Private veterinary practice in pastoralist areas of eastern Africa

Report of a regional workshop held in Nakuru, Kenya, 6–9 August 2003

African Union/Interafrican Bureau for Animal Resources
‘Today I am happier than before. People respect me because of the services I give them, not just for my title. The veterinary profession is good. We have many chances for individual development and to help the development of mankind as a whole. Let us join forces for the benefit of us all.’

Dr B.A. Mafwere, private veterinary practitioner, Morogoro, Tanzania
## Contents

Acknowledgements iv  
Foreword v  
Executive summary vii  

### Workshop concept and approach  
1  
**Introduction** 1  
**Concept** 2  
**Approach** 3  

### Workshop outputs 4  
**Success statements** 4  
**Ideal profile of a pastoralist private veterinary practice** 5  
**Needs assessment** 6  
**Business skills development** 14  
**Discussions with pharmaceutical company representatives** 17  

### AU/IBAR’s response 21  
**Follow-up on the business ideas generated** 21  
**Provide tailored business training** 22  
**Provide mentoring** 22  
**Help expand existing practices** 23  
**Evaluate viability of diagnostic laboratories** 23  

### Closing remarks 24  

### Annexes 25  
1. Participants’ essays 25  
2. List of participants 44  
3. Workshop evaluation 45  
4. Formation of The Pastoralist Private Veterinary Practitioners’ Forum 48  
5. Business skills development 50  
6. Acronyms 57  

A CD accompanies this report. See inside back cover.
Acknowledgements

AU/IBAR gratefully acknowledges the financial support of the UK’s Department for International Development (DFID) that made this workshop possible. However, the views expressed in the report reflect the workshop outputs and are not necessarily shared by DFID.
Foreword

The African Union/Intercontinental Bureau for Animal Resources (AU/IBAR) is the catalytic and policy organ of the African Union responsible for animal resources in Africa. It works closely with governments, international agencies, non-governmental organisations (NGOs) and donors in all aspects of livestock health and production. In addition to implementing continent-wide programmes, AU/IBAR plays a crucial role in leading policy debate and encouraging policy harmonisation.

During the Pan African Rinderpest Campaign (PARC), which ran from 1986 to 1999, AU/IBAR was active in promoting veterinary privatisation in Africa. At that time, the idea of privatisation was relatively new and it took a while to persuade governments that reform of veterinary services made sense. Some of the national PARC programmes included a privatisation component and activities tended to focus on the so-called ‘high potential’ areas. In some countries, the importation of veterinary drugs was liberalised and, with support from PARC, private practices began to emerge in urban and peri-urban areas. However, the main success of PARC regarding privatisation was that governments began to realise that policy and legislative changes were required to support the emerging private sector.

In pastoralist areas of Africa, the development of private veterinary services has been very slow. There are many reasons for this; one of which is the classification of these areas as ‘low potential’. National-level privatisation programmes have tended to overlook pastoralist areas and, in addition, some countries have deliberately avoided including them in such programmes. Consequently, veterinarians wishing to set up a business in a pastoralist area have been denied access to training and credit within these programmes.

AU/IBAR research has shown that private veterinary practice is possible in pastoralist areas if the business is designed to meet local conditions and the demands of livestock keepers. In particular, business performance can
be enhanced by employing community-based animal health workers. These men and women are usually willing to travel cheaply on foot or by public transport and their income expectations are relatively modest. They work under veterinary supervision, provide a basic service and can expand the coverage of a business into more remote areas.

Based on these findings, AU/IBAR is promoting the establishment of privatised veterinary services in pastoralist areas of Africa. An important step in this process is to review experiences and identify key areas for improvement. These were the objectives of the workshop. We invited participants who are working as private practitioners in pastoralist areas and who know the day-to-day realities of managing a business. We wanted to learn more about their businesses, their successes and the constraints they face. Only when we fully understand the problems can AU/IBAR help develop effective solutions.

I believe that we gathered a unique mix of veterinarians and animal health assistants at the Nakuru workshop. We had private practitioners from Ethiopia, Kenya, Somalia, Sudan, Tanzania and Uganda and I am confident that their discussions provided an invaluable contribution to help governments decide how best to support private systems of animal health service delivery in marginal areas.

Finally, on behalf of AU/IBAR, I would like to thank the main sponsor of the meeting, the United Kingdom’s Department for International Development.

Dr Jotham Musiime, Ag. Director AU/IBAR
August 2003
Executive summary

AU/IBAR is keen to promote privatised veterinary services in areas of low as well as high potential agricultural productivity within Africa. In the pastoralist areas of eastern Africa there are large populations of livestock and many people rely on them for their livelihoods, but public sector provision of animal health services is often non-existent. Although privatisation of animal health services in these pastoralist areas is taking place, progress is slow and these areas have been largely excluded from privatisation schemes.

Despite a lack of supportive programmes and policies, a small number of entrepreneurial veterinarians and animal health assistants have established private practices in pastoralist areas of eastern Africa. AU/IBAR identified 17 such individuals and invited them to a regional workshop, held in Nakuru, Kenya, in August 2003.

The objective of the workshop was to provide an opportunity for the private practitioners to tell AU/IBAR how it can assist them and others like them to establish and run successful animal health businesses in marginal areas of Africa. In return, AU/IBAR undertook to provide the participants with some training during the workshop and to follow up any needs identified.

The workshop participants identified several areas in which private practitioners need help to establish and operate a successful practice in a pastoralist region. These fell into seven broad categories:

- policy
- capital
- financial and business management
- training (both received and given)
- enabling environment
- interest, commitment and perseverance of the practitioner
- networking.
The enabling environment and the personal qualities of the practitioner were recognised to be extremely important but it was not felt that the workshop was well placed to have any influence over them. Networking was considered to be a tool that would be required in all areas of the business. This left four `needs’ for which interventions could be designed:

- policy
- capital
- financial and business management
- training.

The workshop highlighted three broad areas in which AU/IBAR could assist in the establishment and strengthening of private veterinary practices in pastoralist areas.

1. Help the workshop participants and others to develop their practices by improving the way the business is managed, facilitating the growth of the business and contributing to continuing professional development (i.e. business and technical skills).

2. Use the experience, knowledge and skills that the existing private practitioners have acquired to help more vets and animal health assistants to establish viable private practices in pastoralist areas of eastern Africa.

3. Provide advocacy for an enabling environment and supportive policies and legislation that will promote privatisation of veterinary services,
especially in remote and pastoralist areas. This should include countering unfair competition from government vets and supporting policy for relief interventions during droughts.

Regarding item 3, AU/IBAR is already active in this area through a range of programmes and activities. Regarding areas 1 and 2, a number of activities will be explored that specifically address the issues and needs identified during the Nakuru workshop. In implementing these activities, AU/IBAR will use consultants, NGOs and other organisations that can provide the specialist skills, knowledge and experience required. The proposed activities are:

1. Follow up on the business expansion ideas generated during the workshop.
2. Provide tailored business training for workshop participants.
3. Develop links with loaning institutions, i.e. banks and micro-credit providers.
4. Investigate the potential of harnessing the most able private practitioners as mentors for the less experienced.
5. Help to expand existing practices so they serve the needs of their pastoralist clients.
6. Evaluate the viability of private veterinary practices establishing and operating diagnostic laboratories.
Workshop concept and approach

Introduction

The African Union’s Inter-African Bureau for Animal Resources (AU/IBAR) is a specialist technical agency with a mandate to promote livestock development in Africa. Within AU/IBAR, the Pan African Programme for the Control of Epizootics (PACE) and the Community-based Animal Health and Participatory Epidemiology (CAPE) Unit work to strengthen the delivery of animal health services in marginal areas.

Over the past 20 years, radical changes have taken place in the provision of veterinary services in Africa. Most governments have withdrawn from providing free or heavily subsidised clinical services and, in theory, are leaving this to the private sector. In practice, however, there has been little progress in making the policy, regulatory and institutional reforms needed to enable a smooth transition from state-dominated supply to private sector provision.

In the countries of eastern Africa, private practitioners and would-be private practitioners face many obstacles including a lack of business acumen, little access to affordable credit and competition from government vets and unqualified ‘quacks’. Conditions are most difficult in remote areas where poor infrastructure and insecurity present additional problems – but these are the very places that support the largest livestock populations and where many people rely almost exclusively on livestock for...
their livelihoods. An important component of AU/IBAR’s work is therefore to promote effective private veterinary practice in marginal areas, in addition to those of greater potential productivity. Veterinarians in pastoralist areas of Africa often work with animal health assistants and community-based animal health workers (CAHWs). Animal health assistants receive formal training for one or two years and are awarded a recognised qualification, either at diploma or certificate level. CAHWs are selected from within their own communities and receive short-duration informal training, often over only a few weeks. Some animal health assistants also operate independently as private practitioners, supplying animal health services directly to livestock keepers or via a network of CAHWs.

**Concept**

The idea behind the Nakuru workshop was to bring together veterinarians and animal health assistants who have succeeded against the odds in establishing successful private practices in eastern Africa. Seventeen practitioners who currently provide animal health goods and services to pastoralists in Ethiopia, Kenya, Somalia, Sudan, Tanzania and Uganda were invited to attend the workshop and all accepted AU/IBAR’s invitation.

The objective of the workshop was to provide an opportunity for discussion between AU/IBAR and private veterinary practitioners. AU/IBAR wanted to know how it could improve the support given to help private practitioners establish and run successful animal health businesses in marginal areas of Africa. In return, AU/IBAR undertook to provide the participants with some training during the workshop and to follow up any needs identified. Ahead of the workshop it was anticipated that these needs might include:

- provision of small business support services and training
- dissemination of information [i.e. the problems faced by private practitioners] to relevant stakeholders and authorities
- advocacy for an enabling environment to help the private practices operate effectively.

To cater for the first of these anticipated needs, a small business development expert was included in the workshop team.
Approach

The workshop was conducted using techniques and activities based on the ‘appreciative inquiry’ approach. Although relatively new to the livestock sector, this approach has been widely used in other sectors for more than 10 years. While conventional workshops usually focus on problem analysis, the appreciative inquiry approach starts from the opposite viewpoint. It identifies what is being done well, celebrates successes and moves on to build a profile of an ideal organisation. Once an ideal structure has been defined, participants can then identify the actions required to reach that ideal.
Workshop outputs

Success statements

Participants were asked to pair up with the person they knew least well and to tell their partner about the three business successes of which they were most proud. Each partner then presented their opposite number’s successes back to the whole group, and the successes were also captured on cards.

The cards were clustered into four main groups, which related to: a) establishing a practice, b) providing quality services that are appreciated by livestock owners, c) increasing the knowledge of CAHWs and farmers and d) creating a profitable business. Further synthesis resulted in four ‘success statements’ describing the most important factors associated with establishing and running a private animal health practice for pastoralist clients:

1. To start a successful veterinary business requires a motivated individual with vision, conviction and determination, and who is willing to take a risk.

2. A private veterinary practice must develop a good relationship between animal health workers (vets or qualified animal health assistants) and pastoralist communities. This may occur as a result of lower disease incidence and higher livestock productivity.

3. A private veterinary practice should be working with CAHWs in the delivery of goods, services and information to livestock owners.

4. A successful private practice will provide a good income for the practitioner and his staff, with good potential for increasing turnover and profitability over time.

In a related activity, all participants were asked to write a brief essay describing their three main business successes. These essays are reproduced in Annex 1.
Ideal profile of a pastoralist private veterinary practice

Building on the steps outlined above, participants were asked to write on cards the factors that constituted an ideal veterinary or animal health practice in a pastoralist area. The cards were then clustered into similar themes. The seven themes can be described under the following titles:

- policy
- capital
- financial and business management
- training (both received and given)
- enabling environment
- interest, commitment and perseverance of the practitioner
- networking.

The title ‘enabling environment’ included factors such as security, adequate infrastructure and communications, acceptance by the local community and adequate numbers of livestock. Although clearly of vital importance, it was not felt that the workshop was well placed to have any influence over these factors. Interest, commitment and perseverance of the practitioner were considered to be essential character traits, but these were either present or absent and could not be created or learnt. Networking was considered to be a tool that would be required in all areas of the business.

This left four topics that could be considered as ‘needs’ and for which interventions could be designed:

- policy
- capital
- financial and business management
- training.
Needs assessment

Participants were randomly divided into four groups to work on detailed plans for interventions that would address the identified needs. They were asked to include a definition of the need, who would be involved in the intervention, how this would be done and when, and what the indicators of success would be. The needs assessment was also discussed by all participants in a subsequent plenary session.

Policy

The working group identified four main issues that were particularly important to private veterinary practitioners and for which existing policy was considered to be inadequate.

1. Unfair competition: drug peddlers/quacks and unregistered drugs. In relation to drug peddlers/quacks, the culprits first need to be identified – possibly by private or public veterinary personnel with the help of the police. It was suggested that government veterinarians should receive specific training in this area and that they should be empowered to arrest and prosecute offenders. Private veterinary practitioners should participate in any forum where they can bring attention to relevant laws that exist on paper but are not being implemented.

2. Taxes and licensing. Recommendations should be made to national veterinary authorities for the revision of taxation and licensing procedures to avoid double and excessive taxation.

3. Government contracts. As a matter of policy, private veterinarians should be contracted by government to carry out vaccination campaigns through the national veterinary associations.

4. Drought contingency plan. Relief agencies should buy their drugs from a local private practitioner and use existing practices to channel assistance to the community. When there is a government intervention, this too should be channelled through a local private practice. Private vets should also encourage their clients to sell some of their animals before drought strikes.
A plenary discussion highlighted several issues related to how private veterinary practitioners could influence policy. It was considered that their primary role is to inform the relevant authorities about the need for policy change, but that they have little influence on actually making policy change happen. One question raised was: ‘Does anyone listen to the complaints of private veterinary practitioners?’ Despite explaining their concerns clearly at national veterinary association meetings, private vets often have trouble making their voices heard, mainly because they are still hugely outnumbered by government vets. It was reported that, in Kenya, out of 1800 registered vets, only 200 are paid up members of the Kenya Veterinary Association (KVA), an organisation that is currently dominated by government vets. If all private vets joined the KVA, they could have more influence and lobby more effectively for their cause. Although private vets may be small in number, they are encouraged to keep attending the annual meetings of their respective national veterinary associations and to be as vocal as possible in their advocacy for an enabling environment to support privatised veterinary services.

Another problem raised was the issue of many government veterinary officers ‘moonlighting’ as private service providers. These government vets are in close contact with local administrators, such as district officers and district commissioners. Many government veterinary officers regard private vets as competition and are therefore ill-disposed towards any policy change that might favour a private service. It was suggested that privatisation is unlikely to take off while government vets are still widely deployed.

AU/IBAR’s mandate extends to influencing policy in relation to livestock and animal health. Private veterinary practitioners should therefore lobby AU/IBAR to pursue policy issues on their behalf. AU/IBAR can assist governments within the AU to develop better policies and regulations. For example, the Bureau is currently encouraging several governments to establish statutory veterinary regulatory bodies and to licence all cadres of animal health workers including CAHWs. In Tanzania, a proposal to restructure the Tanzanian Veterinary Board, to make it a more autonomous council, is currently being evaluated. In Sudan, AU/IBAR is funding a workshop that will consider the relative roles of the different licensing bodies. In Kenya, it is providing training for the veterinary drug inspectorate. The present workshop is part of the process of influencing
Experiences from Ethiopia and Uganda

One of the roles of AU/IBAR is to convince senior policy makers that privatisation is beneficial by exposing them to positive examples of privatisation in action. The Bureau has been successful in influencing national policy in Ethiopia, where the government was sceptical that private veterinary practitioners could effectively take over the role traditionally filled by government vets. To help overcome this scepticism, AU/IBAR arranged for Ethiopian policy makers to go on a study tour of Zambia, where privatised veterinary services have been introduced. The study tour convinced the policy makers that their approach to privatisation in Ethiopia was wrong. They consequently drew up a new strategic plan and drafted new regulations, which will hopefully soon be enacted.

The Ugandan Government instituted an extensive process of consultation, involving private vets, government vets and academics, in an effort to develop policy that would favour private sector animal health service providers. A stakeholder workshop was convened, during which the respective roles of the different players in the animal health sector were defined. However, insufficient resources have been available to put the plan into practice and government vets are still allowed to compete with the private sector. The licensing authority responsible for veterinary drug shops has done little to change the situation and still has no vets on its team. This example illustrates the slow nature of policy development. Despite setting the process under way through a process of consultation, inadequate resources have prevented Uganda from achieving much in the way of concrete action.

government and is an opportunity to ‘ground truth’ the messages being developed and communicated to governments. The down side is that influencing governments and working with them to develop and implement new policies can be a slow process.

Capital

The working group considered two broad areas: start-up capital and expansion capital. For start-up capital, several first steps were identified:

- know your requirements
- prepare a business plan
- identify collateral
- talk with the banks
- submit your application.
Useful allies for start-up capital could be friends and family, banks, business partners and AU/IBAR. Important factors for success in sourcing capital include goodwill, experience and a strong business plan. Sources of capital could include savings, business partners, families and friends as well as formal lending institutions. Indicators of success would be obtaining the required credit and then for the business to take off.

Regarding expansion capital, participants looked at two specific areas: establishment of diagnostic facilities and acquisition of appropriate modes of transport. It was agreed that good diagnostic facilities were useful, and these could be either mobile or stationary. It was thought to be important to liaise with government Veterinary Investigation Centres as a possible approach to sharing costs and facilities. Funds would be required to cover the costs of buying equipment, reagents and for refresher training on diagnostic methods. Useful allies would be any institutions working in the local area, such as non-governmental organisations (NGOs), research projects and government. Possible sources of capital could be savings, business loans, friends and partners. The indicators of success would be establishment of a fully operational diagnostic facility, which generated sufficient revenue to cover running costs, repay start-up capital and make a profit.

The most appropriate mode of transport for the practice might include bicycles, motorbikes, saloon cars or four-wheel drive vehicles. Having identified a suitable vehicle, sources of finance might include micro-finance organisations, commercial banks, donors, NGOs, friends or the practice itself. Indicators of success would be acquiring a loan to purchase a vehicle, which was then used to improve the profitability and coverage of the practice.

Several questions were raised in the plenary discussion. In relation to investing in diagnostic laboratories and facilities it was asked whether anyone had written a business plan and whether such an investment could be viable. Is it possible to sell diagnostic services in pastoralist areas so as to recover the initial investment and to make a profit? One participant reported that he had tried offering such a service but that there was little demand because pastoralists tend to rely on their own knowledge. Even the purchase of a microscope was reported to be beyond the means of most private vets in pastoralist areas. One solution would be for support to
be provided by some other organisation, which might be government or an NGO.

Whilst considering who may be an ally in relation to accessing credit, the role of AU/IBAR was raised. It was stated that AU/IBAR is not a source of credit and should not be considered as experts in this field in their own right, but that they could work with other organisations that specialise in this field.

Financial and business management

This working group focused on two areas. First, the formation of an association to represent veterinarians and animal health assistants who operate private practices in pastoralist areas. Second, winning contracts to provide animal health services traditionally supplied by government.

The group proposed the formation of an association that would involve the workshop participants, other private practitioners working in pastoralist areas and AU/IBAR. They felt that the initiative could start immediately, during the present workshop. The potential value of forming some sort of private veterinary practitioners’ association was also discussed in the plenary session. After some debate, a majority of participants voted in favour of forming an association. The participants undertook to meet before the end of the workshop to formulate a plan to take this activity forward (see Annex 4).

In regard to winning government contracts, the group considered vaccination campaigns and disease surveillance. They suggested that the association proposed above would be beneficial as members could jointly lobby for such contracts. Useful allies in the process would be AU/IBAR and the veterinary drug companies who supply the vaccines. A target date for seeking government contracts was January 2004. Meeting this target means drawing up memoranda of understanding between the private practitioners and government and preparation of proposals. Policies
Training

The group considered five training needs: a) short-term technical skills refresher courses, b) participation in conferences/workshops, c) business skills and management training, d) refresher courses for animal health assistants and e) training for CAHWs and farmers. These categories cover the training the private practitioners would receive as well as training they would conduct for others.

Short-term technical skills refresher courses for private veterinary practitioners could cover artificial insemination, laboratory diagnosis and surgical techniques. The training would be implemented by veterinary schools and appropriate research institutes. The role of the private veterinary practitioners would be as participants on the training courses. Important allies would include NGOs, government veterinary departments, national veterinary associations and donors, such as the European Union (EU), Danish International Development Assistance (DANIDA), United States Agency for International Development (USAID) and AU/IBAR. The indicators of success would be that new skills were acquired and applied by private practitioners.

Less formal training could be accessed through participating in veterinary conferences and workshops such as the present one. Conveners of such conferences and workshops include national veterinary associations and veterinary schools. The role of the private practitioner would be to participate in the conferences and workshops, to present papers, participate in discussions and to maintain subscriptions to their national veterinary associations. Important allies would include the Kenya Agricultural Research Institute, the International Livestock Research Institute, the Livestock Health Research Institute and the National Agricultural Research Organisation in Uganda, donors such as the EU, DANIDA, AU/IBAR, national veterinary associations, veterinary drug companies and governments. Indicators of success would be that new technologies had been learned and adopted.
Business skills and management training for private practitioners would include:

- feasibility studies including market research
- marketing
- human resources management
- finance and accounting
- debt management.

The training would be provided by commercial training firms, business institutions, NGOs and universities. The role of the private practitioner would be to identify reputable institutions for training and to apply to course organisers and allies for funds. AU/IBAR was considered to be the major ally. The indicators of success would be that more private veterinary practices were opened in pastoralist areas and that new and existing businesses were successful, profitable and well managed.

Refresher training for private animal health assistants would include both technical skills enhancement and business skills training. Private veterinary practitioners could be a useful resource for delivering this training and AU/IBAR and government veterinary departments were considered to be the major allies. The indicators of success would be better delivery of animal health services by animal health assistants, which would increase the distribution network and reach of privatised veterinary services. In addition, the private animal health assistants would be better able to recruit, train and work with CAHWs.

Private veterinary practitioners and animal health assistants would be involved in training CAHWs and farmers in simple disease management, livestock marketing, livestock product processing and handling, and drug storage, handling and administration. Training materials might be provided by AU/IBAR, statutory veterinary bodies, research institutes, NGOs and
drug companies. Indicators of success in the pastoralist area would include:

- reduced incidence of diseases
- increased livestock productivity
- better delivery of services by CAHWs
- higher income for livestock owners
- increased affordability of animal health services.

The plenary discussion regarding training covered the potential usefulness, relative attractiveness and practicality of different training formats. In relation to the use of e-mail as a tool to deliver training, six of the 17 workshop participants reported that they had no e-mail access.

It was observed that some of the workshop participants were very experienced. Could they offer advice and consultancy services to other private vets, who might visit such practices for a fee? In response, some participants said that all private vets were friends and that they already shared information and experiences freely. However, they added that vets are generally very poor in business management skills and there was great value in coming together, as in the present workshop, to share experiences and gain new knowledge and skills.

The participants also discussed the potential value of distance learning. They noted that the University of Nairobi has produced distance learning materials for a number of subjects and that students gathered at the end of each semester to share experiences. Opinions on the value of a distance learning format were mixed. Some participants said that by the end of a long working day there was very little opportunity to consider formal study. But other participants suggested that they could cope with a distance learning approach to further training provided the requirements in time, effort and money were not too great.

Some participants said that in addition to receiving training, whether in business management or technical refresher courses, they wanted to have certificates to demonstrate that they had undertaken that training.
Business skills development

This part of the workshop was led by Henry Bwisa, a business development expert. He introduced an important concept: if a business is not growing, it is probably dying. It is not possible to grow a business by simply continuing to do what you have done in the past. Good businessmen have to constantly adjust their view of the future, generating confidence and building momentum in new and different ways. They have to be close to their customers and respond to the changing demands of the marketplace. Businesses have to keep growing and finding new ways to grow if they are to survive.

At the start of the workshop, the facilitator performed a 'levelling of expectations'. Twenty-one cards describing the participants’ expectations were generated, of which 12 touched directly or indirectly on business development-related issues. These expectations were:

- learn how to effectively deliver private animal health services in the arid and semi-arid lands
- learn solutions to improve business
- gain knowledge in veterinary business practices
- learn how to privatise
- learn about an enabling environment for veterinarians
- learn about sustainable methods to deliver services
- get help to forge ahead
- know about loaning institutions
- receive knowledge
- learn how to counter competition
- share experiences
- learn from others.

This list suggests that development of business skills is a high priority for private veterinary practitioners. The business skills development session was conducted using an animated lecture, question and answer session, oral exercises, group exercises and presentations. Participants practised a
variety of business opportunity identification techniques and generated concrete business ideas. A guideline for screening the ideas generated and an action plan to turn the ideas into realities were given to the participants for use back home (see Annex 5).

The participants were asked to split into four working groups to identify different kinds of veterinary business opportunities. Group 1 identified linkage-based opportunities (Fig. 1); Group 2 looked at trends related to business opportunities (Fig. 2); Group 3 examined network-related business opportunities (Fig. 3) and Group 4 listed several combined business opportunities (Fig. 4).

**Fig. 1. Linkage-based veterinary business opportunities**
Evaluation of the business skills development session

Judging from the business ideas generated, the session was well received and made sense to the majority of the participants. This perception was enhanced by a show of many hands when the facilitator asked which participants had discovered a business idea to develop out of the session. After-session interactions with some of the participants reinforced this judgement. A formal end of workshop evaluation (see Annex 3) concluded that the session was appreciated by all participants.

A number of participants expressed a desire for more business skills and management training. One working group highlighted a need for skills in feasibility studies, market research, marketing, finance and accounting, human resources management and debt management. Additional discussions among participants revealed a need for assistance in accessing credit. A question regarding advertising suggested there was also a need for training in advertising techniques for small businesses. The participants’ business training needs can thus be summarised as follows:

- customer care
- managing employees
- risk management and entrepreneurial behaviour
- strategic marketing and methods of promotion
- business planning and environment analysis
- small business rehabilitation, growth, expansion and diversification
- small business finance and accounting
- networks, networking and advocacy
- creativity and innovation for small businesses
- debt management.
Discussions with pharmaceutical company representatives

Representatives of two veterinary pharmaceutical companies (a major multinational and a local distributor) were invited to attend some sessions of the workshop to allow formal and informal discussions with the workshop participants. Two main topics emerged: a) the quality of the animal health products and b) the ethics of the veterinary pharmaceutical companies.

With regard to quality, several different types of products were identified:

- stolen goods
- fake products, i.e. have no active ingredient
- substandard products, i.e. may have less active ingredient than stated on the label
• out-of-date products, where the expiry date has passed
• quality products, including the well-known brand-name products and generics. Generics should be equivalent in quality to the original product.

The private practitioners were urged to be mindful of the source of their drugs. As a general rule, if something looked too good to be true, for example a product offered at too low a price, then they should beware. Handling stolen, fake, sub-standard or out-of-date products raises serious issues relating to professional ethics and personal morals. Obviously the
1. Veterinary drug shop plus livestock farming/trading in pastoralist areas
2. Veterinary drug shop plus clinic
3. Veterinary drug shop plus clinic plus trading in livestock products, e.g. hides and skins
4. Veterinary drug shop plus agro-inputs
5. Veterinary drug shop plus government contract tendering
6. Veterinary drug shop plus clinic plus breeding farm
7. Veterinary drug shop plus chicken business (hatchery)
8. Veterinary drug shop plus animal feeds
9. Veterinary drug shop plus farm implements
10. Veterinary drug shop plus butchery plus tannery plus bone-crushing plant

Fig. 4. Combined veterinary business opportunities

practitioners can exercise choice in choosing their supplier, but they should bear in mind that there could be repercussions if they use sub-standard products. If drugs are always sourced from reputable, established suppliers then most problems related to poor quality will be avoided.

With regard to fake products, there will usually be some tell-tale signs in the packaging – no fakes are perfect – so practitioners were urged to be observant and not to accept products that did not look right. Although many people associate poor quality products with manufacturers from parts of the developing world, it was pointed out that European manufacturers also produced sub-standard veterinary products. For example, several generic presentations of diminazene of European origin have been sold in Kenya recently that have been shown to contain significantly less active ingredient than was declared on the pack.

It was a matter of concern to some practitioners that some pharmaceutical companies sell ethical products, such as antibiotics and...
trypanocides, to unqualified persons. It was pointed out that laws existed in most countries governing what products could be sold to which people, but that pharmaceutical companies were often responsible for products being made available inappropriately. Such practices could exacerbate the problem of drug resistance, lead to incidences of poisoning, cause inappropriate treatment and unnecessary mortality and also fuel unfair competition for private practitioners from unqualified ‘quacks’.
The workshop highlighted three broad areas in which AU/IBAR could assist in establishing and strengthening private veterinary practices in pastoralist areas.

1. Help the workshop participants and others to develop their practices by improving the way the business is managed, facilitating the growth of the business and contributing to continuing professional development (i.e. business and technical skills).

2. Use the experience, knowledge and skills acquired by existing private practitioners to help more vets and animal health assistants establish viable private practices in pastoralist areas of eastern Africa.

3. Provide advocacy for an enabling environment and supportive policies and legislation that will promote privatisation of veterinary services, especially in remote pastoralist areas. This should include countering unfair competition from government vets and supporting policy for relief interventions during droughts.

Regarding item 3, AU/IBAR is already actively involved in this area through a range of programmes and activities. Regarding areas 1 and 2, a number of activities will be explored that specifically address the issues and needs identified during the Nakuru workshop. In implementing these activities, AU/IBAR will use consultants, NGOs and other organisations that can provide the specialist skills, knowledge and experience required. The proposed activities are described below.

Follow-up on the business ideas generated

During the training session on identifying new business opportunities, several participants said that they had identified a business expansion idea that they would like to pursue. AU/IBAR therefore intends to write to all the
workshop participants inviting them to submit a proposal for expanding their business, based on the concepts introduced during the business opportunities training session of the workshop (see Annex 5). AU/IBAR will then screen the proposals and identify those that need further refinement and those that can be taken forward immediately. AU/IBAR will then work with the practitioners to identify what assistance is required to implement the proposals and to identify potential sources of support.

One need that will undoubtedly arise is the need for access to affordable credit. Guided by the proposals received, AU/IBAR will approach loaning institutions with a view to securing credit and will also explore the wider issue of access to credit. The Kenya Rural Enterprise Programme is likely to be a key ally for Kenyan businesses. Monitoring the progress of the proposals is likely to yield some valuable lessons, and these can be used to guide similar programmes in the future.

**Provide tailored business training**

The workshop gave some indication of training needs and other related issues, such as the desire for training to be accompanied by certificates and the acceptability of distance learning approaches. Several training packages are being or have been developed by a variety of agencies involved in provision of animal health services through private practitioners, animal health assistants and CAHWs. What is not clear is whether all or any of these materials meet the private practitioners’ needs. AU/IBAR will address this question through the development and use of a ‘training needs assessment’ questionnaire, which will be circulated to all workshop participants. From the results obtained, the existing training materials can be evaluated and the need for new materials and approaches determined. The possibility of distance learning as a source of cost-effective business skills training will also be explored.

**Provide mentoring**

AU/IBAR plans to look outside the animal health sector for successful mentoring schemes and experiences. A few of the most able participants from the Nakuru workshop would make ideal mentors for newly
established private veterinary practitioners in pastoralist areas. Initially, one private practitioner from Kenya, one from Uganda and one from Tanzania will be selected as potential mentors. AU/IBAR will then develop a model to indicate how mentoring would work, i.e. who pays, who benefits, etc. AU/IBAR will then hold a training of trainers workshop to develop the selected private veterinary practitioners’ mentoring skills and will go on to support the establishment of the mentoring approach.

Help expand existing practices

A number of Kenyan private practices have been identified that are situated close to pastoralist areas yet currently provide few services to pastoralist livestock keepers. AU/IBAR proposes to invite these practitioners to a workshop with the objective of introducing the idea of providing services to pastoralists. Practitioners who took part in the Nakuru workshop would be presented as role models and would be asked to share their practical experiences. It is intended to pursue this activity in collaboration with the KVA privatisation scheme.

Evaluate viability of diagnostic laboratories

A study will be commissioned to investigate the viability of private practices in pastoralist areas investing in diagnostic laboratories. The study will identify problems, investigate possible solutions and develop guidelines covering topics such as choice of equipment and reagents, range of services offered, marketing and pricing of diagnostic services.
Andy Catley, representing AU/IBAR, made the closing remarks. He recalled that 12 years ago, when he was based in northern Somalia, private veterinary services were available. Indeed, the recent example of success from Ethiopia proved that it was possible to privatise veterinary services in pastoralist areas. But there is still a long way to go. AU/IBAR is committed to addressing policy concerns and will follow up on the issues raised during this workshop. However, in order to address policy needs the Bureau needs to receive accurate information from local people.

Workshops such as this one are therefore invaluable. He promised that AU/IBAR would take the process forward and may hold a similar workshop in the future to review progress, especially with regard to training, access to credit and on-going policy issues.

Although the workshop was concerned principally with the private sector, Catley noted that he, and the other AU/IBAR staff, are funded by donors. He suggested that veterinary drug companies could take a more active role in private sector development, for example by supporting workshops such as this one. In the long term, more sustainable mechanisms will be needed that will support the process beyond the lifetime of donor-funded projects.

Finally, he thanked Keith Sones for organising the workshop, Apondi Nyang’aya for facilitation, Henry Bwisa for his small business development expertise and Loise Kimani of the CAPE Unit for administrative support. Last, but by no means least, he thanked the participants for their invaluable input and hoped that the links between them and AU/IBAR would be further strengthened in the future.
Annexes

1. Participants’ essays

Comment from Keith Sones, workshop organiser

When, on the first evening of the workshop, the participants were asked to write two-page essays describing the three aspects of their businesses of which they were most proud, I was unsure what the results would be. After a full day’s discussions, they were given just a few hours to complete the task. To my surprise, all 17 participants handed in their hand-written essays as requested during dinner that evening and it was immediately apparent that some had written considerably more than the two pages suggested.

As a very small incentive, and to inject a spirit of competition into the proceedings, we had announced that there would be prizes for the three best essays. At dawn the next morning, as the participants went off to enjoy an early morning tour of the scenic and wildlife spectacle that is Lake Nakuru National Park, Apondi Nyang’aya, the workshop facilitator, and I settled down to read through the essays and to select the winners. It very quickly became evident that this would not be easy. The essay writing task had been tackled with a level of enthusiasm, honesty and pride that took us by surprise. The essays told of real hardship, great courage and determination and illustrated true entrepreneurial spirit and a willingness to take risks. Time and again we read aloud passages that amazed and touched us.

Above all, the essays revealed an enormous pride that the private practitioners felt for their businesses, the services they provided to their clients and the recognition they enjoyed from the pastoralist communities. They were also honest enough to admit they enjoyed the fruits of their labours and the assets they had managed to acquire, such as vehicles,
business premises, houses and farms. In many cases, their businesses support not only their own families but have grown to create employment for animal health assistants, CAHWs and shop assistants.

Our original intention was to award three prizes and, perhaps, to publish the three best essays in this report. In the event we bought additional prizes from the lodge shop and awarded them more or less at random – it was impossible to pick just a few winners. While we had been reading the essays, many participants had seen rhinos for the first time in their lives and so we thought it fitting that the prizes were wooden carvings of these magnificent animals. And instead of including just a handful of essays in this report, we decided that we must include them all. They are reproduced below more or less as they were written. For some participants English is not their first or even second language. But even though the grammar may not be 100 per cent correct, the essays make compelling reading and provide an eloquent argument for the potential of private practitioners to provide high quality, affordable and accessible veterinary services to the pastoralists of the region.

1. Tesfaye Erenso, Private Animal Health Assistant, South Omo Zone, Ethiopia

I established a small-scale veterinary drug shop at the beginning of the year 2000. The location was 750 km from Addis and 300 km from northern Kenya. The inhabitants are agropastoralists and mostly pastoralists. There are around 14 clans and sub-clans. Livelihoods include livestock and livestock products, small-scale agricultural production such as maize and sorghum, traditional bee keeping and some fishing. My objectives were:

- to establish small-scale drug shop without a loan
- to overcome the shortage of veterinary drugs in the pastoralist area
- to introduce private veterinary activities in the area
- to supply drugs and vet equipment for the CAHWs trained by NGOs and government
- to give technical services, monitoring and evaluation of CAHWs.

As I indicated above, when I started for the first time I invested small capital which was not great or more than KSh 100,000 (US$ 1250). After
that the cattle owners started to understand private activities and they started to use the drug shop properly. My drug distribution also started increasing little by little.

In addition I also started participating in the training of CAHWs – those who were trained by the government and NGOs. After that I began to co-operate with the trained CAHWs. The CAHWs were supplied with drugs and equipment only once, then when they finished their drugs they started to visit my shop. I also started to visit the near area and far places when I got the chance. For the achievement of monitoring and evaluation there are some problems such as:

- shortage of capital
- transport
- peace and stability
- mobilisation of pastoralists during dry season
- shortage of trained animal health technicians.

For a future of veterinary service delivery in East Africa, if neighbouring countries follow the same system and regulations they may come into a good way of managing themselves.

2. **Ephrem Getachew, Private Animal Health Assistant, Jijiga, Ethiopia**

Jijiga Veterinary Drug and Farm Store was established in April 2000 with the support of Veterinary Service Support Project (VSSP) which is funded by Save the Children (UK). The business was started with a total capital of 100,000 Ethiopian Birr (equivalent of US$ 1,500). The source of capital was from my own saving, friends and relatives, the other half was borrowed from the Commercial Bank of Ethiopia which was deposited by the VSSP for interest-free long-term, five year loan. The bank interest was paid by VSSP.

At the beginning, the business was not promising and I faced many problems. Especially there was difficulty to get authorised license from local administration, high tax rate, unfair competition from government clinics, distribution of highly subsidised and free drugs from NGOs, smuggled (contraband) drugs of unknown quality sold by illegal traders in very cheap price, and drought.
However, through time the business ran in a good way. It has three employees and four fifths of the loan is repaid. VSSP had a large role to support the business by propagating the activities to different part of the region during CAHW training and providing veterinary drugs and instruments for start-up programmes and also gave us incentives to promote the business.

These days more than four NGOs participate in the training of CAHWs in the arid and semi-arid pastoralist area of eastern Ethiopia, so my drug store has a good relation with more than 16 CAHWs who are trained by different NGOs and government projects. Also I provide quality drugs and instruments for CAHWs and trainers at reasonable price. On the other hand, to compete with smuggled drugs, CAHWs play a great role in getting cattle owners to use known quality drugs.

Finally I would like to comment that due to lack of infrastructure and lack of government and private veterinary services many pastoralists administer their own treatment. The areas which don’t have access to either private or public veterinary services use CAHWs so new trainees and upgrading the skill of CAHWs will be necessary. CAHWs’ activities and networking with private vet drug shop is important to get quality drugs, professional advice and affordable prices. There must also be a good market for pastoralists to sell their livestock at reasonable prices.

3. Dr Abakano Kereyu, Private Veterinary Practitioner, Borana, Ethiopia

My business area is in Borana, lowland semi-arid and located in the southern part of Ethiopia about 570 km from Addis Ababa. The majority of the people living in that area are pastoralists and their economy depends on livestock and livestock products. Farming is also practised on a small scale here and there in scattered form all over the rangeland.

For the last 20 years, the government public vet service was operating in the area effectively in a sustainable manner. Due to this good service the pastoralists have developed the awareness and come to understand the use of modern veterinary services. However, the public vet service from time to time because of government financial constraints was not able or do not have the capacity to satisfy the demand of the pastoralists for better animal health services.
Therefore, as the public vet services started declining, illegal drug smugglers came into the business and began selling fake and non-effective drugs to the pastoralists. At the time, many other unlicensed people became involved in drug selling in all the shops. At the time there were no drugs in the public vet service so there was no alternative for the pastoralists except purchasing fake drugs at a higher price from illegal drug smugglers. Those fake drugs did not save the animals from dying and disease outbreaks became out of the pastoralists’ control.

However, many pastoralists and friends approached me with the problems that the Borana have been facing and asked me to give my professional assistance to my people instead of sitting in Addis Ababa. I never had in mind to start business in my profession or any kind of job out of Addis Ababa leaving my family behind alone.

I was convinced with what they said and started my business in Borana in 1998 with a loan from PACE. Before I started my business I did extension work and the pastoralists started developing confidence in the drugs I was selling and gradually they stopped purchasing fake drugs. I made available effective good quality drugs in the drug shop. To make the private veterinary service sustainable and to increase my business, agreement was made between a local NGO: CARE Borana. In collaboration with CARE Borana, 30 CAHWs were selected and trained and linked their activities to my business. The CAHWs are getting every time drugs from my shop and they have increased their income because of price reduction I have given to them. I therefore consider my business as a success.

4. Abdi Adan Abdirahman, Private Animal Health Assistant, Mandera, Kenya

I trained at Kabete during 1992-1994. Since the government did not employ us I was faced by the challenge of how and where to start because there was no credit facility I could access to establish myself. I managed to get some support from well-wishers and used this to start a mobile clinical service on a private basis under the supervision of the District Veterinary
Private veterinary practice in pastoralist areas of eastern Africa

Officer (DVO) until 2001 when I was asked by a local NGO to join a programme they have initiated – a community-based animal health services delivery with financial support from AU/IBAR.

It’s a private-oriented model where a drug store is established with initial capital from AU/IBAR, but needs partners like business people, vets, animal health assistants and CAHWs to come together and pool resources to buy shares and own the business. I am happy all that happened although some business partners pulled out due to fears of risks.

It’s now almost two years on and I am happy our store is established. We have penetrated the market and the turnover at the end of every month is enough to support me as a technical assistant of the business, pay rent for the store and replace and buy more drugs. It’s also supporting several CAHWs who have been trained under the programme. They get an incentive of 20% discount on their sales, which caters for their living bread.

Since the program started, the community or livestock owners have trained personnel and a reliable source of drugs is now within their reach, which has translated into reduced incidence of diseases thereby increasing productivity. Linkage between livestock owners and the DVO is also efficient since field reports from the community animal health workers are submitted by me to the DVOs for proper planning, monitoring and evaluation on a monthly basis.

I therefore conclude that my risk of buying shares in the business was a good decision and I hope with an enabling environment we can continue as active actors in the field of private pastoralist veterinary practitioners in the arid and semi-arid region of Mandera where I come from.

5. **Dr Joseph Wagura Karanja, Private Veterinary Practitioner, Nyahururu, Kenya**

Leaving a well-paying secure job as a District Vet in charge of ten other professional veterinary graduates and a large, clinically busy area was not an easy decision to make but I was determined to take the risk. This was in 1980. The first step into the unknown was taken in a small car bought by my meagre savings from my six years stint in public service in the Ministry of Livestock Development in Kenya. I did a feasibility study covering the mountain area of the Aberdares, Laikipia plateau and Samburu District in
the semi-arid area of Rift Valley Province. I opted to settle in the centrally located town Nyahururu.

The operational area was inaccessible during the rainy weather, no roads in the other locations and distances were long. The hostility exuded by the public vet-surgeons in the area proved to be a boost and an advertisement for my practice. The competition was mainly from them, the pharmacists and the ‘quacks’. It was one client after every two days in the first month of operation increasing to about one hundred clients per day by the end of the year. The problem then was availability of qualified personnel. They had to be enticed to resign from government service while I had to train the rest of the staff.

The business had to be expanded and the quality of the staff had to be improved. With a lot of competition coming in I had to include agrochemicals and seeds and increase my outlets. I am pleased to say that with a higher working capital through bank loans I have increased stocks and now have a stable working staff of 20, with 75 per cent of them being qualified animal husbandry assistants. My future goals have to be on more extension, import of drugs, manufacture and re-packaging as market demands. The sky should be the limit.

6. Dr P Mathenge Mwangi, Private Veterinary Practitioner, Narok, Kenya

My practice started in 1988. The most important success of my private practice was first being able to break away from government employment and seek my own financial independence. It was a sweet feeling knowing that my salary would be elastic depending on my efforts. I was no longer afraid of what my bosses would say about my financial achievements. I was no longer transferable and my clients were my employers to whom I was wholly committed and ready to serve.

After attaining my independence my vision was focused to give the best I could at a profit. Since I had been the district veterinary officer I had to shed the official hat, market myself, listen and help. My feelings were that
after the teething problems of finances, more of transport and acceptability, there would be better returns and time on the other side of the wall. I was not discouraged by small sales, at times no sales at all. I was not put off when farmers continued to go to the government offices. I knew that patience pays. Finally my clients started coming. I offered consultancy services free and I still do. I offered herd health services. I advised the pastoralists and suggested solutions. I took the opportunity to create more work. I also opened drug shops in remote areas but where the animals were. I used the government animal health assistants and they got some profits in return. When expansion was required an overdraft from the bank was sourced through fixed deposits. We were able to pay back. The service was expanded to cover the whole district. Routine vaccinations were arranged with the farmers. Most of my clients treat their own animals and the main activity was drug sales but they require proper professional advice.

On realising that a veterinarian shall not live by the needs alone, the agriculture aspect was introduced. We provide seeds, fertiliser, pesticides and other farm inputs. We have gone far in this success. In 1998 I was contracted to do a rinderpest vaccination campaign in Transmara District by the government through PARC and this was an indication of appreciation and that I was able. The campaign was one of the successful ones in a difficult situation. With innovation and dedication new heights will be achieved and the sky is the limit.

7. **Andrew Pello, Private Animal Health Assistant, Kapenguria, Kenya**

In 1999 I was employed as a Veterinary Assistant Field Officer by the PARC project of AU/IBAR to prepare for private delivery of an animal health system in the divisions of Alale and Kasei of West Pokot District, Kenya. The two divisions are about 35,000 km². This is a real pastoralist area where there are cross-border raids and above all livestock diseases, which was ranked as a major problem. Government veterinary officers rarely go there and hence the area has been marginalised. With the exit of the project after three years, I had to privatise alone, using my own savings and drug loan from a private vet in Kapenguria. Thanks go to the NGO who had facilitated me to reach most of my current customers (Livestock owners and CAHWs).
I have managed to earn a living for myself and family through clinical work and sale of drugs. CAHWs on the other hand have benefited most from training and incentives they earn from drug sales and treatment. Farmers have had high production in terms of milk, size of herd, quality skin and healthy cows, hence poverty reduction. Livestock owners are satisfied that quality drugs are readily available in their manyatta, grazing fields and across the border with CAHWs who are actually my right hand.

Regular follow-ups, training, dialogue, demonstration and respecting the culture of the local community have gained me a lot of respect and trust. These have assisted me to introduce new drugs and as a result make more drug turnover. With about 30 community animal health workers who are trained, they have assisted to push drugs to various destinations up to northeastern Uganda where they migrate with their livestock.

Because of the increased demand for drugs after giving out extension messages regarding acaricides, trypanocides, etc., I have started a drug shop that is going to be open every day, and has one trained CAHW and an assistant to serve other CAHWs and stockowners when I am away.

Some vets fear working in remote pastoralist areas – but that is where rich ‘tycoons’ are. Count the number of animals they have, you will only see millions! Let them take a risk and try. I would like to explore more business avenues soon on livestock marketing and products, e.g. hides and skin, honey, etc.

8. Dr Benson Ririmpoi, Private Veterinary Practitioner, West Pokot, Kenya


CAPE and SNV, after several contacts, identified me as an interested and self-motivated vet who could establish a private pastoralist practice in West Pokot District. For one year I went through the process of familiarising myself with the project design/model and all the stakeholders and also creating linkages at all levels of the business structure. In the process I did a feasibility study and developed a business
proposal/plan. Before establishing the business, all NGOs involved in community-based animal health agreed that the district should adopt a vet-supervised system using animal health assistants and CAHWs. The district has four zones with three private animal health assistants serving the CAHWs in the various zones. We took over about 50 CAHWs trained by NGOs. We organised refresher courses to promote business skills in the CAHWs so they may be more entrepreneurial. We also decided to bring ‘quacks’ on board by taking them through CAHW and business skills training so that we could penetrate the market further and boost business. Linkages with pharmaceutical companies have enabled the business to get supplies at competitive prices which helps to maintain loyalty from the animal health assistant and CAHWs. Two years down the line, the practice is fully functional with three private animal health assistants and about 30 active CAHWs doing business with the private vet through the main drug shop in Kapenguria.

During the last two years, the business has been growing and the animal health assistants and most of the CAHWs are also making a living out of their businesses. Promotion for the business has been carried out through farmer field days, field demonstrations and farmer training during market days in collaboration with the pharmaceutical companies and the Ministry of Livestock Development. More and more livestock owners are coming to the shop for goods and services. Advisory services provided at the shop and in market places are also causing the livestock owners to prefer coming to the shop.

The business has also diversified into agro-chemicals and other farm inputs in order to boost the sales turnover. More recently, the business diversified into AI services which also cover parts of neighbouring Trans-Nzoia. The AI service is combined with clinical services and distribution of drugs to agro-vets along the AI route using a motorbike. This has significantly boosted the income of the business.

The practice has greatly enhanced the quality of animal health services delivery in the district and has helped increase herd size and productivity through the following means:

• service is provided by the network of animal health assistants and CAHWs who have some level of training and are supervised by a private vet
• advisory and extension services offered to the livestock owners from the shop and during field days/demonstrations have helped the livestock keepers better manage the health of their animals

• quality drugs are now closer to the livestock keepers

• there is now an efficient disease reporting system from the CAHWs to the private vet who files monthly reports to the DVO and reports any disease outbreaks

• the CAHWs carry out vaccination campaigns organised by the practice in areas which are otherwise inaccessible.

9. Dr Ahmed Abdi Gedi, Private Veterinary Practitioner, Somalia

In 1991 the government of Somalia collapsed and all my properties were looted so I fled to a Kenya refugee camp. After four years sitting in a refugee camp I decided to go back and challenge the risks I escaped before. I went there without equipment, money, drugs; what I had only was willingness. Luckily I found a trader. We negotiated and agreed that he purchased the drugs I needed and I market the drugs. We started in this way and we shared the profit from the drugs and services.

There was a civil fighting, clan conflict revenges, every community was isolated from the neighbouring communities. In order to start working I decided to risk myself and the property of the trader to exploit the market of the insecure areas. I succeeded to work and provide services without problem because I used clan elders to facilitate me to cross ‘green lines’ and tell the communities that I am neutral and not involved in the fighting. There was a very good market and within two years I opened two vet drug pharmacies of my own. The booming market was the result of insecurity. The security improved and life became normal but no prosperity of my business. The profit I made in the first two years is five times more than the profit I made in the next six years. All the pastoralists in my area know or have heard my name,
they respect me and I always distance myself from the conflicts but I participate in reconciliation meetings.

From 1995 up to now my business is growing steadily. I have two pharmacies in different towns. I am also a drug supplier to nomadic animal health auxiliaries. Drug importers trust me – if I have a market I can borrow even one shipment of drugs. I am successful but a long way is ahead of me. I have no transport facility. I don’t use vaccines due to lack of cold chain, no small laboratory for minor diagnosis, not enough finance.

10. Yussuf Mohamed Jama, Private Animal Health Assistant, Somalia

I opened a veterinary pharmacy in Ivigave, the regional capital of Sanag region and I put in the pharmacy all veterinary medicines commonly used in the region. This initial investment was US$ 500 – half from Action Aid and half of my own.

I kept or exceeded the ethics of the veterinary profession. When I went to pastoralists I followed them when they moved to remote areas that have no roads and I stayed with them for some time. I used to carry my veterinary drugs with donkeys and travelled with them. They welcomed me warmly because they said that they have never before seen a veterinary professional moving with the nomads and who sold the medicines at favourable prices. I used to give advice on solving animal disease problems. They trusted me, and our relationship has improved steadily over the years. They were pleased that they did not have to travel to the cities any more to find medicines for their animals when they became sick. They were grateful for easy access of veterinary service for their animals and even saved money and time previously spent for transportation. They finally realised that it was their mistake that they did not provide correct treatment to their animals. Now they recognise that it is good and beneficial for them to bring their animals to the veterinary professionals for treatment. They accept to pay willingly to the livestock professional for his services.

To summarise my successes: when I opened a pharmacy of veterinary drugs and treated the sick animals and also gave advice to the pastoralists, the animals became healthy and produced more milk and meat. The pastoralist communities then had a better economy.
11. Dr Bashir Osman Bashir, Private Veterinary Practitioner, West Khordfan, Sudan

A professional success:
I became a bridge between the community, CAHWs, government and NGOs. In the past all the relationship is to give you license for practising the veterinary job but now we share the ideas with government and NGOs about how to:

- develop veterinary services
- increase knowledge through the community about how to use drugs
- what is the good way to follow up CAHWs
- be on hand so as to control diseases
- re-build the lost trust between the community and vet-doctor, a trust that had been lost because of the bad practices of the drug merchants.

A humanitarian success:
People of my area know that all animals can be treated not only the productive ones (cows, sheep and equines). However they bring to my clinic dogs, cats and birds. That’s what surprises all people.

A personal success:
I became able to build my own world. To get married to the woman I love. To have a home and now I am going to receive my first kid on the coming month.

12. Dr Yousif Morakkah, Private Veterinary Practitioner, West Khordfan, Sudan

In 1997 I came to Muglad town in Abiai Province, West Khordfan State, with little money. I bought some drugs from the pharmacies in Muglad and started moving to the small markets outside the town. I also used bicycles and camels to get to nomad areas which cars cannot reach. Step by step I saved some money. By the year 2002 I was able to buy a car which helps me to reach places that I couldn’t reach before.
Since I came to Abiai Province my relationship with the nomads in this area grows up. Many livestock owners are confused between vets and ‘quacks’ but this strong relationship allows me to gain their confidence. Someone said to me if you gave me drinking water and say it will cure my animals I will take it because you tell the truth.

We choose and train many CAHWs and now we have well-trained para-vets spread all over the province so they assist in treating and vaccinating many livestock. So I am happy and agree with myself.

13. Dr John Sebur, Private Veterinary Practitioner, Southern Sudan

Nilte Agro-Veterinary Services (NAVS) is the first private veterinary drug shop established in South Sudan. This area is under war situation hence roads are poor, there is inadequate public transport and no good premises ethically suitable for a drug store.

Insecurity brought problems to NAVS. The drug store was destroyed eight months after it had started by a bomb from an enemy plane. However it re-started five months after the incident. The authority on the ground has no vet services department, laws or enforcement system. There are no financial institutions and no support at all.

NAVS had to grow after re-starting. In this, necessary connections with other partners had to be made. Partners include NGOs providing vet services in South Sudan, drug companies in Uganda, and the National Drug Authority, which helps to ensure market and purchase of quality drugs. The local OXFAM project now purchases its veterinary drugs from me. On the other hand, enabling environment had to be created through making dialogue with livestock owners and establishing friendly relations with other stakeholders.

NAVS has sustained itself now for about two years. It is able to maintain three staff and myself to some extent. Improved livestock health has resulted in increase of productivity, hence an increase in the incomes of livestock owners through sales of stock and products. Protein intake of the population has also increased. Moreover, diversification by including agro-seeds and tools has helped the sustainability of the business.
14. Dr B.A. Mafwere, Private Veterinary Practitioner, Morogoro, Tanzania

I am working in Tanzania serving mainly people living in Morogoro municipal and Morogoro rural district. My urban clients are keeping exotic cattle and chicken. Few are keeping local chicken, goats and other fowl species. My rural clients are mainly the Maasai and Mang’ati by tribe. They are semi-pastoralists migrated to Morogoro from Arusha region. The reason for immigration I think was to look for a green pasture. Coming to Morogoro created a lot of opportunities to all of us living in Morogoro and nearby regions.

My first challenge was to quit government employment and go to self-employment. This was not a simple thing because I had to leave my guaranteed monthly salary and big title which gave me recognition in society. I had to forget about scholarships, working company, security and other benefits. I had to start a new life, working on my own. I had a small capital. I had no assurance of financial assistance from anywhere. I knew I was taking a big risk to me and to my family. But I had to take it.

Now it is almost six years since I became self-employed. My business is growing. I have a sound working capital. More clients are coming for services. I am proud of that. I am serving more clients now than during my government services. More semi-pastoralists are becoming my friends because of good services I am giving to them. Today I am happier than before. People respect me because of the services I give them, not just for my title. The veterinary profession is good. We have many chances for individual development and to help the development of mankind as a whole. Let us join forces for the benefit of us all.

15. Dr Elisante Ngowi, Private Veterinary Practitioner, Arusha, Tanzania

Allow me to briefly present my background as I rightly believe it has shaped my life and has a direct relationship with my three successes. I am a first born with four young brothers and a sister. My mother looks after the family farm in Moshi – planted with maize, coffee and banana. My father, still active, was a very hard working businessman specialising in buying and selling grains. I would travel with him a lot around the country,
so I was able to work, discuss, urge and question him on his business undertakings. Being a first born and a son of a successful self-employed man both placed a burden on my shoulders, but has given me a rich experience on how to do business, manage money and time and the need to take risks in life.

Before working in the Maasai pastoralist areas in Ngorongoro, I had established Alpha Veterinary Centre (AVC) in Arusha municipality. This is a high potential dairy area. AVC was established in March 1996 as a sole proprietary company. This I consider as one of my biggest and most significant achievements in life. I then knew I had what it takes to be a private practitioner. My previous experience included working as a government DVO for five years in two districts in Tanzania. Also for three years I had been involved and participated in delivering private ambulatory veterinary services in rural Queensland, Australia while doing my Master’s degree. Coming back to Tanzania I had the opportunity of working with the multinational drug company Rhone Poulenc as an Animal Health Manager (salesman).

So in March 1996, with a lot of fear, worries and discouragement from friends and colleagues, I took the risk of completely resigning both from the government and Rhone Poulenc to go private. The most ardent support I can remember came from my father. My wife Christine, also a veterinarian, was so understanding but still with worries as I was becoming the first vet in Arusha deciding to go fully private and self-employed instead of moonlighting like others. We had a lot to discuss: what if I don’t get a lot of clients, my sources of loans if the need arises, huge interest rates of the banks, competition with government vets. What if policy and legislature don’t change rapidly enough to push the privatisation process fast enough? Looking back some of the worries are still there, but the business has prospered and we have hope and success. Christine was able to support me by contributing TSh 250,000 (US$ 250) she had been saving out of her salaries, together with my own saving of TSh 1.2 million (US$ 1200) and a loan of TSh 600,000 (US$ 600) from my brothers and sister.
The business in Arusha grew steadily with time. In June 1997 I joined forces with three artificial insemination (AI) practitioners in establishing a fully privatised AI service in Arusha – the first one in the country. The four of us had attended an entrepreneur’s course run by a local agency. We are proud that the idea came out of that course. Together with this team we were able to add clinical services in Arusha and another district and later offer East Coast fever immunisation. We have been immunising over 300 dairy cows each year.

In March 2000 we started work among the Maasai living in the Ngorongoro Conservation Area. A bilateral Denmark-Tanzania government project involved in poverty reduction, through a restocking programme, private veterinary establishment and water provision. Being in charge of private vet-services we had been able to train 40 CAHWs who will be working in the bomas and villages in drug and service delivery.

Looking back I am glad I made the decision to go private. This has enabled me to acquire some assets in life, something I feel I would not have been able to do if I had continued at the peanut government salary. My private work has enabled me to build a house, acquire a two-acre farm well planted with trees and even purchase my own business premises. We have also been able to buy a car and two motorbikes for clinical/AI work.

Private work has given me great satisfaction not only in material things but appreciation of the work I am doing among the pastoralists. One such appreciation is the invitation to participate in workshops like this one.

16. **Titus Benga, Private Animal Health Assistant, Mbale, Uganda**

It was in November 1997, having successfully completed a three year course in Animal Husbandry at Bukalasa National Agriculture College, that I saw there was need to start a mobile clinic because there was a demand from the livestock owners first of all of Namalu, sub-county of Nakapiripirit District north east of Uganda, and Karamoja region which was by then under Moroti District. I started on my own with some small savings that I had kept with a friend when I left for college.

Then in June 1998, the number of my clients (farmers) increased because there was need of services from the neighbouring sub-counties. There was also a non-governmental, non-profit making organisation called Karamoja
Projects Implementation Unit promoting animal health services in Karamoja region and there giving soft loans to veterinarians who could provide the services to farmers at a cost. I applied for a loan of USh 1.5 million (US$ 750) as a starter and by the end of June the same year (1998) my loan was approved and drugs worth the above amount of money were delivered. I successfully paid off the loan five months ahead of schedule and was left with a profit which has continued to date, for five years now. A self-employed and motivated manager of my own business.

In December 2002, Nakapiripirit District Local Government Tender Board advertised a tender to supply the district with acaricide for one year for the restocking programme being implemented in many districts of Uganda, of which my district is among the beneficiaries. I applied with four other competitors. I am glad I won the contract because of the confidence I built with farmers and the district authorities from the time I had a mobile clinic to setting up a drug shop. Now I have eight CAHWs whose training was funded by AU/IBAR and they have helped me to deliver services to farmers in difficult areas.

I cannot forget to mention that I have won good relationships with government veterinarians and other stakeholders (other practitioners) both in Karamoja and Soroti for example.

17. Dr George William Opolot, Private Veterinary Practitioner, Soroti, Uganda

I am among a group of the first vets to go 100% private in 1995 and in the pastoralist area I was the only one. I have never been employed by government. Through government liberalisation and privatisation of vet services a component livestock services project was set up implemented by Uganda Veterinary Association to oversee privatisation activities. The first of which I was a beneficiary was Business Skills and Management Training in 1995, which actually gave me the self-motivation and determination to start up business without a loan since I had no collateral.

I actually started the practice in my own grass-thatched house as a reporting and treatment centre for my village. There was an adequate cattle population, no rent needed and capital was very small, less than US$ 30, which I used to buy a few antibiotics, wormers and acaricides. I
possessed a stethoscope, thermometer, needles and syringes as initial equipment to aid my work and transport was by bicycle treating animals in distant villages. With business skills knowledge I set business goals to be achieved in five years time, i.e. end 2000:

- have an adequate turnover
- build a house, buy a vehicle and two motorcycles
- employ up to five personnel
- open up a ‘model’ farm

My business has been able to achieve a good turnover and I have been able to repay most of my loans. I have built up my assets and now own two residential houses, a pick-up truck, two motor cycles and a 30-acre farm, fenced and stocked with 35 head of cattle, 23 of which are 75% crosses with exotic breeds and the others locals. I also have 19 Boer crossed goats.

I managed to capture a large market share by training farmers via seminars, publicity in functions like weddings, printing promotion T-shirts given to an organised distribution network of stockists, para-vets and CAHWs trained by different NGOs which are spread across five districts of Soroti, Katakwi, Kumi, Kotido and Moroto. This coupled with good customer care, technical personnel and our commitment to the goals tremendously increased demand for our services and inputs.

Because of increasing competition we have gone further to register a limited liability company which is already two years old. The company has won government contracts in cattle dip construction, tendering AI, supply of improved livestock to farmers in our area and National Agricultural Advisory Services at district level, which no other public vet is allowed to do according to tendering laws. And we have a prospect to import our own vet supplies hence further diversifying business.
2. List of participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Address</th>
<th>Telephone, fax and e-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abdi Adan Abdirahman</td>
<td>AHA*</td>
<td>c/o Nomads Agrovet Store, El Wak, Kenya</td>
<td>Tel: Mandra 2046</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Tel: El-Wak 2136</td>
</tr>
<tr>
<td>Dr Bashir Osman Bashir</td>
<td>Vet</td>
<td>c/o Adan Adan Saleh, FAO, Khartoum, Sudan</td>
<td>Tel: Sudan 0643-22245 (FAO)</td>
</tr>
<tr>
<td>Titus Benga</td>
<td>AHA</td>
<td>P.O. Box 1347, Mbale, Uganda</td>
<td>Tel: 077-886263; 075-955453 e-mail: <a href="mailto:titusbenga@yahoo.com">titusbenga@yahoo.com</a></td>
</tr>
<tr>
<td>Tesfaye Erenso</td>
<td>AHA</td>
<td>P.O. Box 39, South Omo, Ethiopia</td>
<td>Tel: 251-06-750347</td>
</tr>
<tr>
<td>Dr Ahmed Abdi Gedi</td>
<td>Vet</td>
<td>Buale, Somalia</td>
<td>Tel: 2525-153055</td>
</tr>
<tr>
<td>Ephrem Getachew</td>
<td>AHA</td>
<td>P.O. Box 054, Jijiga, Ethiopia</td>
<td>Tel: 251-05-752240</td>
</tr>
<tr>
<td>Yussuf Mohamed Jama</td>
<td>AHA</td>
<td>c/o VETAID, Hargeisa, Somalia</td>
<td>Tel: 252-828-9426</td>
</tr>
<tr>
<td>Dr Joseph Wagara Karanja</td>
<td>Vet</td>
<td>P.O. Box 28, Nyahururu or P.O. Box 370 Maralal, Kenya</td>
<td>Tel: 254-(0)65-32104</td>
</tr>
<tr>
<td>Dr Abakano Kereyu</td>
<td>Vet</td>
<td>P.O. Box 6380, Addis Ababa, Ethiopia</td>
<td>Tel: 251-186821</td>
</tr>
<tr>
<td>Dr B.A. Mafwere</td>
<td>Vet</td>
<td>P.O. Box 1116, Morogoro, Tanzania</td>
<td>Tel: 23-2604964; 0744-275307 e-mail: <a href="mailto:bhakilana@yahoo.com">bhakilana@yahoo.com</a></td>
</tr>
<tr>
<td>Dr Yousif Morakkah</td>
<td>Vet</td>
<td>c/o Adan Adan Saleh, FAO, Khartoum, Sudan</td>
<td>Tel: Sudan 0643-22245 (FAO)</td>
</tr>
<tr>
<td>Dr P. Mathenge Mwangi</td>
<td>Vet</td>
<td>P.O. Box 71, 02500 Narok, Kenya</td>
<td>Tel: 254-(0)50-22161; Mob: 0722-804780</td>
</tr>
<tr>
<td>Dr Elisant Ngowi</td>
<td>Vet</td>
<td>Alphavet Centre, P.O. Box 10750, Arusha, Tanzania</td>
<td>Tel: 0744-81-85-04 e-mail: <a href="mailto:alphavets@hotmail.com">alphavets@hotmail.com</a></td>
</tr>
<tr>
<td>Dr George William Opolot</td>
<td>Vet</td>
<td>P.O. Box 713, Soroti, Uganda</td>
<td>Tel: 256-45-61647/077-410129 e-mail: <a href="mailto:wilcon@utlonline.co.ug">wilcon@utlonline.co.ug</a></td>
</tr>
<tr>
<td>Andrew Pello</td>
<td>AHA</td>
<td>P.O. Box 434, Kapenguria, Kenya</td>
<td>Tel: 0733-496156</td>
</tr>
<tr>
<td>Dr Benson Ririmpoi</td>
<td>Vet</td>
<td>P.O. Box 434, Kapenguria, Kenya</td>
<td>Tel: 054-62298</td>
</tr>
<tr>
<td>Dr John Sebur</td>
<td>Vet</td>
<td>P.O. Box 113, Bombo, Uganda</td>
<td>Tel: 006-77-593800 e-mail: <a href="mailto:jsebur@hotmail.com">jsebur@hotmail.com</a></td>
</tr>
</tbody>
</table>

* Animal Health Assistant
3. Workshop evaluation

The 17 workshop participants were asked to evaluate the workshop with regard to the following parameters using a scale of 1 to 5, where 1 = low/not at all/poor and 5 = high/very/completely/excellent.

- **How relevant was the workshop to you?**

- **Were the workshop objectives achieved?**

- **How do you rate the workshop logistics and general organisation?**
How do you rate the workshop facilitation?

How useful was the business opportunities training session?

How do you rate the workshop venue and facilities?
The participants were also asked for any additional comments regarding the workshop and its follow-up. Comments made included:

- share ideas with other private practitioners in pastoralist areas
- more training or lectures would have improved the workshop
- have more workshops in the future
- follow-up workshops should be held in another country within the region
- provide feedback to the participants
- arrange exchange visits between private practitioners
- there should be regular contact amongst the private practitioners themselves
- include representatives from major drug companies, NGOs and relief organisations in the discussions
- more time should have been allocated to the business opportunities training session.
4. Formation of the Pastoralist Private Veterinary Practitioners’ Forum

Following on from the proposal which arose during the workshop for the formation of an association for private animal health practitioners who operate in pastoralist areas, the participants convened a meeting at the end of the workshop to discuss how to carry this idea forward. Their report of that meeting is reproduced below.

“We, the following members, have agreed to establish a non-formal organisation to be called the Pastoralist Private Veterinary Practitioners’ Forum (PPVP Forum): Abdi Adan Abdirahman, Dr Bashir Osman Bashir, Titus Benga, Tesfaye Erenso, Dr Ahmed Abdi Gedi, Ephrem Getachew, Dr Joseph Wagura Karanja, Dr Abakano Kereyu, Dr B.A. Mafwere, Dr Yousif Morakkah, Dr P.M. Mwangi, Dr Elisant Ngowi, Dr George William Opolot, Andrew Pello, Dr Benson Ririmpoi and Dr John Sebur.

1. Objectives of the forum

a) Allow members to share and exchange experiences.

b) Lobby for clear national policies regarding delivery of veterinary services and privatisation.

c) Promote networking among members and other stakeholders.

d) Lobby for active involvement of private vets working in pastoralist areas in government and NGO contracts, e.g. disease surveillance, vaccination, advisory services, training and consultancy.

e) Lobby for training opportunities and exchange visits.

f) Promote links with the Community-based Animal Health Network.

2. Mode of implementation

The members chose Dr P.M. Mwangi of Kenya to liaise with AU/IBAR.

3. Contacts

Contacts among members will be made through e-mail and post, preferably using AU/IBAR and PACE offices in the respective countries.
4. Networking

The members are to network at country level and to give feedback to the East African Forum representative.

5. Follow-up

The East African Forum representative is to follow up the recommendations of the AU/IBAR workshop held in Nakuru, Kenya, 6–9 August 2003.
5. Business skills development

The participants were given the following information as a handout.

**How to identify a business opportunity**

A business opportunity is an idea or market that can be exploited for profit. Many businesses fail because a wrong assessment of a business opportunity has been made. To determine a good opportunity you must systematically and carefully analyse your idea or opportunity. It is a good idea to generate several business ideas and to assess their feasibility and viability before deciding on a course of action. There are many different ways to generate business ideas; some of these are listed below.

1. **Building on your skills, hobbies or interests**

List all your skills, hobbies and interests. For each one, try to think of a business idea to match (see Example 1).

2. **Combining two existing businesses in a new way**

Did you know that many successful new businesses are actually combinations of old businesses? For example, a few years ago, most

**Example 1.**

<table>
<thead>
<tr>
<th>Interest/hobby/skill</th>
<th>Business idea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Photography</td>
<td>Internet tourism</td>
</tr>
<tr>
<td></td>
<td>Game photo albums</td>
</tr>
<tr>
<td></td>
<td>Game videos</td>
</tr>
<tr>
<td></td>
<td>Game greetings cards</td>
</tr>
<tr>
<td>Reading newspapers</td>
<td>Veterinary articles</td>
</tr>
<tr>
<td></td>
<td>Veterinary newsagent</td>
</tr>
<tr>
<td>Keeping pets</td>
<td>Pet consultancy</td>
</tr>
<tr>
<td>Cookery</td>
<td>Pet foods</td>
</tr>
<tr>
<td></td>
<td>Preserved game meat</td>
</tr>
<tr>
<td>Medical skills</td>
<td>Vet herbal clinic</td>
</tr>
<tr>
<td></td>
<td>Vet extension services</td>
</tr>
</tbody>
</table>

Private veterinary practice in pastoralist areas of eastern Africa
Kenyan consumers would go to a butchery and eat their nyama choma (roasted meat) before visiting their favourite bar. Today, bar businesses and nyama choma businesses are combined. Petrol stations have introduced grocery shops within their businesses. A children’s hair salon with play facilities could be an attractive concept. What about a Christian disco bar that sells only non-alcoholic drinks and plays Christian music to help worshippers whirl away the night! You can probably think of similar combinations within the animal health/farming field.

3. Observing trends

Look at current trends and translate them into business ideas by identifying a possible need associated with the trend (Example 2). Local trends will help you identify home trade-based businesses while regional trends should help to define export opportunities. The trends may be economic, social, cultural or technological. Observe both local and international trends in the veterinary field and identify the needs arising from them – and the products or services that will meet those needs.

4. Recognising needs

Consumers buy products to satisfy their needs, not for technical attributes. A need is therefore a business opportunity. Abraham Maslow, a celebrated humanist psychologist, identified a number of levels of human needs,

Example 2.

<table>
<thead>
<tr>
<th>Trend</th>
<th>Need</th>
<th>Business idea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase in numbers of secondary school leavers</td>
<td>Further education</td>
<td>Private university or college</td>
</tr>
<tr>
<td>Increase in zero grazing</td>
<td>Intensive cattle-rearing techniques</td>
<td>Animal feed production</td>
</tr>
<tr>
<td>Increase in arson</td>
<td>Risk management</td>
<td>Animal veterinary services</td>
</tr>
<tr>
<td>Water shortages</td>
<td>Sustainable water supply</td>
<td>Fire insurance</td>
</tr>
<tr>
<td>Retrenchment</td>
<td>Desire for self-employment</td>
<td>Water harvesting techniques</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Business start-up consultancy</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Micro-finance bureau</td>
</tr>
</tbody>
</table>
ranging from very basic physical needs such as the desire for food, water, clothing and shelter to advanced and personalised psychological needs, such as the need for status. People have a mixture of needs and, at any one time, some needs may be more dominant than others. Identifying unfulfilled or unserved needs is a sure way of generating business ideas (Example 3).

Example 3.

<table>
<thead>
<tr>
<th>Maslow’s ‘hierarchy of needs’</th>
<th>Explanation</th>
<th>Veterinary-related business idea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic needs</td>
<td>Need for clothing, shelter, food</td>
<td>Game meat, pet foods</td>
</tr>
<tr>
<td>Safety needs</td>
<td>Need for property and job security</td>
<td>Animal health services, guard dogs</td>
</tr>
<tr>
<td>Social needs</td>
<td>Need for acceptance</td>
<td>Pet shows and clubs</td>
</tr>
<tr>
<td>Self-esteem needs</td>
<td>Need for recognition</td>
<td>Rare breeds provision or advice</td>
</tr>
<tr>
<td>Self-actualisation</td>
<td>Need to prove one’s abilities</td>
<td>Self-care lessons</td>
</tr>
</tbody>
</table>

5. **Using waste products**

Look closely at what appear to be waste products – they may not be waste at all. For example, banana skins can produce table vinegar. Cow dung can be dried to make cooking fuel. The same dung mixed with grain straws provides a low-cost building material. You can probably think of several types of veterinary-related waste and its potential use (Example 4).

Example 4.

<table>
<thead>
<tr>
<th>Waste product</th>
<th>Business idea</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sawdust</td>
<td>Chipboard</td>
</tr>
<tr>
<td>Coffee husks</td>
<td>Cooking fuel brickettes</td>
</tr>
<tr>
<td>Bones</td>
<td>Buttons and glue</td>
</tr>
<tr>
<td>Grain husks</td>
<td>Organic fertiliser</td>
</tr>
<tr>
<td>Animal dung</td>
<td>Organic manure, fuel</td>
</tr>
</tbody>
</table>
Screening your business ideas

Having generated your business ideas, you need to screen them to see which have the potential to be developed further. Screening means investigating and validating the idea.

1. Screen the idea subjectively, i.e. in relation to yourself:
   - select the idea most compatible with your objectives
   - select the idea for which you have the skills
   - select the idea that captures your interests
   - consider your commitments.

2. Screen the idea objectively:
   - is there a market for the product/service?
   - are the raw materials available?
   - is the technology associated with the idea available?
   - are the skills to make the idea a success available?
   - does the idea have problems relating to government policy?
   - are start-up costs within your reach?

Common characteristics of a good business idea

- does not require excessive investment capital
- easy to manage
- offers good returns on investment
- has scope for growth, expansion and diversification
- requires skills which are available or can be easily achieved
- involves minimum risk
- is compatible with the owner’s goals and interests
- is not against the expectations of society
- has a short gestation period (break even point)
- has a readily available market
- has an adequate supply of inputs
• is easy to exit (dissolve) if necessary
• does not require frequent and extensive technology changes.

You are now ready to select an idea that suits your current business, to conduct your research and to write your business plan. Do not be overly pessimistic – entrepreneurs are both born and made! I wish you every success. An outline for your action plan appears on page 55.

**Networks and networking**

Standard methods of promotion, such as advertising, leaflets and mailshots, are useful techniques, but they can be expensive and may not reach your target market. ‘Networking’ in a promotional context means making contact and creating business alliances with other relevant people and organisations. In the veterinary field, your contacts could include other practitioners, government agencies and donor-funded projects and programmes (see Fig. 5).

Page 56 illustrates a range of potential business strategies. The integration approach, where veterinary practices become involved in marketing livestock and/or livestock products, could be particularly appropriate to veterinary practices in pastoralist areas.

---

**Fig. 5. Organisation network for a private veterinary practitioner**

Private veterinary practice in pastoralist areas of eastern Africa

---

54
<table>
<thead>
<tr>
<th>My business idea is:</th>
<th>Activity/action required</th>
<th>Resources needed</th>
<th>What assistance will I need and where will I get it?</th>
<th>Date for completion of activity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Describe the nature of the business, e.g. retail, wholesale etc.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>What legal form will it take, e.g. sole proprietorship etc?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Describe product or service</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Select location</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Design management and team structure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Conduct market research</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Analyse the competition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Design a pricing structure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Design a marketing strategy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Source equipment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Source raw materials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Organise insurance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Design record-keeping system</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Analyse financial needs and identify sources of finance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Category</td>
<td>Strategy</td>
<td>Definition</td>
<td>When used</td>
<td></td>
</tr>
<tr>
<td>--------------------------------</td>
<td>---------------------------</td>
<td>----------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Integration strategies</td>
<td>Forward integration</td>
<td>Gaining ownership or increased control over distributors or retailers</td>
<td>When distributors are limited, expensive and unreliable; when industry is growing and resources are available</td>
<td></td>
</tr>
<tr>
<td>(collectively called vertical</td>
<td>Backward integration</td>
<td>Seeking ownership or control over suppliers</td>
<td>When suppliers are limited, expensive and unreliable; when urgent supplies are needed</td>
<td></td>
</tr>
<tr>
<td>integration)</td>
<td>Horizontal integration</td>
<td>Seeking ownership or control over competitors</td>
<td>When monopoly is possible and legal; when increased economies of scale are needed</td>
<td></td>
</tr>
<tr>
<td>Intensification strategies</td>
<td>Market penetration</td>
<td>Increasing product share in current market through marketing</td>
<td>When market is not saturated and competitor share is declining; when increased economies of scale are required</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Market development</td>
<td>Introducing present product into new geographical areas</td>
<td>When reliable, cheap distribution channels are available; when a new market appears; when there is excess production capacity</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Product development</td>
<td>Introducing new products into current market</td>
<td>When have a successful product in a mature market; when competitors have better products; when there are rapid technological developments</td>
<td></td>
</tr>
<tr>
<td>Diversification strategies</td>
<td>Concentric diversification</td>
<td>Adding new but related product lines</td>
<td>When there is no or slow market growth; when current products have declining sales or market share</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Horizontal diversification</td>
<td>Adding new but unrelated products aimed at current customers</td>
<td>When there is a need to increase revenue; when market is very competitive and/or has little growth and current distribution channels can handle a new product</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Conglomerate diversification</td>
<td>Adding a new, unrelated product line aimed at new or existing customers</td>
<td>When annual sales/profits are in decline; when the opportunity to buy another business appears; when there is financial synergy between existing and new business</td>
<td></td>
</tr>
<tr>
<td>Other strategies</td>
<td>Joint venture</td>
<td>Two or more businesses forming a third organisation</td>
<td>When there is a need to combine public and private sector or local and foreign interests; when comparative advantage can be exploited; when project has large resource demands; when small firms have to compete with much larger ones</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Combination</td>
<td>Pursuing two or more business strategies at the same time</td>
<td>Combinations of strategies, e.g. retrenchment and divestiture</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Retrenchment</td>
<td>Regrouping through cost and asset reduction</td>
<td>When there are difficulties in realising projected sales; when business is operating inefficiently and has inadequate profitability</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Divestiture</td>
<td>Selling part of the business</td>
<td>When retrenchment has failed; when another part of the company needs more resources; when part of the business is not performing well</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Liquidation</td>
<td>Selling all the business assets</td>
<td>When retrenchment and divestiture have both failed and bankruptcy is the only alternative</td>
<td></td>
</tr>
</tbody>
</table>
### 6. Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHA</td>
<td>Animal Health Assistant</td>
</tr>
<tr>
<td>AU</td>
<td>African Union</td>
</tr>
<tr>
<td>AVC</td>
<td>Alpha Veterinary Centre (Tanzania)</td>
</tr>
<tr>
<td>AI</td>
<td>Artificial Insemination</td>
</tr>
<tr>
<td>CAHW</td>
<td>Community-based Animal Health Worker</td>
</tr>
<tr>
<td>CAPE</td>
<td>Community-based Animal Health and Participatory Epidemiology</td>
</tr>
<tr>
<td>DANIDA</td>
<td>Danish International Development Assistance</td>
</tr>
<tr>
<td>DFID</td>
<td>Department for International Development (UK)</td>
</tr>
<tr>
<td>DVO</td>
<td>District Veterinary Officer</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>FITCA</td>
<td>Farming in Tsetse Controlled Areas</td>
</tr>
<tr>
<td>IBAR</td>
<td>Interafrican Bureau for Animal Resources</td>
</tr>
<tr>
<td>KVA</td>
<td>Kenya Veterinary Association</td>
</tr>
<tr>
<td>NAVS</td>
<td>Nilte Agro-Veterinary Services (Sudan)</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-governmental organisation</td>
</tr>
<tr>
<td>PACE</td>
<td>Pan African Programme for the Control of Epizootics</td>
</tr>
<tr>
<td>PARC</td>
<td>Pan African Rinderpest Campaign</td>
</tr>
<tr>
<td>PPVP Forum</td>
<td>Pastoralist Private Veterinary Practitioners’ Forum</td>
</tr>
<tr>
<td>SNV</td>
<td>Netherlands Development Organisation</td>
</tr>
<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
</tr>
<tr>
<td>VSSP</td>
<td>Veterinary Service Support Project (Ethiopia)</td>
</tr>
</tbody>
</table>
CD and how to use it

This CD complements the printed summary proceedings and contains video interviews filmed during the Nakuru workshop.

To start:

For Microsoft Windows™ users:
Insert the CD into your CD-ROM drive and it should run automatically.
If it doesn’t start automatically:
1. Select START, RUN
2. Type D:\STARTpc.EXE (where D is the letter of your CD drive) and press Enter
3. The CD-ROM will then start.

Minimum system recommended:
Microsoft Windows™, Intel Pentium® 166 running Windows 95/98 or NT version 4.0 or later, 32 MB of RAM, sound card, CD-ROM drive, graphics card capable of displaying 16-bit colours at 800x600.

Please note the CD is not Apple Macintosh® compatible.