





Influencing agricultural policies through evidence (Control of Classical Swine Fever)

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The Challenge

 High mortality of pigs due to CSF causing huge economic loss in North East India

 Animal health care services are confined to urban/peri-urban areas

Inadequate supply of quality vaccine

Anecdotal evidence

The Approach

- Carried out participatory epidemiological study
- Tested tissue and serum samples for CSF virus antigen
- Assessed economic loss due to mortality, treatment and replacement
- Conducted another study on vaccine production, storage, delivery and effectiveness
- Documented the findings (Research brief)



Most significant results

- Govt. of India initiated national swine fever control programme targeting north east India
- Augmented licensing process for CSF cell culture vaccine production by public/private institutes
- TATA-ILRI project trained village scouts in pilot villages and started vaccination against pigs (no cases reported after vaccination)
- Govt. of Nagaland took policy decision to mainstream the model throughout the state with state resources

Insights

		India	North East	
Vaccination d required /yea		22.26 million	7.64 million	.97 1
Vaccine availa	ability	1.2 million (lapinised)	0.04 million (lapinised)	1 1 82
Tot Gap		21.06 million doses /year (95%)	7.60 million doses/year (99%)	າ .30

Insights

Accessibility of farmers to health services can be enhanced substantially through village scouts



Key Lessons

- Creating evidence (problem and results) is the first and foremost step
- Stakeholder consultation to validate findings
- Documentation of results (research briefs, video) keeping in view of the customer
- Involvement of state actors /policy makers right from the beginning
- Sustained interaction, follow up with the policy makers

Thank you for your Attention!

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