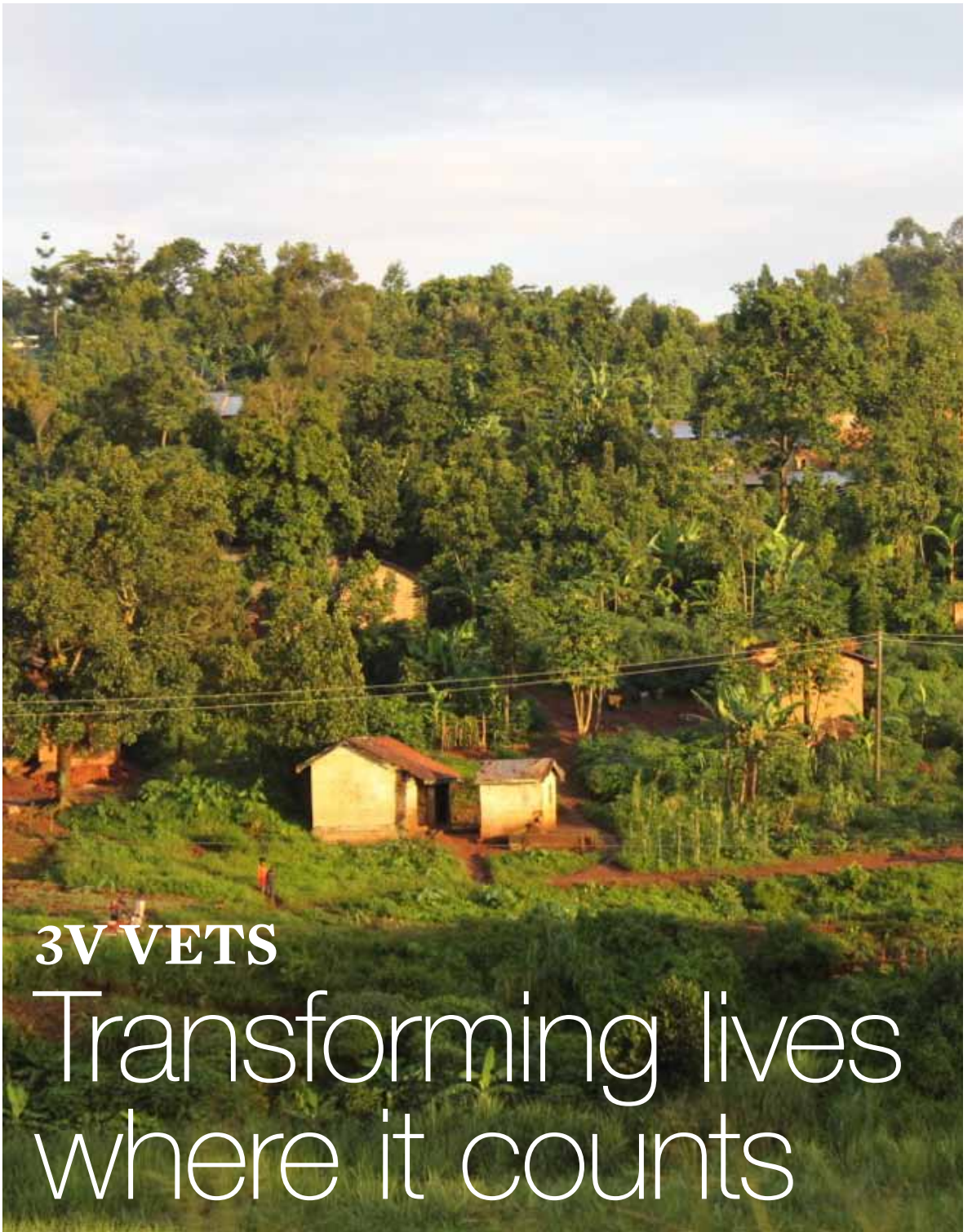


ISSUE 02 - SUMMER 2013



# IKARE NEWS



**3V VETS**

Transforming lives  
where it counts

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## ABOUT IKARE

**IKARE LTD** (pronounced “I care”) is a UK registered charity applying venture philanthropy principles to the causes it supports. IKARE aims to overlay private equity investment techniques and other business expertise and practices into the causes it supports or “investees”, thereby contributing more than just funding.

Since its inception in 2006, IKARE’s resources have been fully dedicated to the SOS campaign, launched in Kampala, Uganda, in October of the same year. Working together with the universities of Edinburgh, UK and Makerere, Uganda, as well as with the international veterinary pharmaceutical company Ceva Santé Animale, headquartered in France, the SOS campaign aims to control sleeping sickness in Uganda, the only country to be affected by both forms of this lethal disease spread by the tse-tse fly which kills more than 100 people every day in Africa.

In addition to initially providing emergency treatment to close to 500,000 cattle in seven districts in Northern Uganda, IKARE and its local partner HHS Ltd are focused on building sustainability through both educating and teaching

local farmers and key stakeholders on sleeping sickness and the links between animal health and human health, as well as through a roll-out of private veterinary practices, ensuring the availability and affordability of treatments, allowing farmers to treat their cattle on a regular basis.

IK Investment Partners has been IKARE’s main donor since 2006, providing both financial and non-financial support. For further info visit [www.stampoutsleepingsickness.com](http://www.stampoutsleepingsickness.com)

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## Foreword

# Anne Holm Rannaleet

**LOOKING BACK AT** the now close to seven years of IKARE’s engagement in SOS Uganda, I am both amazed and proud to see how one thing has led to another and how, like ripples on a lake, our initial emergency intervention has led to a whole range of positive developments and life-changing initiatives. All of these changes only happened thanks to a group of dedicated people, joined together by a shared vision of effecting fundamental societal change by giving local communities the tools and opportunities to do it for themselves.

*“We have come a long way since then, during which time we have thrown out the roadmap and started using the compass instead, tackling challenges and using opportunities as they have arisen.”*

In response to a plea from our then portfolio company CEVA, to join forces and avert an emergency situation in the form of a growing sleeping sickness epidemic, IKARE was set up as an independent entity back in the summer of 2006 and in October commenced its venture philanthropy activities. At the time I did not even realize there was a name for IKARE’s approach. It came about intuitively based on past business and investment experiences. In this case however, we were looking primarily for societal impact rather than a financial return on the “investment” made.

The initial mission was straightforward - engage the graduating veterinary students at Makerere University to treat more than 220,000 cattle in Northern Uganda against the sleeping sickness parasite, using a new treatment to stop the convergence of the two strains of this lethal disease, which affects both humans and animals.

We have come a long way since then, during which time we have thrown out the roadmap and started using the compass instead, tackling challenges and using opportunities as they have arisen. But our goal has always been to work towards ensuring long-term sustainability of our efforts to help control sleeping sickness, which has such devastating consequences on not only on human lives but also on the entire agricultural sector. This sector is still the main GDP contributor in a country like Uganda, which needs to cope with a rapidly growing young population at risk of not only unemployment but also food security issues, unless they can be given skills to create their own jobs or find a position directed at improving productivity in the farming sector.

While we, in this issue of IKARE News, highlight a number of the positive spin-offs created by SOS to date, we continue to look at ways of strengthening and professionalizing the 3V Vet operations so as to make them fully self-sustainable. This will involve both a consolidation of current activities and a strengthening of the accounting and reporting platforms to create a robust foundation for a future scale-up of activities. We are also looking for complementary products that can be pushed through the existing distribution platform which add value to the farmers, their families and local communities. And last but not least we are looking at how we can work together with primary schools in the SOS area to educate the younger generations on the causes of sleeping sickness and how to protect their families by protecting their animals. As we all know the strength of children’s ‘pester power,’ this stone should not be left unturned!



Professor John David Kabasa, Dean of the Faculty of Veterinary Medicine, Makerere University.

## Empowering a generation

*Professor John David Kabasa is determined to deliver change in Uganda. Dean of the College of Veterinary Medicine, Animal Resources and Biosecurity, at Makerere University, his vision has been pivotal ever since IKARE was founded. First he allowed graduating vets to gain in-field experience by participating in the SOS initiative, then he transformed the syllabus and now he plans to change the entire view of what higher education should deliver in a country like Uganda. Now he is keen to go even further, using the lessons learnt from SOS to spawn a new generation of certified producers and entrepreneurs. Here he explains how and why.*

**IT ALL STARTED** in 2006 when the two types of sleeping sickness that were ravaging rural communities threatened to converge in Northern Uganda. A new, more cost-effective treatment was being talked about, where cattle were first injected and then sprayed with insecticide for prolonged protection, but time was of the essence. Some 220,000 animals had to be treated over a ten-week period so there was a desperate need for vets to go into the bush and help out.

Being brutally honest, back then, some of our vet graduates were great in theory but in practice, they had limited technical and social skills. They had little idea about community mobilisation and they weren't even terribly good at differentiating domestic animal such as goats and sheep from well-nourished dogs and calves! So I decided to change the whole syllabus for 50 final-year students so they could go out and experience real life veterinary work.

Our student 'brigades' duly went into the bush in the largest mass treatment exercise ever organised by the University.

The result was a resounding success, a "win-win" situation. Students felt fulfilled because they had put into practice the skills they had been taught. Their confidence and professional pride were reinforced by their service to the community. Communities on the other hand were grateful to Makerere University and the student teams for their heroic sacrifice and engagement in helping to clear cattle of infection in these remote rural areas, thereby protecting the health and livelihoods of the whole community.

**THIS WAS WONDERFUL** in itself but it was also an excellent starting point and a great showcase for continued change. I truly believe this type of "One Health" action is the way to go so I wanted to encourage institutional and curricula changes to ensure that the gains made under the SOS "entrepreneurial" way of working could be sustained.

And so "AFRISA" was born - the Africa Institute for Strategic Animal Resource Services and Development. This is a partnership platform between the academic community, the public sector and private enterprise, with a vision of creating healthier and wealthier communities across Africa through the deployment of young professionals into the community.

Fortunately, the Makerere Governing Council approved of this development and supported the establishment of AFRISA as an autonomous, flexible, not-for-profit platform that functions as a regional centre of excellence in strategic development services. The AFRISA "MIN-TRACS" (Makerere In-training Community Services) programme now organises field experience for over 50 vet students and 20 faculty staff every year, refining their skills and serving the communities to which many of them will hopefully return. AFRISA further offers and nurtures a variety of youth programmes including skills and enterprise incubation, international cultural exchanges, volunteer community services and apprenticeships.

Looking ahead, our aim is to take theory into practice one stage further and turn students into entrepreneurs. In effect, AFRISA and Makerere will act as fitness trainers in leadership and entrepreneurship, offering guidance, direction and training programmes across Uganda.

This is something that our country our country desperately needs. We are the youngest country in the world,

with a population of around 33 million, nearly 60 per cent of whom are under 20. Furthermore, youth unemployment is estimated at 62 per cent. About 400,000 youth jobs are needed every year at various levels but only 20 per cent start working. This is a major problem in Uganda but it is also a huge opportunity if we only leverage it in the right way.

I am convinced that Uganda has to change its education system, to move away from the traditional model to a modern, more holistic view where students are given the tools to create their own future, so they can contribute to society by helping themselves.

Through AFRISA and its approach, we want to encourage this new form of education, where AFRISA partners with businesses to give students a better foundation and understanding of the business world as well as leadership skills so they can take responsibility for their own lives and careers. This will give them better opportunities and help them to create their own jobs, instead of simply seeking government paid jobs, which, frankly, are in very short supply.

If we look at the SOS project, it was designed to address a certain challenge, sleeping sickness and its negative impact on society. Around 40 per cent of Uganda's population earn their living from livestock and when sleeping sickness affects cattle it has a dramatic effect on productivity.

**SLEEPING SICKNESS IS** still a challenge in Uganda but the SOS intervention clearly shows that academia can collaborate with several partners, including the business community, in order to implement change. I want to take the lessons that we learnt from the SOS project and offer students new opportunities.

With our young and growing population, Uganda is under enormous pressure on three fronts, unemployment, productivity and food-security. The education system is well regarded but we need to make sure it is giving new generations of students the tools and knowledge to build their own future and become productive citizens. Fundamentally, we have to make sure that the white-collar community learns how to become self-employed. This may be major institutional reform but it is what our country needs.

The SOS project sowed the seeds of this programme of reform as it clearly demonstrated that partners can collaborate to develop something which adds value and becomes sustainable. Now AFRISA needs to pick up the baton and run with it, coaching students to become entrepreneurial or self employed and delivering strategic change to address rising unemployment in Uganda head on.



*"I truly believe this type of 'One Health' action is the way to go so I wanted to encourage institutional and curricula changes to ensure that the gains made under the SOS 'entrepreneurial' way of working could be sustained."*

SOS Uganda

# CHANGING LIVES THROUGH ENTREPRENEURSHIP

*It is now almost seven years since graduate vets from Makerere University helped avert a threatening convergence of two types of sleeping sickness in rural Uganda, administering treatment to thousands of cattle in remote areas of the country. The first mass intervention and prevention treatment for sleeping sickness by way of a new treatment protocol, this was a remarkable achievement in itself. Since then, the initial project has evolved into something even greater – the creation of life-changing businesses for a growing franchise of vets and their assistants across Northern Uganda.*



**ON THE WALL** of the US Natural History Museum, a short statement is chiselled into the stone. “Never doubt that a small group of committed citizens can change the world. Indeed, it’s the only thing that ever has.”

Attributed to American anthropologist, Margaret Mead, these words have a particular resonance in the world of rural Uganda, where young vets have been opening up private practices, transforming not just their lives but their families’ lives and the lives of the farmers and the communities they serve.

Known as the 3V Vets, after the three drugs used to treat the sleeping sickness parasite in cattle as well as prevent reinfection by spraying with insecticide, their story began in 2006, when 50 graduate students were sent into the bush to administer

emergency treatment to thousands of cattle across Northern Uganda. The most engaged of these young vets were later encouraged to set up their own private practices, supported by IKARE and veterinary health group CEVA, a former IK portfolio company. In partnership with Professor Charles Waiswa of High Heights Ltd, IKARE and CEVA have worked with these young professionals ever since.

Today 11 veterinarian drug shops, as well as some veterinary practices, are up and running in these districts. The vets have also recruited more than 200 self-employed spray people to administer insecticide on a monthly basis to local livestock. Together, these budding entrepreneurs are living proof of the sustainable change that can be achieved through successful venture philanthropy.

Here are some of their stories.

## DR. JOY SUUBO

In September 2010 Joy Suubo became the first female vet in the SOS team. Her veterinary shop and practice are located in the village of Serere, in the Soroti district of eastern Uganda with an estimated population of about 176,500, 80 per cent of whom are rural based.

Originally from another part of Uganda, Joy admits to feeling a little lost in the first few days, particularly as she did not speak the local language. But she swiftly threw herself into community life, getting to know people in the village and establishing her veterinary shop. Whilst some of the villagers were initially wary, questioning whether such a young person and a woman at that, could really be a vet or know more than they did, within a year, Joy was fully integrated into community life,



*“My sales have more than doubled since I started my business. As a result, I’ve been able to help my parents to fund the school fees for my two younger brothers and help my sister set up a poultry business.”*

Dr. Joy Suubo

gaining the trust of local villagers, who generally refer to her as “the Doctor”.

**DESPITE NOT HAVING** received formal sales training, Joy is a natural. She makes a point of getting to know the villagers, who then give her tips on which livestock owners to visit as potential customers. Joy not only treats sick animals but also teaches farmers how to prevent them from falling sick in the first place. She also genuinely cares for her customers, visiting them if they fall ill or if a baby is born into their family.

Her shop is staffed 12 hours a day, 7 days a week by Joy and her sister Mary so Mary is always there when Joy does her early morning and late afternoon visits to farmers (animals are normally out grazing during the day). Joy also has 53 spray people working for her, covering her district. The income they are now generating has been life-changing for these people, allowing them to build proper houses and send their children to school. Importantly too, there have been no reports of sleeping sickness outbreaks since Joy and related services came to the district.

“My sales have more than doubled since I started my business. As a result, I’ve been able to help my parents to fund the school fees for my two younger brothers and help my sister set up a poultry business,” she says.

**DR. PATRICK OPONDO**

Dr. Patrick Opondo started as a 3V Vet in December 2008, working in the Dokolo district of northern Uganda, an area with a population of around 180,000 people, including 30,000 farming households.

When he first started, at least ten cases of sleeping sickness were being reported every month so the problem was acute. Yet the nearest vet practice was more than 60 kms away, creating significant logistical challenges for local farmers.

Despite the clear need for his services, Patrick faced some initial wariness, as customers were reluctant



to trust him or the products on sale in his shop. But he has since won round the local community and is widely complimented by the farmers he helps.

As a result, he has created a thriving, financially stable business, employing an assistant for his shop and 19 spray people. He also coordinates the National Agricultural Advisory Services (NAADS) at a sub-county level.

**AN ENTREPRENEUR BY** nature, the 3V experience has been transformative for Patrick. Using the revenues earned from his shop, he has built a house for his parents, established a seven-acre wood plantation, bought a plot of land nearby and set up three fish ponds, which themselves are making money.

His practice has also brought huge benefits for the Dokolo district. Since June 2012, only five cases have been reported in the area, a dramatic improvement in just a few years.

Looking ahead, Patrick wants to upgrade his shop, establish a wholesale drugs business and expand into new product areas, such as poultry vaccines.



Dr. Patrick Opondo

*“Being a 3V Vet has changed my life greatly. Instead of regarding challenges as problems, I regard them as ways to create opportunities.”*



Dr. Ronald Were

*“Working as a 3V Vet has changed my life so much because I have learnt how to translate my professional knowledge into cash.”*

“Being a 3V Vet has changed my life greatly. Instead of regarding challenges as problems, I regard them as ways to create opportunities,” he says.

**DR. RONALD WERE**

Dr Ronald Were was one of the first graduates to join the SOS programme in 2006. After the mass treatment initiative, he was recruited to manage and control sleeping sickness parasites in cattle in the Apac district in northern Uganda with an estimated population of 328,800. At the time, the area had around 4,500 prominent cattle owners and sleeping sickness was a major issue, with up to 80 per cent of the cattle carrying the parasites.

Ronald quickly got to work. Infections in both cattle and humans dropped sharply and in recent months there have been almost no incidents of human sleeping sickness in his area.

Having started out with funds from IKARE and managing to make just three or four sales a week, Ronald now runs a profitable and growing business. He has a shop assistant

and 17 spray people, who ensure local cattle are sprayed on a regular basis. On top of selling animal medication, he also provides private veterinary services, treating sick animals in the field, helping farmers understand more about sleeping sickness and managing his spray people.

**HIS BIGGEST CHALLENGE** today is ensuring safe transportation of large volumes of drugs to his shop. His greatest achievement, from his perspective, is running a well-established and self-sustaining business.

As Ronald explains: “Working as a 3V Vet has changed my life so much because I have learnt how to translate my professional knowledge into cash.”

**DR. EDWARD OMAIDO**

Dr Eddie Omaido works in the Pallisa district in eastern Uganda with an estimated population of 394,100. With 15 active spray people in his area, he has established a robust business, characterised by rising sales and increasing demand for his veterinarian services.



*“Working as a 3V Vet has not only given my mother a new lease of life; I’ve also been able to help fund my brothers’ education, sending one to university and two to boarding school.”*

Dr. Edward Omaido

**THE PAST YEAR** has been particularly eventful. Having built up a flourishing store, he was dealt a blow when his sales assistant resigned. An extremely able woman, she was a great loss to his business but she wanted to move on. As he desperately needed to have someone in his shop, he temporarily employed his mother, a former primary school teacher. At the time, her health was poor but she promised to help out while he found a new assistant. Incredibly, Mrs Omaido’s new position boosted her morale so much that her health improved and she now works with her son on a permanent basis.

“Working as a 3V Vet has not only given my mother a new lease of life; I’ve also been able to help fund my brothers’ education, sending one to university and two to boarding school,” says Eddie.

Looking ahead, Eddie has real ambitions for the future and wants to expand into another district as well.

## Spray teams

**THERE MAY BE** just 6 3V Vets and a handful of additional 3V shop owners but this group has recruited more than 200 self-employed spray people to administer insecticide to cattle on a monthly basis. Their lives have been transformed by the experience. Sam Ojuka, for instance, was a community animal health worker before joining the 3V Vet network. Having been trained as a spray person and given support by his local vet, he was able to earn enough money from his spraying activities to move from a grass-thatched hut and build a new house. This home is not just considerably more comfortable than his previous accommodation; it also provides a more secure outlet for him to store and supply veterinary drugs to local farmers.

Sam is just one example. But all the spray people have uplifting stories to tell. Closely supervised by the 3V Vets, they benefit from High Heights support and training and also provide livestock owners with close personal attention and advice to improve the health of their animals. Some, including Sam, have traded in their bicycles and upgraded to motorcycles allowing them to treat more cattle by accessing remote farms or villages and thus boost their earning power.

With families to support, children to take to school and the health of the cattle in the community to attend to, spray people are busy but fulfilled. They are also improving their own lives and those of the people round them...what better way to demonstrate how IKARE can help convert entrepreneurial spirit into action?

*Where do we go from here?*

**LOOKING AHEAD, IKARE** is determined to ensure a sustainable future for the 3V Vets and their spray teams. Discussions are underway about how best to develop this burgeoning community and about



additional services and products they could offer. One example of product extension being tested is Solvatten, an extraordinary invention that is already helping hundreds of people in Uganda.

Solvatten is a portable 11 litre container that uses sunshine to heat and treat water at household level. If the containers are filled with water and left in a sunny spot for 2-6 hours, the water will become drinkable. The containers also serve as solar water heaters, providing hot water for cooking and hygiene.

It is widely known that clean water is essential for life. However, one in eight of the world’s population does not have access to it and there are 1.6 million deaths every year related to unsafe water, sanitation, and hygiene – the vast majority among children under five. The UN Millennium Development Goals set out ambitious targets for urgent action to find solutions to these problems. Widespread use of Solvatten can help.

**AROUND HALF A** billion people in the world today heat and treat their water

by boiling it, using charcoal, kerosene or firewood. Solvatten is solar powered so it can reduce use of these fuels. Hot water can be used immediately for hygiene and cooking; alternatively, it can be cooled in the shade for drinking.

*“It is widely known that clean water is essential for life. However, one in eight of the world’s population does not have access to it and there are 1.6 million deaths every year related to unsafe water, sanitation, and hygiene.”*

Among the 3V community, Solvatten containers allow vets to use sterile water when performing veterinarian services. This is hugely beneficial in itself but Solvatten also offers 3V Vets the chance to branch into new business areas, selling the water for local communities to drink or for other services.

The Solvatten technology has already created a new breed of entrepreneurs. Mrs Zainab Kakaire, for example, is from the Buliisa district in north-western Uganda. The area is hot



Zainab Kakaire

and dry and includes the saline Lake Albert, where many people make a living as fishermen. Recently there have also been announcements about major oil finds in the Lake Albert basin, with estimates that the multi-billion barrel field will prove to be the largest onshore field found in sub-Saharan Africa for more than twenty years. Drilling is expected to start in 2015 and this is expected to increase the local population considerably.

Mrs Kakaire acted as a test pilot for Solvatten due to the area she is from. She initially adopted a Solvatten container for her own use, as water sources are scarce in Buliisa and the device saves fuel and time. However, she came to see the container as a business opportunity and is now selling packaged drinking water to Lake Albert’s fishermen as well as to schools where students buy them to drink. The little enterprise has proved lucrative and she has developed various juices to broaden her offer.

She has even put her daughter and her friends to work. They are thrilled to be making money. She is happy because her daughter is home and safe.

Mrs Kakaire is ambitious and would like to expand her business to include the other side of Lake Albert, Congo and even South Sudan down to Juba.

**OTHER FEMALE ENTREPRENEURS** are also using Solvatten as the basis for small-scale businesses. All of them see many and different opportunities. From a gender point of view, this is key, as most NGO programmes need to include female empowerment. The woman to woman empowerment aspect is important as women are mainly responsible for collecting fire-wood, cooking and cleaning, as well as looking after their children and making sure they can stay in school. However, for the 3V Vets and their families, the biggest and most immediate benefit is their own improved health. Families have noted less typhoid and fewer diarrhoea-related diseases. This saves money on medication and even more importantly, it saves lives.

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# Putting knowledge to work

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*Professor Charles Waiswa plays a central role in the 3V Vet initiative. He explains why the SOS campaign was so important to him from the start and why he remains passionate about the opportunities for 3V Vets.*

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**I WAS BORN** in the Busoga area of Uganda, where many people were displaced by a sleeping sickness epidemic in the 1900s. So it was inevitable that I knew the disease called 'Mongota' (the word for sleeping sickness in Lusoga, my native language) well before taking formal lessons on the disease in veterinary medicine lectures during the 1980s and 90s.

The examples given in class revealed that sleeping sickness had been a major problem in Busoga for more than a century. This consolidated my resolve and made me determined to seek out solutions that could help control the disease. Moreover, this was a time when many cases were being reported in south-eastern Uganda and there were suggestions that livestock might be reservoirs for the disease.

I asked my supervisor, who lectured on this subject, if I could write a review on the control of sleeping sickness in Uganda. Having completed that, I went on to do further research on the disease and how to control it, as well as teaching on the subject. Now, as a Professor of Veterinary Medicine, I am still driven by the desire to stamp out sleeping sickness in Uganda.

That is why I teamed up with IKARE and CEVA, using my business High Heights Services (HHS), to help mentor and support the 3V Vets



*“I passionately believe that working closely with the UTCC, we can make huge inroads in controlling sleeping sickness throughout Uganda. Ultimately, I hope that we can help to empower communities across the country by rooting out this awful disease.”*

and their spray teams. At HHS we do not just provide theoretical support; we also supply vets and spray people with the products they need, using our bulk buying power to secure the best prices.

Looking to the future, we hope the 3V Vets will evolve into a franchise model, supported by IKARE and HHS.

We also believe our vets and spray teams should act as partners with the government in areas relating to tsetse and trypanosomiasis control (the parasites that cause sleeping sickness).

In fact, we think it would make sense for the vets and spray people to act as ambassadors for the Uganda Trypanosomiasis Control Council (UTCC), a government body designed to help reduce sleeping sickness. If our vets worked with the UTCC, they could inform the council about events in the field and ensure that uniform messages were delivered into local communities from the public and private sectors.

**THIS WORK WOULD** enhance attempts to improve rural lives, complementing IKARE's planned engagement in schools and the other activities in which the 3V Vets and the spray teams are engaged.

I passionately believe that working closely with the UTCC, we can make huge inroads in controlling sleeping sickness throughout Uganda. Ultimately, I hope that we can help to empower communities across the country by rooting out this awful disease. For me, as a boy from Busoga, that is a worthy ambition.

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