereals and pulses. This workshop means quite a lot to me because I am also learning.

The government policy for the pastoralists in Ethiopia generally has been going on voluntary sedenterization. In a way although they say voluntary, pastoralists have no other option other than to be volunteer because of other difficulties. Cultural diversity is not considered which affects pastoralists' option. Situations are dynamic and continuous, monitoring is needed. That means what we have seen last year is going to change in this year. So, it has been very rapid in these days and we cannot predict permanently what is going to happen. It is changing. Livestock production system is facing challenges from drought and sedenterization. So, we seem to lose quite a lot of livestock because of shrinkage of resources.

DROUGHT AND ANIMAILS

During droughts, there is no feed aid for animals. There is always food assistance for human beings. So, the animals are useless and they are hopeless and so they die. There was some experience of feeding selected breeding animals in an organization which I was involved in non-government organization. The idea of feeding few breeding animals is to save adapted animals to be available in post drought period/recovery phase. We also used mobile slaughtering facilities and slaughtered 2,800 non-breeding animals (male animals, barren cows) in 3 months and distributed the fresh meat and the surplus was prepared in the form of dry meat for school children feeding.

This can be done only from our experience at alert stage and not in emergency time. So, there must be very clear early warning system in place. That once we come to the emergency stage, the animals become highly emaciated and they are not fit for slaughtering. So, slaughtering is appropriate because most likely these animals are going to die anyways since there is no feed aid. So instead of nature eating the animals, I think the human being can eat them. So, we should not let them die.

Pastoralists of course will not give their animals for slaughtering unless they

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receive incentives. As part of a humanitarian assistance our organization goes and offers to purchase the animals from the pastoralists and they sell it. They are happy because they are desperate to sell their animals during that time. We buy animals to own them and slaughter them and give back the meat and hide to the community. So, we are not taking the animals rather we provide the meat.

An individual can sell his animal at the alert stage provided that the community agrees on the quota set for the individuals based on the level he becomes vulnerable to drought. That has to be targeted by the community members themselves because otherwise they will fight saying I should sell or you should sell. They target and then they slaughter in their own system. We bring them only the mobile slaughtering facilities and we do the meat inspection as it is. This has worked but in a small scale, I mean it has to be scaled up. After this intervention, it seems no one has taken interest to use the model despite several trainings conducted.

Restocking is a problem in post-drought period. A lot of people talk about restocking and de-stocking. It should not be theoretical. If you want to restock, you should have saved part of your adapted breeds as seed for crops. When animals are already lost, then you want to replace with other animals that are not adapted to the ecosystem where the drought has occurred. It is hard for these animals to be accustomed and be productive in the new ecosystem.

Besides to the drought other factors are perpetuating hardships on pastoralists such as taking away pastoral territories for Hydropower projects and state owned large scale agricultural activities. For example, the Omo and the Awash Rivers are being used for hydropower generation and for irrigation. That is the prime grazing area that is being taken over now. Because of these the traditional dry season grazing area is getting smaller.

In some areas, camel keeping is becoming a reality because of the vegetation change. The Borenas who were once upon a time very famous for cattle keeping, now they are changing into camel keeping because the grass is gone. If the browse has come they have to change to browsers.

Pastoralists are expected to change from extensive grazing system to intensification through sedenterization. This is the notion of the government. That means they have little area for mobility. They have to stay within a limited grazing area. That means they will be dragged to be wage laborers and then the animals can be fed intensively by using cane top, molasses, bagasse from sugar plantation and cotton seed cake from cotton plantation because these are extensive farming system now going on in the pastoral area.

FROM MY PAST ACTIVITIES

Let me go to my work actually. In this workshop, I am representing PENHA, Pastoral Environment Network for the Horn of Africa. It is an NGO based in UK. I am the board member.

So otherwise, I am a veterinarian but working for many years in pastoral areas. I started working in pastoral area when I was 22 years old. That is almost 47

years ago now. By then I was concentrating on vaccination campaign against rinderpest, a disease with high morbidity and high mortality. Now that disease is gone from the globe. At that time, I was not very much occupied looking into the ethno-veterinary practices of the pastoralists. Probably the anthropologists whom I met during that time were interested to know about traditional veterinary practices of the pastoralists. I had two anthropologist friends working in the same area where I was working. We were not working together but we were friends. One is Ivo Strecker who worked on Hamer and another one is David Turton who worked on Mursi people.

After many years, I went back to this place to do a documentation work. The documentation work was necessary because I felt the old people who possess the knowledge are dying out. The young people are also going to school and there is always what you call a missing link between the two. If you go to school, you will most likely not use earlier tradition because you learnt some other thing. So, if you are not a herder you don't likely use earlier tradition. The old people will die with their knowledge because there is no written document. All knowledge is transferred verbally. Unless knowledge is transferred in written form, it will more likely disappear.

That is why I wrote a proposal and I got some funding. For 1 year I was working with South Omo pastoralists (Hamer, Hor/Arbore, Tsemaco, and Birale). The documentation group (I and the assistant veterinarian) drove to their place which is 700 km from Addis Ababa on a rugged terrain. Now there is an asphalt road, but before it was a difficult road. It was taking us 2 days to reach those pastoral people. These ethnic groups are close to each other and their population was estimated to be not more than 10,000 in each case. They differ in their language, costumes and eating habit.

I was working with the four groups but I had translators who are capable of speaking all the languages. I hired them to work with us. I tried to have a discussion between me and funding agency, The Christensen Fund (TCF). They wanted me to go there for 6 months, sit down, learn and return to Addis and stay for 6 months to write, but I said, no. I have to go every month; even if it is tiresome I opted going there month by month, because I could see changes throughout the year. When walking with the pastoralists we can come across to different things such as plants and we ask them what they are and for what used for. If we didn't do that month by month, we would not have observed the changes. For example, when we see a flower, they say this plant is used for such and such diseases while we are walking. Otherwise, they wouldn't tell after the flowering season because during the dry season plants shed their leaves and flowers, they wouldn't know which plant is which. As the plant characteristics are changing in a year time, disease occurrence is also changing. If I go at least for 1 year, month by month and scan the knowledge, then we will be able to understand the disease occurrences in a year time and treatments practiced by the pastoralists. The outcome of the study was compiled and published in a book form in 2009. The book is entitled "Indigenous Veterinary Practices of South Omo Agro-Pastoral Communities" and was distributed to different institutions and won appreciation.

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MY RECENT ACTIVITIES

Actually, I was looking for funding to publish a book that came out from my work in a new similar project which focused on Gamo-Gofa people in 2009 after publishing the "Indigenous Veterinary Practices South Omo Agro Pastoralists" book. The Christensen Fund (TCF) was generous to continue funding the documentation processes of Gamo-Gofa agro-pastoralists practices. It was not published because the funding was not adequate.

While looking for funding for publication of the Gamo-Gofa agro-pastoralists manuscript I have come to a group which is recently created: Ethiopia, The Netherlands, India, and Uganda. This group is advocating for antibiotic reduction in animal health which has become a concern in human medicine as well. The group has emphasized the use of ethno veterinary, emphasis on local breed and improvement of milk quality. The problem/the disease that the group focuses is mastitis, which is the infection of the udder. When cows become high-yielding animals, they are prone to have mastitis problem because of the cross-breeding of local animals with that of exotic breed.

The African animals have got less incidence of mastitis, but the European breeds and their crosses, are very sensitive. India also has mastitis problem because they are doing crossbreeding. After 38 years, I visited India and I was not able to see the local animals on the road anymore that I used to see while I was a student there. They were crossbred largely. So, when you are crossbreeding, you are bringing more problem mastitis. But you want to get more milk. You have to cross. But then this is the outcome of that crossbreeding.

To treat mastitis, the only thing we have is antibiotic and antibiotic is considered as miracle drug. Since it was discovered in 1929, it has saved quite a lot of lives in human medicine and in animal medicine. So, in human medicine, you know, practically even wounds were killing people, but after the discovery of antibiotic, many people were saved.

It is a powerful medicine but now the bacteria are getting used to it because we don't seem to treat the animal as prescribed. After years of use the antibiotic has been challenged by bacterial resistance. In my opinion, the bacteria are learning to survive. So, the bacterium is changing. So, because of that now human beings are facing quite a lot of problem. The bacteria are not going to be sensitive to antibiotic. You probably have read in the newspapers. As a result, the issue is becoming worldwide concern.

There is antibiotic resistance and some people are facing allergy with antibiotic. Antibiotic residue is also found in the milk and in the beef. So, when we are drinking and eating these products we are likely to create condition for a microbial resistance. The antibiotic residue is circulating from the animals to human beings. In our case as veterinarians the concern is with livestock because when we treat them, we tell the farmers in Ethiopia to throw out the milk for the next 3 days until it clears up from the system of the animal. Sometimes some people will be reluctant to do it. They will sell it so people are drinking it.

During the visit to India by these members from four countries, we were able to see herbal preparation (ayurvedic) that was prepared by Indian researchers and

appreciated by farmers. The farmers make a paste out of Aloe vera, turmeric and calcium hydroxide and apply to the udder topically. It requires several applications before the udder gets cured.

The articulation between the universal and the local is a concept to be appreciated and to be followed before the global prescription for different ecological areas and cultural background instead. I appreciate this concept. Blending the conventional treatment and ethno-veterinary practices is appropriate in this respect. We have to be very local-minded instead of just generalization. What works in Ethiopia may not work in other areas or what works in other areas may not work in Ethiopia.

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