



ITM2SCALE CONSULTATIVE STAKEHOLDERS WORKSHOP ON TRAINING

Best Western Plus Colosseum Hotel Dar es Salaam, Tanzania, 9th -10th
December, 2015

Draft report

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Acronyms

CTTBD	Centre for Ticks & Tick Borne Diseases
DVO	District Veterinary Officer
DVS	Director of Veterinary Services
ECF	East Coast Fever
HH	House Hold
ILRI	International Livestock Research Institute
LITA	
LN	Liquid Nitrogen
SUA	Sokoine University of Agriculture
TVLA	Tanzania Veterinary Laboratory Agency
VCT	Veterinary Council of Tanzania

1. Introduction

This is a report of the proceedings of ECF vaccine Distributors held in Dar Es Salaam on 9th and 10th December, 2015 at Western Plus Colosseum Hotel. This meeting was organized with the aim to discuss and harmonize the ECF training curriculum, and also to deliberate on how and who will deliver and certify the training of the vaccinators. Training of vaccinator is key and crucial in delivering the ECF vaccine, but on the other hand it is also very important when it comes to business component of the ECF vaccination. Since this project is about upscaling of the ECF vaccination, therefore training of the vaccinators who form the last mile of ECF supply chain is important pillar to make the project successful.

The meetings was attended by ECF vaccine distributors and agents. It was also attended by representatives from Ministry of Livestock and Fisheries Development (DVS), VCT, TVLA, GALVmed, CTTBD and ILRI. Vaccinators who have been training and active or not active in ECF vaccination.

2. Day One 9th December, 2015

The meeting started with self-introduction where all participants introduced themselves and institutions they represent.

Opening remarks were given by Dr. @@@@ who represented the DVS, who apart from other things he welcomed all the participants and wished them fruitful deliberation. Ms. Lindsay Parish from USAID also and Dr. Henry Kiara from ILRI also spoke about the project and its importance to the economies of the livestock keeper and the national in general.

2.1. Setting the Scene

Dr. Henry Kiara presented the overview of the project and its rationale. This was done in order to make all participants on the same level of understanding especially those participants who didn't participate in the inception meeting in Bagamoyo.

Dr. Kiara highlighted that economic losses brought about by ECF are enormous in Tanzania and many other countries; given the cattle population in Tanzania of over 22 million, then it is necessary to address ECF as this accounts for significant portion of deaths in calves.

He pointed out that scale up of ECF immunization will contribute in reducing the economic losses incurred by cattle keepers. It was pointed out that ECF immunization has more advantages than other existing alternatives such as use of acaricides which leads to resistances and it is also difficult to manage, the chemotherapy option is expensive and zero grazing is not absolute and is not feasible in some areas. So vaccinators and would be vaccinators were informed ECF which has proved successful need to be up scaled hence ILRI is implementing ITM2Scale project in Tanzania for 2 years.

The challenges which faces ECF immunization were pointed out, these includes but not limited to limited coverage by existing distributors, existence of trained distributors but who lack equipments and financing mechanism, and limited cold chain infrastructure – LN, vaccinators also lack business orientation.

2.2. Discussion

Dr. Kiara presentation created a discussion from the participants and the discussion were along the following points

- There are many farmers who are not willing to vaccinate; this may be for cultural reasons
- The price of the vaccine prevents some farmers from vaccinating; although, some farmers have refused to vaccinate even when FAO project was running and subsidizing the cost.
- Anecdotal evidence shows that if the price is above 10,000, farmers are not willing to pay. CTTBD indicates that the production costs are now higher and therefore the cost at farm level will be higher also.

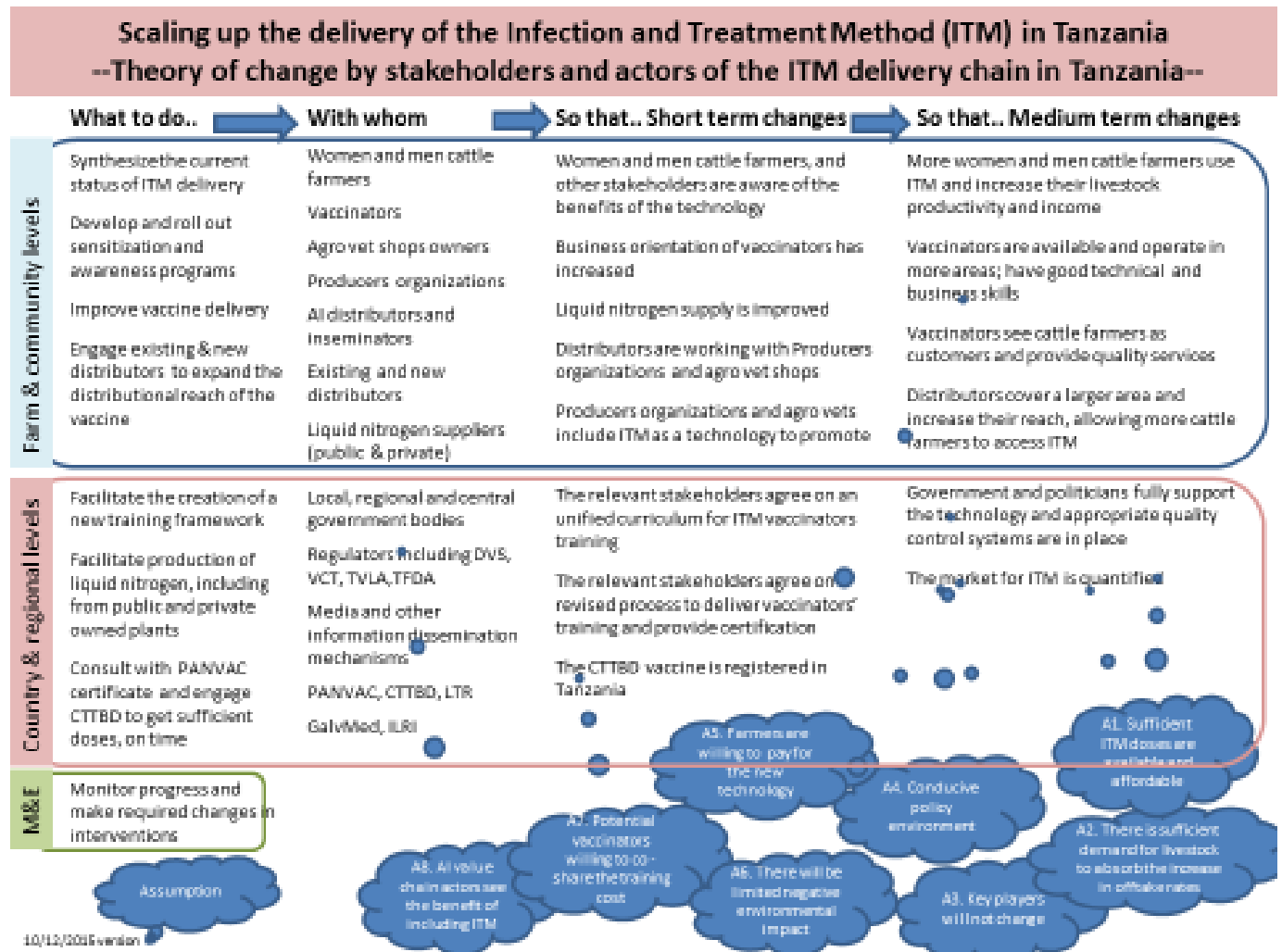
- There may be a risk of decreased meat availability at HH level, given lower mortality and therefore fewer animals to consume. This phenomenon hasn't been studied well.
- The vaccinators need to be well trained and a backstopping mechanism is to be in place
- Only 25% of livestock keepers use improved livestock practices, with different % for various services. Where provision of inputs and services increases, more farmers vaccinate. We therefore need to increase farmers' awareness and improve the delivery of the vaccine, the % of farmers vaccinating will increase.
- Offtake rate is still low- despite decrease in mortality. We also need to improve the overall value chain performance
- Change in mindsets is needed for farmers to reduce or stabilize the herd sizes once mortality rate decreases after vaccination
- Other challenges discussed include **a.** animals not fully protected against ECF and farmers question the vaccine and **b.** there are other tick borne diseases; **c.** the ticks are not killed by the vaccine.
- On the other one, this project will not replace the Livestock Ministry. We all have a role to play; this project needs to focus on ITM. Regarding point **a.** above raised during discussion, this is well known and vaccinators need to be well trained to observe the animals after vaccinations.
- The awareness package needs to be different for the vaccinators and for the farmers. For the farmers, the right information needs to be provided with respect to the targeted need for continuous dipping.
- Project looking at animal burden showed that half the animals died of ECF, the other diseases caused much fewer diseases. Once the animals are vaccinated against ECF, there is no evidence that the other diseases will increase; actually some will decrease.

2.3. Theory of Change

Isabelle Baltenweck presented the draft Theory of Change; the participants were then dived into groups to review the theory of change. Three guiding question were given to help in detailed review of the theory of change, the question are: 1. what makes sense; 2. what needs to be changed or added and 3. What needs to be dropped?

The group reported in plenary and the edits were as much as possible incorporated in the diagram. The improving exercise continued even on the second day, and at the end of the meeting the theory of change diagram was as below of Fig.1

Fig.1: Theory of Change



2.4. Presentations from Institutions

After work on theory of change each institution represented at the meeting had to present what they do or can do in relation to ECF vaccination particularly how the training for EFC vaccination.

Ministry of Livestock presented ECF Immunisation Standard Operating Procedures, Veterinary Council of Tanzania presented “ECF Training Curriculum- what to be included”, Ronheam International had two presentations, one ECF curriculum, and the other on ECF immunisation protocols. Tanzania Veterinary Laboratory Agency (TVLA) presented on their capacity to diagnose, and how they can participate in the up scaling of ECF Immunisation. GALVmed presented ECF training manual. CTTBD presented on their role in fighting ECF as manufacturer of the vaccine, and finally perception of the vaccinators on training from three meetings in Mwanza, Arusha and Dar were presented by a consultant Mr. Godfrey Bwana.

All these were setting the scene for day two discussions on how the training could be handled during the upscaling of ECF vaccination in Tanzania. It was observed that most presentations especially on training and curriculum had similarities, only a few things will need to be harmonized.

3. Day 2: 10th December, 2015

Day two started by reflection of day one. Dr. Henry Kiara gave a recap of what was discussed on day one. He reminded the participants that on training what was presented by different institution.

One participant raised an issue that the aspect of communication skills. Concern was raised that also business skills is missing in the proposed curricula. Participants wanted to include business component, it was cautioned that if the business component will be included, there will be a challenge in having the training for three days.

It was agreed business component will be included, and the content will be agreed upon so that the training can still take three days.

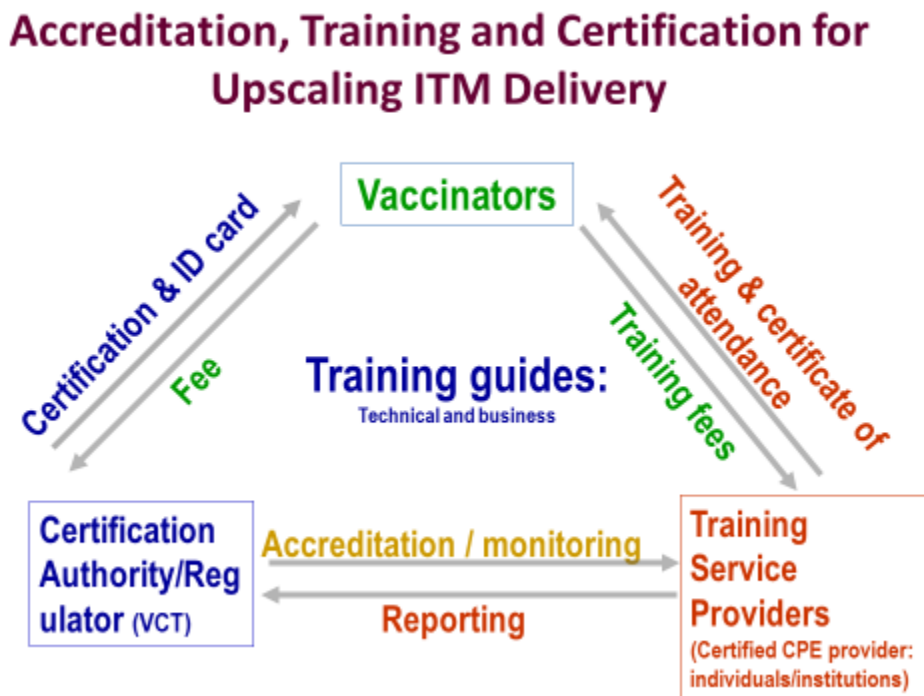
There was a concern on issue of qualification (entry) who will qualify but was agreed that this is a legal requirement and will be discussed during development of the curricula.

The safety and ethical issues will be also considered as most of the trainee have qualification in animal health and have this knowledge, it will be a matter of reminding them to be ethical.

3.1. ECF Training, Accreditation and Certification

To guide the group work on the training process, certification and content Dr. Amos Omoro presented a concept on how ECF training and certification can be executed. This is depicted on Fig. 2 below:

Fig. 2: ECF Training and Accreditation and Certification



The current process of training which is done by distributors was elaborated to follow these steps

3.2. Current ITM Training process

1. Trainer inform the ministry to seek names of trainees in a particular region/district
2. Distributor/trainer used to pay for everything, but now the trainee contributes.
3. Trainee have to find 40 animal,
4. Famers pay the market price
5. Trainer print and issue the certificate (VCT is involved in issue of certificate).

What need to be improved?

- VCT should only be the institute which will issue the certificates after the training
- Who will train? This also was debated and agreed that any institute or organization which will be allowed to train will need to certified, the certification of the training institute will follow existing legal procedure.
- Participants also discussed and agreed to look into possibilities of using ID to help identify the vaccinators (a fee may be linked to this ID)

The final approval of the training curriculum is mandated to VCT, and this a provision of the law. Therefore whatever which will be agreed to be included in the training will need approval of the VCT

The groups also discussed what would be the key requirements for ECF training providers, who qualifies to train and what would be the process for training to take place. The outcome from the groups are tabulated below

Table 1: Group Outcome on three question (Requirements, Who qualify, and Process)

Key Requirements	Who Qualifies	The Process
<ol style="list-style-type: none"> 1. Must be currently recognized by VCT 2. Have experience in practical ECF immunization 3. Guaranteed access to the animal 4. Have all necessary equipment and tools 5. Must be able to report to the DVO, on numbers and relevant logistics of the vaccination 6. Must have adequate capacity (Resources etc.) 	<ol style="list-style-type: none"> 1. Distributors (RONHEAM, Vet AGRO) 2. Sub Distributors (Vetcare, Alphaveterinary, Dullevet Centre, Vetlife consultants) 3. NGOs like HEIFER international, Echo, and MAWAKI 4. Institutions like LITA, SUA, and TVLA 	<ol style="list-style-type: none"> 1. Interaction between the vaccinator and trainers, through initiation of the process, this can be through advertisings, or through engagement with DVO, MFLD 2. Training costs should be shared not for free 3. Certification; with issue ID to identify the vaccinators. List to be put on the website 4. Recognition/accreditation of the Training institution: To follow accreditation process as stipulated by the regulation; Application should be 2 months before the training to give room for VCT to deal with internal

		<p>processes</p> <p>5. Recommended that institutions like SUA, LITA, etc. should think to mainstream in their curriculum to include ECF vaccination</p>
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It was agreed that VCT will take responsibility of compiling the curricula- VCT will be responsible and will decide which actors to involve in the process. The 1st draft to be shared on the 1st week of January, 2016 (10th January) ; to be shared for commenting will go up to 20th January 2016 . Final draft to be approved by the council by end of the January.

The meeting was informed that the council is final in approval process of the curricula in the country.

3.3. Voting with our feet

To stimulate discussions around a **‘difficult’** topic and increase team spirit, a ‘voting with our feet’ exercise was conducted: a statement was read and participants ‘vote’ by moving to **‘fully agree’**, **‘agree a bit’**, **‘neutral/ don’t know’**, **‘disagree a bit’** or **‘fully disagree’** positions. The participants then discuss the reasons for their positions (votes). The statement was as follow and a summary of the discussions follows.

“By implementing the training as discussed here, at least half a million heads of cattle will be vaccinated against ECF by end 2016”.

Vote	Number of persons	Reasons
Fully agree	3 persons	If people implement what has been discussed the last 2 days, it is possible. There are currently 200 vaccinators; by increasing this number to 500, and assuming that each vaccinator vaccinates 1,000 heads per year, we would have vaccinated the required number in 2016.
Agree a bit	7 persons	Agree with previous reasoning but people note that there are other factors at play: the vaccine is not registered in Tanzania; CTTBD capacity is limited and only plans to provide 60,000 doses to Tanzania; price may go up and this would discourage farmers; and there may be external factors like drought.
Don’t know/ neutral	4 persons	Some people don’t have sufficient information to vote; we would need to see the projections on number of vaccinators. Moreover, training alone will not be sufficient: we also need to implement the awareness and sensitization campaigns.
Disagree a bit	1 person	Similar argument as previous: training alone will not be sufficient: we also need to implement the awareness and sensitization campaigns for example.

Fully disagree	1 person	In 20 years, about 700,000 animals have been vaccinated. It doesn't seem realistic to think that 500,000 will be vaccinated in 1 year only.
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4. Next Steps

Next steps towards accomplishing the training component of the project were agreed and summarized on the table below

What	Who	When
ITM Training Manual	VCT	End of January
Workshop Report	Henry & Godfrey	18 th December, 2015
Theory of change	Isabelle	18 th December, 2015
Sensitize Potential Trainers	VCT	February, 2016
Launch of the training manual	VCT	February, 2016

5. Closing

Henry gave word of thanks to participants on behalf of ILRI, also USAID representative appreciated the participants on their commitment and contributions towards making the meeting a success. The DVS representative appreciated ILRI and USAID in making this project happened, and also he expected that what has been discussed in two days would be turned into reality. He reiterate that the two days have created a team spirit among the stakeholders and argue them to stick to the agreed way forward to achieve the planned activities. From GALVmed, appreciated it's a good process, and we can only achieve if we only go and implement what we have discussed. We need to do something to in our capacity to drive the changes forwards.

6. Annexes

- Presentations (8 presentations)
- Time table
- List of participants