

KUKUrews MONTHLY EDITION N°3 MAY 2010

WELCOME NOTE

In many African countries, raising chickens has always been a means of increasing the income of the poorest households, which is why it is an important activity for rural families. Village chickens are reared in a free-range setting, unlike commercial chickens which are raised in a poultry-yard or in poultry coops. Village chickens are increasingly popular at local markets because of the taste and nutritional qualities of the meat, which makes our work more rewarding.

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"Strengthening rural livelihoods and food security through improving village poultry production in Mozambique, Malawi, Tanzania and Zambia"

Good reasons to raise village chickens

Village chickens are free-range, they take more time to mature than commercial chickens, but on the other hand they are more robust with stronger (fibrous) muscles and a high level of collagen which makes the meat tastier. They also provide a high amount of protein in their eggs.

Feed for village chickens is based on available natural resources, such as leftovers, pasture, grass, insects, earthworms, and farming by-products, among others. This provides families with a high protein product for low input. The hen can hatch the eggs naturally and can take care of the chicks.

Because they are easy to handle village chickens are mostly managed by women and children. They also provide food security through income from sales and as part of the family diet, provide a source of animal protein of excellent quality. The use of poultry manure to fertilize the soil can improve the results of family farming.



Fig 2: Farmer going to Singida capital to sell his chickens

Surplus chickens and eggs can be sold directly, from the farmer to the consumer, fetching attractive and advantageous prices.

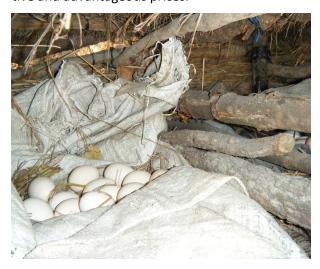


Fig 1 Eggs are an important source of protein for rural households

Challenges facing family poultry production

Farmers' knowledge and information on low-cost poultry improvement is limited, which is a major challenge for village poultry production.

Since poultry raising is a traditional activity many farmers believe that they have sufficient knowledge and they deal with challenges to production in a rather disorganised way, often without attention to hygiene, use of vaccines and provision of adequate poultry housing.

ZAMBIA:

Laboratory Workshop on I-2 ND Vaccine Production and Quality Control conducted at the Central Veterinary Research Institute, Lusaka, Zambia from 12-30 April 2010

A Laboratory Workshop on I-2 New-castle Disease Vaccine (ND) Production and Quality Control was recently conducted at the Central Veterinary Research Institute, Lusaka (CVRI). Eight staff members from CVRI, two from the Central Veterinary Laboratory, Dar es Salaam, Tanzania and two from the Central Veterinary Laboratory, Lilongwe, Malawi participated. The workshop was conducted by two Kyeema Foundation advisers, Dr Mary Young (Australia) and Dr Shafqat Rehmani (Pakistan).

The goal of the workshop was to advance the participants' knowledge of and skills in I-2 ND vaccine production, testing and distribution.

The training included not only technical aspects but also a series of practical exercises and trials, discussions and problem solving exercises. As the I-2 ND vaccine master seed had not arrived from Australia.

working seed provided by the Animal Science Directorate in Mozambique was used during the training.

The workshop evaluation showed that participants were happy with the way it was conducted and the experience of the trainers.



Fig.3: Participants from Tanzania (left) and Zambia (right) practicing blood sampling

The I-2 ND Vaccine

The I-2 ND vaccine is:

- Live.
- · Thermotolerant,

- Non-virulent (not harmful) for the chickens,
- Transfers among the chickens by contact (horizontal transmission),
- Stimulates an immunological response similar to the one produced by the commercial vaccine NDV4-HR and
- The virus multiplies in the allantoic cavity of embryonated eggs.



Fig.4: Participant from Malawi inoculating eggs



Fig.5: Dr Mary Young and Dr Shafqat Rehmani, during one of the training sessions

Fig 6: (right) Group photo of the participants and advisers with Dr Rosa Costa, the Country Coordinator, the Director of CVRI and the Director of Veterinary Services, Dr. Peter Mangani.



TANZANIA:

Director of Veterinary Services Dr. Mleche praises Singida District for its excellent progress since the inception of the project

During the Country Coordinating Committee meeting held on 3rd March 2010 in Singida, Tanzania, the Director of Veterinary Services Dr. Mleche praised the District for its excellent progress since the inception of the project. He said that he was happy with the way this project has been accepted and implemented by the people of Singida. He further said that Singida was not chosen accidentally to implement the project but because of its high potential for local chicken production. He noted that Newcastle disease usually has a seasonal occurrence, that the disease was endemic in the whole country and that it was particularly devastating for small farmers. Village chickens remain the livestock species most widely owned by smallholder farmers in Tanzania. During the meeting it

was also mentioned that the first vaccination campaign was carried out with the collaboration of 33 vaccinators.

Fig 7: Selling chickens in Singida district

Each vaccinator covered an of average 203 households with an average of 10.2 chickens per family. These results were due to the intense awareness raising

and the support of the community leaders. It was recommended that this pace should be maintained and even improved during subsequent campaigns.

The spillover effect from the project on neighbouring villages was also noted.

Based on the experience of the project, 18 extension officers' and 630 community vaccinators were trained in 21 villages. These Villages planned to vacci

nate 450,000 chickens in the first campaign.

MALAWI: Vaccination campaigns

In March 2010 Malawi carried out the training of 18 community vaccinators, 9 men and 9 women, selected in the 9 villages in the districts of Thyolo, Chiradzulu and Mulange. The newly trained vaccinators started their activities immediately following their training. In order to monitor the response to vaccination, 245 blood samples were collected before and 30 days after the vaccination. The results of this activity are being assessed and will be presented by the close of Phase 1 of the project.



Fig 8: Farmers with chickens waiting to be vaccinated



Fig. 9: Technician bleeding a chicken for monitoring antibodies against ND







KYEEMA Foundation

The KYEEMA Foundation is a non-profit organisation formed in 2003, which supports prevention and control programs for diseases affecting plants and animals in developing countries, as well as helping with the development of technology to assist in improving the living standards of individuals. Capacity building is a core component of KYEEMA's projects which are usually implemented in collaboration with national government agencies and local NGOs.

KYEEMA Foundation and its subsidiary entity the International Rural Poultry Centre (IRPC) have been working towards capacity building, community development and poverty alleviation through developing and implementing a sustainable model for ND control.

MOZAMBIQUE Monitoring the second vaccination campaign against ND

In Mozambique the second vaccination campaign took place in March 2010.

During May, the country coordinator of the project, Dr Judite Monteiro, together with the provincial trainer and district livestock delegates carried out monitoring of the campaign in target areas of the project.

Despite constraints such as the challenges of transport for local technicians, weak awareness of the farmers and the late arrival of the vaccine, in general, the program is progressing well. Vaccination data is presented in the table below.

With the exception of Chigubo, there has been an increase in the number of vaccinated chickens and in the number of households involved compared to the first vaccination campaign.

In Chigubo the results were lower as three of the eight trained vaccinators left the program due to personal reasons, such as getting married and moving to another village.

There has been a strong commitment from the Directors of SDAEs and Ministry technicians to ND control activities and towards promoting the benefits of village chickens.



Fig.10: A boy waiting for his chicken to be vaccinated

Table 1: Number of vaccinated chickens in the first and second vaccination campaigns

ND control	1st campaign (November 2009)					2nd campaign (March 2010)				
District	Registered Chickens	Vaccinated Chickens	Households		% Vaccinated chickens	Registered Chickens	Vaccinated Chickens	Households		% Vaccinated chickens
			M	F	1			M	F	
Chibuto	2 197	605	96 M+F		27,5%	5 089	4376	111	207	86%
Chigubo		2 851	241 M+F			1 884	780	59 M+F		41,4%
Massingir	3 230	2 062	111	209	63.8%	7 500	7 202	268	345	96%