

Life with Livestock

by
Sagari Ramdas

India's livestock population of 400 million is the largest in the world. It plays a crucial role in our predominantly agricultural economy. Yet we have a pitifully small number of trained professionals to look into the health of our livestock, especially in rural areas where they are needed most. Sagari Ramdas is one of the very few women who has taken on the challenging task of working as a rural veterinarian.

TEN years ago, almost to date, I left the warm and familiar comfort of home, family and the city for the first time, to enter a veterinary college which was situated in the heartland of rural Haryana, the land of 'dudh and dahi', in a place called Hisar.

I never imagined that my choice of profession and place would play such a major role in making me what I am today.

It was my twelfth and final year at school. Everyone was busy applying to some college or the other, studying for entrance exams and rushing off to coaching classes after regular school. I was blissfully unconcerned about what I was going to do next. I was intent on enjoying my last year of school and my prefectship, working hard towards my *arangetram*, the traditional first public dance recital of a Bharata Natyam dancer and studying for my final Board exams.

I was utterly confused as to what I wanted to pursue after school. Sure, I was good at many things, from academics to being an artiste (with an 'e'): singing, dancing, playing musical instruments, drawing, drama, debating, not to mention my bit of 'social work'—teaching kids in the Bhil Basti near school. I did not, however, have a

burning passion for any one particular subject. I wanted to excel at all I did. My one fulltime involvement over the past five years had been my dancing but I was not convinced that I could dedicate my life to dance. My parents had thankfully dinned into their daughter's head the importance of being economically independent. Amma and Appa would gently attempt to discuss my future plans with me.

But each time I thought about a career, I would come up with a different career goal, ranging from commercial art, to architecture, drama, medicine, engineering, hotel management, mathematics, botany and medicine. Interestingly, veterinary science never once crossed my mind, nor figured in our conversations, in spite of growing up

in a home that was a natural menagerie.

While on vacation, I met my doctor cousin. Rani asked me: "Have you ever thought of veterinary science? I've always wished I'd opted for that instead of medicine. Imagine dealing with hundreds of different species!" The idea stuck and grew in my mind. This certainly sounded different, exciting and unusual, off the beaten track. "Yes," I decided. "This is it. I will give it a shot." I spent the rest of that holiday reading James Herriot and Gerald Durrell.

The results arrived. I did well, got a distinction and marks good enough to get me into any subject of my choice, including medicine/engineering. But by now I was going all out for veterinary science. Back in

Delhi, an old family friend arranged for me to meet the daughter of their friend, a second-year veterinary student in Hisar. Nitya was to become one of my dearest friends, a valuable professional colleague and an outstanding veterinary surgeon. Her decision, unlike mine, had been a well thought out one, many many years ago while she was still in school and an active member of Gerald Durrell's Jersey Wild Life Preservation Trust.



Sagari on graduation day at Hisar Agricultural University, December 1986

Our meeting further convinced me of my choice. Of course, only later did she confess that she'd made Hisar sound so wonderful, playing down the negative aspects, so that I would join.

Getting admitted was a big struggle. Being a Delhi student, I was only eligible to join Hisar/Pant Nagar, but in both these places university authorities were not at all keen to have a woman from Delhi. There were limited seats for Delhi candidates. Never mind the fact that my marks were higher than those of anyone else applying.

You — A Vet?

My decision came as quite a surprise to the family; a mixture of disbelief and relief that I'd actually decided on something were the dominant emotions of Amma and Appa. My friends were pretty sceptical about Sagari, the dancer, becoming a vet. How come she made this decision so suddenly? They were convinced that I'd switch tracks sooner or later — after the initial euphoria wore off. But no one tried to dissuade me.

There were mixed reactions from others in our social circle. Many women said, "Oh, how I wish I was you. I always wanted to be a vet." But the majority, both men and women, were pretty aghast. Most people are so used to hearing a woman say: "I'm doing English literature or philosophy, etcetera," that they were well prepared with the "Oh, how sweet" reply even before hearing me out. It's only when they heard "veterinary science" that they got a stunned look on their faces and couldn't even respond. Many said: "Oh, it's so unfeminine. What scope is there for a girl? Will you be able to work with all that dirt and dung and muck?"

Being a vet in rural India was not classy, hip or where the big bucks were. It was also an "unwomanly" profession. "Imagine doing physical labour like that," people said. "That" referred to cowdung, pig shit and what have you. Their 'caste' bias also played a role, I firmly believe. Over the years, such reactions became more pronounced. I later opted to work as a rural vet and specialise in rural animal reproduction problems. There were thankfully many who did support me and continue to do so.

Vet College was one huge culture shock. Everything was new and foreign: the subject, hostel life, rural India and, above all, being one of just two women in an entering class of 80. The remaining 78 were burly sons of the soil, true Haryanvis. Haryana Agricultural University (HAU) was a massive sprawling university, planned on the lines of America's Land Grant colleges. (I studied at one of them some years later and discovered that the average Californian undergraduate was pretty similar to the average HAU undergraduate!) The Vet College was the oldest structure on the campus.

There was a grand total of 15 women in the entire Vet College, which had a total strength of about 500 students. We women had to room in the home science hostel for girls as

there was no separate hostel for women vet students. We found this slightly inconvenient as our schedule was very different from that of the other hostel women, leading to constant clashes over their making merry while we had exams and vice versa. The hostel was also pretty far off from the clinic, the college and the labs, making late night duty and research a problem. The positive side of living in this hostel was that we got to interact with women from rural backgrounds. Many girls were first generation educated Haryanvis, and we got to understand their experiences and problems. Suddenly leaving the security of the village and coming to this huge campus was a different, but as major a culture shock for them as it was for me. We nevertheless managed to do some interesting things together, including an anti-dowry play.

The first day of class was unforgettable: Namrata (another woman student) and I entered, to face an onslaught of catcalls, whistles, hoots and jeers, chalk pieces aimed at specific parts of our anatomy and the horrific 'HAU' laugh. I felt sick in the pit of my stomach, humiliated and very angry. What had we done to deserve this? Namrata and I gritted our teeth and walked in, trying not to bat an eyelid. I was grateful that there were two of us and that I was not on my own.

It was quite surprising and annoying that a large number of the Hisar boys persisted with this type of barbaric behaviour almost to the end of our fourth year. They were particularly crude the first time we wore jeans (far more convenient to work in), the first time we wore short sleeved shirts (to conduct a pregnancy diagnosis), the first time we wore skirts on a particularly



Vaccinating sheep

hot and sultry summer day. Classes began and I found myself doing very well, getting A grades in all the subjects and thoroughly enjoying what I was learning. I loved the mixture of theory, practicals and lots of outdoor work in the fields, farms and clinic. I did not find the practical work particularly difficult. Veterinary science does not mean all brawn and no brains. Basic intelligence and a minimum amount of physical fitness is no doubt, essential. I was soon topping my class. This brought mixed reactions from both male colleagues and professors.

Male Reaction

Males in general (there were exceptions) were convinced we would be unable to cope. Their attitude was: "These city chicks have come here to have a good time; we'll teach them a lesson! How dare girls even imagine that they can master this profession?" Nothing we did in fact would ever make us acceptable. If we did well, we were muggers and *chamchas* of the teachers; if we did badly it was, "See, I told you so." Our gender was used against us either way. I feel Namrata and I got treated particularly badly: we had both the wrong gender and the wrong background (city girls).

When I excelled in a subject, it was, "Oh, she'll fail in the practicals." But that's not what happened. We were as competent as our male colleagues at casting a bullock, performing a Pregnancy Diagnosis (PD) on a buffalo, artificially inseminating a cow, or doing various surgical procedures. We insisted on doing everything without any 'concessions' being shown to us. We did not want to be treated as if we were handicapped because of our gender.

Our teething problems—every vet student, regardless of gender, will probably have initial problems in

doing a PD or introducing a needle into the thick hide of a buffalo/camel, or restraining an animal — were attributed to our gender: "She is a woman after all." The boy who failed at something, first shot, was ignored or said to be "unwell," or (worst possible scenario) told he was "behaving like a girl."

Whether you are a boy or a girl, you still need help to persuade that obstinate buffalo to enter the "crush" (the structure used to restrain the animal); you still need five people to hold the buffalo in place, wherever



With one of the women para-vets

there is no crush, so that you can perform a PD. In certain normal procedures, such as assisting at a difficult delivery, I have often felt it is an advantage to be a woman. Our smaller hands can more easily enter through the vaginal opening of a cow/ goat/ sheep. When I began my rural vet service it was far easier for me to interact with village women than for my male colleagues. And in rural India, the key to effective livestock

improvement programmes is the rural woman, who plays a vital role in caring for livestock.

As women, we had to work twice as hard to prove ourselves. We couldn't afford to slip up for even a moment. Many of the teaching staff were just as biased as the students. They pretended that they could completely ignore our presence in class. It infuriated me whenever they addressed the class with "Well, gentlemen," when there were two women in class who were thereby unacknowledged. This wasn't just a slip of the tongue, but showed inherent gender bias. It occurred all the time. Imagine being ignored through four-and-a-half years of class. Other male professors would go out of their way to narrate derogatory and crude jokes about women in class, supposedly to humorously illustrate an otherwise dry subject. Here are some prize examples.

In a pathology class: "The female Anopheles mosquito is like the female of every species — a blood sucker."

In a reproductive physiology class:

"Female dogs, bitches in heat, are like the human female—always ready."

In a poultry reproduction class: "The male cock is like the human male. He cannot control himself, but must prove his virility with every female he sees."

Question by one student: "Are there no male contraceptives for cocks?"

Answer by teacher: "Why are you (sic) interested in contraception for Cocks? Come to me when you need it. I'll give you advice." In one class, the teacher, a Rajneesh devotee, lectured on "free sex and free love" instead of his lesson.

Every time this occurred, Namrata and I would walk out of class and

complain to the Dean and the Students' Council, but to no avail. They thought this was a harmless form of entertainment and not a blatant means of sexual harassment. Many a teacher would take it out on us for making a complaint by lowering our grade. This was one of the major disadvantages of our entirely internal system of grading, with no objective and anonymous scoring of our exam papers. One of the professors was so anti-women that he went out of his way to threaten us: "You think you'll get a good grade? I'll see that you won't." He never gave us anything higher than a "C", no matter how well we did. The teachers further reinforced the traditional male exploitative attitudes towards women and encouraged the boys to behave even more crudely by providing them with "biological and scientific justifications" as to why men were naturally built to be "molestors and eve-teasers."

A frustrated gynaecologist teacher attempted to hold a woman student's hand — inside the rectum of a buffalo! — when he was supposed to be teaching her to do a rectal examination of a large animal! Fortunately, he was removed from that post and when we came to gynaecology classes we did not have him teaching us.

We took action against one such offender. We caught him making vulgar and suggestive nude drawings of women on the blackboard, with our names scrawled all over them. We hoped that this visible harassment would be taken more seriously than our previous complaints and the culprits suitably punished. We submitted an official complaint to the Dean, the Vice-Chancellor and the Students' Council. We refused to withdraw our case, despite threats, bribes and pleas. Everyone wanted to protect the *goondas* and thought a private apology would suffice. We

rejected this proposed solution: it was not an issue of pride and ego. This was sexual harassment and we wanted the culprits to be punished.

The battle lasted a year. Finally, the Dean meekly let them off with a mere warning! Amazing! We discovered—there were no rules or legal punishment for such instances of sexual harassment. No wonder most rapists and molestors get away scot-free. The law is heavily weighed in their favour. Nevertheless, there was a positive impact. The boys in the Vet College apparently realised that we were ready to speak out and would not keep silent. Our last six months of university were by and large free of catcalls and chalk pieces.

Graduation was around the corner. Again we were at the crossroads. What next? I finished with the highest OGPA (overall grade point average on a scale of 400) and was the prospective gold medallist of the class of '82. Due to no fault of mine, I was denied the gold medal. In my second year a strike prevented us from an exam and the entire class was arbitrarily awarded an 'F'. We were allowed to reappear for the exam the next year, and I got my 'A'. But according to 'rules', anyone with an 'F' was denied the gold medal. I fought and pleaded that my 'F' was due to the strike. The strange thing was that, during other strikes where we missed exams we were not given 'Fs'.

The VC could have waived the rule in the light of the 'history' behind the 'F', but wouldn't. I think they all took some kind of sadistic pleasure in denying me the gold medal. Anything to teach a woman a lesson and put her in her place. This only strengthened my resolve not to give in, to pursue my career interests and not let them get the better of me.

Becoming a Rural Vet

I wanted to be a rural vet and deal with rural field realities. I didn't want

to specialise yet. I needed to understand the real-life problems faced by poor livestock producers. I did not want to become yet another armchair vet researcher.

Here again, I received no encouragement from my professors, who couldn't understand why a gold medallist wanted to waste her time in the field. "A gold medallist, and that too a girl, will not be able to live and work in a village situation," they said. "You should specialise in an avant-garde subject such as veterinary biotechnology and immunology. You should think of a research cum academic teaching line in a university." Here, once again, I was presented clearcut areas where a woman should work and where she shouldn't. Rural areas and large animals were definitely out of bounds, in their view.

My decision had its roots in 1984, another major turning point in my student days. Nitya and I were part of a team of students doing a study on the pollution and development effects of the Orient Paper Mills on the people and Surrounding environment in Madhya Pradesh. This was part of an environment education programme conducted by a group of Vidushaks, engineers and historians turned social activists, living in a place called Vidushak Kharkhav in Madhya Pradesh. We lived in a village and had to interact with a range of people and living creatures: Jats, displaced tribals, casual and contract labour, union workers, management, villagers, fisherfolk, police, poor women, buffaloes, cows and poultry. This experience raised some important questions for us about the other side of development, the environmental effects on poor people, of big dams, factories, mines and energy intensive production systems. It also called into question current development models and made us ask, for whom, by whom and at whose cost they were being

established. I began to see myself as an active player in this development process surrounding me and not just a passive bystander. I experienced an incredible flush of energy and an explosion of creativity. It was as if many new areas of living and doing opened up for me. No longer did I see myself as just working for money, or as a dog and cat vet, or as an

"on the way to USA in search for personal satisfaction" cynical professional. I found a new meaning in my profession and a purpose in my life. It was as if I'd woken up after a long, long sleep and was enjoying each moment of being awake. I spent the year following graduation travelling around the country on a travel grant, visiting a number of NGOs involved with animal husbandry work. In the process I would meet local vets, university research scientists, extension workers, Operation Flood programme officials and people in cooperative societies—I wanted to get a feel of what was happening in the field, the kind of research being conducted in livestock production, the nature of extension and development programmes in practice. It was an invaluable experience. I gained many insights into the nature of problems associated with livestock development in different parts of the country. I joined one of these groups as a resident veterinarian and was in for one-and-a-half years of unlearning — and relearning.

Field work meant serious stuff with the minimum of infrastructure, tools and medicines. I had to depend on my powers of observation, diagnosis



Women para-vets from Bihar are trained to perform artificial insemination

and ingenuity. I was working with a senior vet of the old school. They knew how to work in tough situations. He taught me many tricks that we weren't taught in school. During my association with the Bhagavatula Charitable Trust (BCT), I made daily village visits and also trained village women as paravets, or animal health workers. The day began at 6 a.m., when I got on my bicycle to go to a scheduled village. I had to do a lot of unlearning and the people and the village became my real teachers. It became clear to me within weeks that livestock diseases, low productivity and lowered reproductive capacities were just the external manifestation of real problems. Medicines were only an immediate short-term cure but gave no long-term solutions. The real causes lay with poor nutrition levels, disappearing common grazing lands, overgrazed lands, management practices unsuitable for their resource base, poor preventive health measures and an unsuitable breeding policy. Many of the problems were created, or at least aggravated, by an indifferent government veterinary and animal husbandry service and skewed development policies.

Injections, antibiotics, and so called breed improvement through

artificial insemination could not address the issues of chronic malnourishment, seasonality of fodder availability and the rapid privatisation of common grazing lands. Policies are implemented without any idea about existing field constraints and the people's traditional rearing and health practices. The key to solving these problems is organised community effort to address issues such as

controlled grazing, community fodder farms and a mass preventive vaccination and deworming programme. Women have to be right up in front in these matters. So often government programmes tend to ignore women, which means they miss out on informing the key persons who care for animals.

I also realised that I was not indispensable. People in the villages had over the years developed systems of coping and were not willing to accept the modern healer without lots of proof that our methods could do better. People preferred to use their time tested traditional systems of healing. It was only when they failed that they came running to us vets. This was no gender issue. My male colleagues encountered the same experiences. Why should we imagine that people would suddenly automatically trust us when they were probably seeing us for the first time in their lives? This lack of trust led to certain problems. Often local methods were unable to deal with the problem and we had animals brought to us on their last legs. Now, if we treated the animals and they died we would be blamed. What does one do in such a situation? To me it was not the dumb villager who was to blame. I felt I had

to do a lot of education work so that the village people and I could come to some workable arrangement. I had to explain that I could not do anything when they came to me at the last minute. So I'd say, "By all means use your own methods, but if the animal doesn't recover within 24 hours, or if it shows signs of deterioration, you must bring it to me. We have to cooperate with each other." Meanwhile, I made an all out effort to collect and study traditional practices. There were some that were positively harmful and some were very useful. Working with para-vets was a very good way to spread this information amongst the people.

New Insights

Allopathic western medicines are a very expensive method of treatment. I often could not treat a patient as the owner was poor and couldn't afford the cost of the medicines. BCT had a policy of charging the cost price of the medicine as we had no supplies of subsidised medicine. I was determined to find some alternative which was more cost-effective and within a poor person's means. I stumbled upon homoeopathy. I began with a few cases, which showed super progress. By the time I left BCT, I was treating everything by means of homoeopathy, ranging from chronic and acute digestive problems, to reproductive problems and even epidemic diseases such as haemorrhagic septicaemia and black quaxter. I have avoided surgical intervention by treating the problems with homoeopathy. The results were excellent, and so cheap—nothing ever exceeded Rs 4 - 5 for the entire treatment. This was an exciting breakthrough and today I have fully incorporated it as part of the training programme for village-level animal health workers. Today they are treating chronic cases of keralitis of the eye and corneal opacity with specific homoeopathic drugs. What



In BCT with a cured patient and its happy owner

would have cost at least Rs 100 now costs a mere Rs 5.

A vet training course must be structured within an animal production systems context, and not in compartmentalised subjects divorced from each other. In India, animals, crops, forests and people form a closely interacting system; problems need to be addressed within this framework, looking at poor producers' production goals, not at what is appropriate for scientists or urban consumers. Every vet needs to have a thorough understanding of veterinary epidemiology, public health and preventive medicine. Today, treatment is emphasised much more than required. We tend to have a single dimensional approach to problems without addressing interlinkages within the system. We try to fit a multi-dimensional field problem into our narrow mono-dimensional deterministic paradigm and the result is confusion. Areas in which restructuring is required are:

Diseases in the field boil down to three or four major problem areas. A vet comes into the field, expecting to find all the diseases (bacterial, viral, parasitic) he or she was taught to cure with medicines and finds the work very

boring. There are few chances to use diagnostic procedures. There are no antibiotic sensitivity tests as text books taught us. The same routine cases occur over and over again: indigestion, bloat and so on. Remedies require long-term planning and working with the community. No easy medicinal solutions exist.

Most vets were brought up in a rural environment. Nevertheless, all develop a superior, arrogant and paternalistic attitude to "those illiterate villagers", especially the poor. It is drilled into us from our first year on that poor illiterate villagers are dumb and backward. What we really need to learn is how to relate to them in order to understand how they make decisions. Many supposedly "backward" practices have a certain logic to them which we need to understand if we are to work for change.

Women have traditionally played a key role in the care and management of animals in most animal rearing communities. The few exceptions are in certain semi-migratory and pastoral communities. If change has to begin at the level of the small farm, we need to work actively with the women. This has not been the case. Apart from

some NGOs involved with development work and some state-level dairy cooperative programmes, there have been few initiatives involving women.

Women have to be involved at every step of the programme. Technological innovations have to be seen in the context of their impact on women. For instance, on excessively degraded land, uncontrolled grazing is harmful. But outright banning of grazing will mean that women have to spend that much more time in grass collection. What could be done is to first initiate community fodder farms (where grass is available), then some controlled grazing, and phase it in a planned way with the active involvement of women.

Traditional vs Modern

We are taught to condemn traditional practices of healing as being unscientific and mumbo-jumbo. In the process, we not only alienate the people, but lose out on studying traditional knowledge systems. We also fail to attain an insight into the existing level of technology. Alienating and ridiculing local people's practices, is the early major error in initiating any programme. Traditional knowledge needs to be collected, documented, scientifically analysed and clinically tested. It is only by doing this that we can differentiate between useful and harmful local practices. We can then enrich the systems of healing by encouraging the useful and discarding the harmful, by carefully explaining how they can learn which is which. The present highly centralised system of veterinary health services is pure madness in the light of the widely scattered, poorly connected spatial distribution of our villages, with one animal husbandry centre catering to several villages. It is impossible to imagine that one vet will be able to serve the health needs of over 25,000 animals located in 50

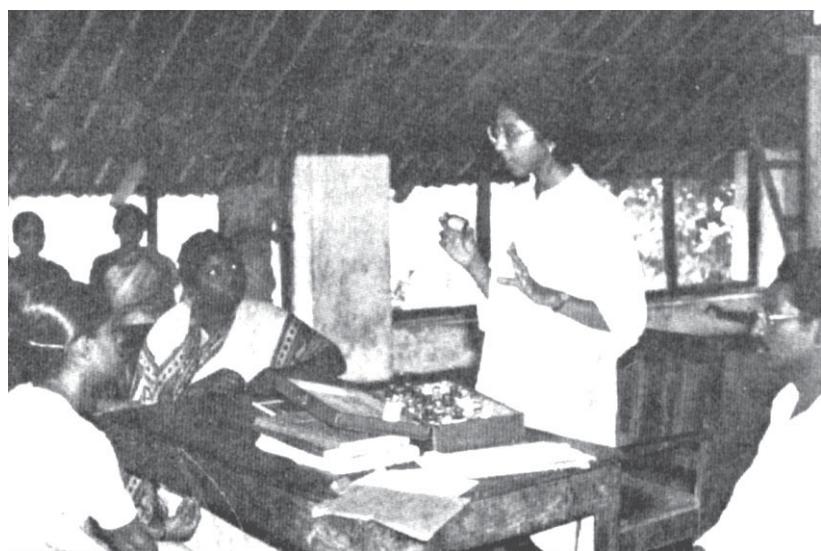
far flung villages as well as provide education input. It is also impossible for sick animals to travel seven or eight kms to the nearest clinic. Half would die on the way there. What is required is a network of village paravets who would serve as multipurpose workers: providing first aid and essential curative services, regular vaccination, deworming and monitoring disease patterns, mortality and morbidity rates, which will feed back into a larger district-level disease control and surveillance programme.

They will also play the role of mobilising/organising the community around community-level livestock programmes such as fodder farms, controls on grazing and protecting forests. They will be the best ones to disseminate new methods of managing and rearing livestock as well as documenting local knowledge systems. The vets should supervise and coordinate these programmes, train field workers and also be in charge of a hospital which can attend to more critical cases.

I feel my current work is organised precisely in this way. I am attempting to set up local community-level initiatives. The stumbling block is the veterinary establishment which feels

threatened by this kind of decentralised functioning and refuses to cooperate. Professionals always get nervous and hostile when their "exclusive private knowledge" is demystified and made accessible to the common person. They are as possessive as the traditional healer is about his/her herbal remedies.

People tend to take total, extreme positions, without considering field realities. They argue from preconditioned mindsets: either it is a case of "I'm a traditionalist, let's go back to nature, totally organic person. I will support everything traditional," or "I'm a scientific person, I believe in progress and the western system of analysis and development; I support everything that is western." Many have very limited field experience. I have had close to five years experience in the field, working amongst communities that have a great deal of useful traditional knowledge and at the same time are groping for help from other approaches. My perspective arises out of the work I am doing with marginal farmers and the landless in the coastal districts of Andhra Pradesh, with migratory shepherds in Karnataka and Andhra Pradesh and tribals in Andhra



Taking a class

Pradesh, Tamil Nadu and Rajasthan. Traditional systems of treatment at one level are a home-based skill. There are also specific families of "healers" who are paid by the villagers for their services in both cash and kind. They practice a combination of herbal medicine and *mantras*. People have a lot of faith in this system, especially for problems in what they regard as a "possessed" animal. Many practices can be shown to be beneficial, such as the use of certain roots and herbs for treating wounds, diarrhoea, worms and mild respiratory disorders. Others are downright harmful and dangerous, such as applying crushed stones to wounds to stop the bleeding, applying dung to skin rashes or wounds, putting crushed glass into the animal's eye to treat conjunctivitis and giving fowls certain herbal concoctions to treat Raniket disease.

The same is true of traditional management practices. The beneficial ones are those like tethering the cattle in the fields so that the dung fertilises the soil, penning the goat and sheep in the fields and letting them graze on the stubble of crops. Other practices are very harmful: for example, the practice of not feeding the newborn calf the mother's first milk, colostrum. This malpractice is common from north to south. A rare exception is the tribals in Andhra Pradesh, for whom milk is not an important commodity. They allow the calf to suckle the mother right from the time of birth. People throw away this wonderful source of natural antibodies because they think the calf gets diarrhoea from it. I think they see the first dung, called meconium, which is very liquidy, and

mistakenly believe this is diarrhoea.

People are managing with limited existing resources and levels of technology and end up using methods that are detrimental in the long run. For example, grazing is the only option today for many poor households. However, in reality, grazing on common land cannot support the grazing pressure.

Today there is no such thing as a "purely traditional system" in vet husbandry. This too has changed with a changing resources base. But



Pregnancy diagnosis on a buffalo in an Andhra village

there have been very few useful local developments to address the new problems that have arisen with the breakdown of traditional practices, the onslaught of the technologies developed in the West and the whole new interaction with external market forces.

The responses are "survival responses", looking to meet immediate needs without thinking about the future. The poorest then get caught in this vicious cycle of being forced to over-extract from their diminishing resource base (which has already been gobbled up by the industrialist, the urban rich and so on) in order to survive, thereby precipitating ecological disaster situations. Can you really blame the poor landless labourer in the arid

regions for rearing goats, the only animal that can survive without private land, on scarce fodder and water and under the toughest of circumstances? I do not. I try to support them. Similarly, the western forms of medicine and animal breeding, management and rearing for only one end product have limited application for the bulk of the poor livestock owners in our country. Our animals play a "multi-purpose" role in an integrated crop and animal production system. Western technological models are not the answer to our problems.

We have to evaluate and select the best of each system and adapt some of the old methods to meet new challenges. In short, we have to evolve some entirely new combination of old and new to meet our needs. Whatever be the system of treatment — traditional, ayurvedic, homoeopathic or

allopathic — basic good sanitation, hygiene, nutrition, housing, clean water and management are essential preconditions for good, healthy and sustainable livestock production. Treatment, if necessary, should be a combination of the best of each system which is locally and easily available, and cost effective with limited side effects. But the golden rule is: prevention is better than cure.

Today, poor tribals are as exploited by the vet and the 'modern' technologies, as they are by traditional healers. They are being denied access to adequate information that would enable them to make an informed choice. A lot of "demystification" of both systems needs to be done. As scientifically thinking human beings, we cannot

and should not blindly support recommendations without demonstrations that the methods work in the fields of the actual farmers.

In the field, I never once experienced the kinds of prejudices and hurdles that I did from my male colleagues and professors. This seemed to be a wholly urban and rural middle class phenomenon. Curiosity, yes, friendliness, yes, but never once did they make me feel that I was an incompetent woman vet, incompetent to address the complex web of problems. There were the usual questions about whether I was married or single, had children and about where I came from. They were, I think, relieved to have someone who was willing to discuss their problems with them. The women liked having a woman vet around. I was pretty comfortable working with and in the midst of both men and women.

I also spent two years in the US getting post graduation training. It furthered my desire to come home and work. It was almost like telling the HAU establishment, "You thought I wasn't good enough! Well, I even made it on my own, with a university fellowship to that 'success of all successes' — doing post graduate studies in USA." The reactions on my return were, "You actually returned home to India after being in the US?" and "Back to those godforsaken places?"

The average vet student didn't voluntarily opt for veterinary science. It was a choice by default, after not making it to medical college, engineering or dentistry. The majority were pretty unenthusiastic about the profession.

They had a big complex about the profession. They themselves felt that this was an "inferior" profession, not at par with doctors' or administrative officers'. It doesn't have the desired status or pay. Though veterinary science should be an important profession in this country of 400 million animals, it is not.

I feel that our caste system has a role to play here. After all, isn't it only the so-called 'outcaste' who deals with animal carcasses, dung, dirt and so on?



Pregnancy diagnosis on a buffalo in an Andhra village

Regrettably, vets have no respect or pride in their profession either. They themselves feel that what they are doing is not "as good as...." They constantly carry this chip on their shoulders and have to repeat to themselves and others that, "We are just as good as medicos." Incidentally, another advantage that most women who opt for veterinary science have is that they do so voluntarily, and I would imagine consequently have a more positive attitude to the profession.

The Pioneers Lead the Way

My women colleagues went their own way. Quite by chance, many of us ended up working in projects that had a development basis to them. Namrata specialised in veterinary

immunology and is now working as a research scientist in the Bharatiya Agro Industrial Foundation's Vaccine Production Centre. Nitya has become an excellent surgeon, but continues her involvement with rural and urban livestock development and animal welfare work. We hope to join forces some day to provide an alternative veterinary and animal production service team. Dr Usha, our adviser in college who has been our rock of Gibraltar, was in the Ministry of Agriculture as a deputy director and has

now become head of the department of veterinary epidemiology in HAU.

There are now at least 1,500 women vets in India and an organisation called the Indian Association of Lady Veterinarians. In the south, especially in states such as Tamil Nadu and Kerala, women make up at least 50 percent of each veterinary college class. They

are involved in a wide range of services, from research and private practice to government service and teaching.

We women can play an important role in influencing the profession to become more sensitive not only to issues relating to animal husbandry but gender issues as well. We are the key factor in this link between rural women, their livestock and the profession. We have to play a far more active role, not only in gender sensitising our professional colleagues, but also in helping our profession to look at ways in which it can become more meaningful to people and more creative for ourselves. □