

Recognising ethnoveterinary medicine and community rights – an investment in our future

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Summary

Ethnoveterinary medicine refers to people's knowledge and approaches to animal healthcare and production. It encompasses the use of medicinal plants; information herders and farmers have on diseases, grazing grounds, fodder plants and many other things; a wide range of management, prevention and treatment practices; and many different tools and technologies. Scientists and development practitioners started recognising its potential in the 1970s when the shortcomings of modern medicine became obvious and the wholesome transfer of western approaches and technologies frequently failed especially in remote areas.

Examples from Raika pastoralists in India, smallholder farmers in Indonesia and agropastoralists in Mexico highlight that ethnoveterinary systems are very diverse and differ between societies. They also follow other classifications, premises and goals than modern medicine.

Like any type of medicine, ethnoveterinary medicine has its limitations: traditional medicines are often cumbersome to prepare; plants may not be available in all seasons; some practices do not work, some are harmful; treatment schedules are often vague, and herbal medicines are difficult to standardise. On the other hand, ethnoveterinary medicine is locally available, cheap and readily understood by local people and many practices are effective.

When tested under experimental conditions, ethnoveterinary remedies may prove less potent than their modern counterparts. But they work differently: they commonly do not wipe out all disease-causing organisms and thus allow the patient's defence system to get into contact with the organisms and build up immunity. Besides, the individual remedy is only one of several factors in a complex system of treatments and management practices that work together and seek to strengthen the patient. Therefore the individual treatment does not need to be as strong as a modern drug targeting the 100% elimination of disease causing agents.

Because of their differing strengths, a combination of modern and ethnoveterinary practices could improve the availability of healthcare services in remote areas. Projects can help local communities to document and validate their ethnoveterinary information. Promising medicinal plants can be integrated into animal healthcare packages for use in the community or marketing outside. But such approaches are time consuming and need to overcome educational, administrative and legal barriers, so relatively few projects follow this path.

Communities can also benefit if a firm or other third party identifies potentially valuable aspects of the community's information and seeks to commercialise it. Such access, use and exchange of plant genetic resources are governed by a number of agreements negotiated under the auspices of the World Trade Organization, World Intellectual Property Organization, the Convention on Biological Diversity, the Food

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and Agriculture Organization, etc. Before starting to collect and document plants and knowledge in communities, outsiders should inform the community about their intention, seek their informed consent and sign an agreement on access and benefit sharing.

Unfortunately these steps are often omitted and benefits bypass the communities. Furthermore, large-scale promotion and commercialisation of plant remedies bear the danger that heavily used plant species may become extinct, depriving the communities of the resources they need for their livelihoods. In a globalising and increasingly interlinked world, it is crucial and in our own interest that we all help to ensure that such abuse and overuse does not happen and communities benefit from the use of their ethnoveterinary medicine. Ultimately it is an investment in our own future.