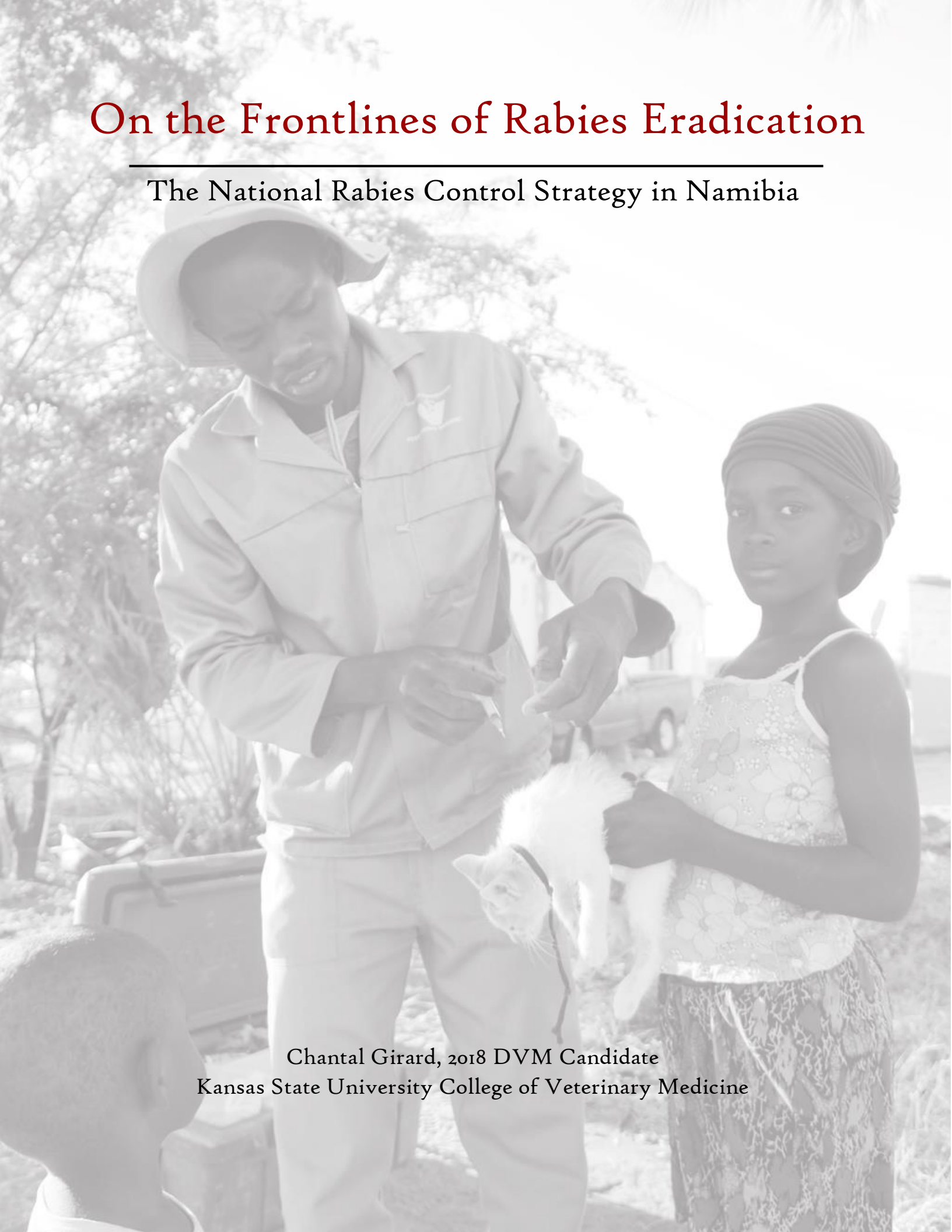


On the Frontlines of Rabies Eradication

The National Rabies Control Strategy in Namibia



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Introduction

On May 8th, 2017, just two days after receiving my white coat marking the start of my final year of veterinary school, I began my two-day journey from the USA to Namibia to spend the first four weeks of my clinical rotations working alongside veterinarians and vaccination teams on the frontlines of canine rabies eradication through the National Rabies Control Strategy (NRCS).

The NRCS project commenced on March 1st, 2016 in the Oshana region of Namibia. The project has been funded through the OIE by the Federal Republic of Germany, as well as through a recurrent budget from the Government of the republic of Namibia under the Ministry of Agriculture Water and Forestry. The overarching goal of the project is to eradicate dog-mediated human rabies through public education and canine vaccination, and in the process, strengthen veterinary services in the country, improve vaccination programs and disease surveillance, and enhance interdisciplinary collaboration (One Health). Between March 2016 and 2017, the program completed phase one, a pilot education, KAP (Knowledge, Attitudes, and Practices) study and vaccination campaign in a single region (state) of Namibia. The successes and challenges of this pilot program were thoroughly analyzed and this knowledge was then used to implement the project on a larger scale in several surrounding regions (Kavango East, Kavango West, Kunene, Ohangwena, Omusati, Oshana, Oshikoto, and Zambezi) beginning in April 2017. The focus in April was public education regarding canine rabies and the upcoming campaign, followed by the canine vaccination campaign commencing in May, coinciding well with my arrival in Namibia.

The objectives of my involvement were to 1) gain perspective on the planning and implementation of a rabies control strategy in an area affected by rabies, 2) better understand the cultural, social, financial, and health implications of rabies in Namibia and what challenges these factors present to its eradication, and 3) make connections with the Kansas State University Rabies Laboratory, GARC, and OIE in hopes of spreading information to benefit the current project in Namibia, future NRCS projects, as well as the academic and research communities at Kansas State University. Working alongside state veterinarians and trained veterinary health workers, my time in Namibia consisted of assisting in vaccination clinics out in the field, as well as visiting and observing state veterinary facilities, which included observation of both clinical practice and behind-the-scenes campaign organization and logistical planning.

In the Field

My days vaccinating began earlier than the sun, as I awoke each day in my government-issued tent among 24 other tents at our state veterinary facility campsite. Following a group breakfast and debrief from the previous day, our teams of three would load up into white trucks with vaccine coolers and other supplies in hand and head out to our assigned locations for the day. Locations varied greatly, from rural villages to urban centers, as did the pet owners, whom arrived from all distances and backgrounds to have their pets vaccinated. Though the official language in Namibia is English, the native language of Oshiwambo was spoken far more often in the setting in which we were working, which presented a unique opportunity for me to learn on the fly and as a result, form stronger connections with the animal owners I had the honor of crossing paths with. Nighttime at the camp was spent discussing the successes and challenges of the day and celebrating the progress made by sharing a meal of mahangu porridge over the campfire.

My days outside of fieldwork were spent in the state veterinary offices, catching a glimpse of clinical practice in Namibia (as the majority of clinics are government-run rather than privately owned) and working on campaign business alongside the project leaders. In the clinic, which ran on a solely “walk-in” basis, clients and patients flooded the veterinary lobby throughout the day. With the more seasoned veterinarians running the rabies campaign, the new graduate veterinarians

juggled the majority of appointments during the day, and did so with efficiency and adaptability. Cases ranged from fly strike and infected abscesses in dogs to neurologic signs in calves and goats (which were considered rabies suspects) and everything in between. Aside from clinical observation, I also spent much of my time with Dr. Rauna Athingo, the Chief Veterinarian and National Rabies Coordinator in charge of the NRCS, discussing the successes of the pilot program, the challenges that have been faced in the campaigns, as well as the future of rabies eradication in Namibia.

Debrief

The NRCS in Namibia is a prime example of One Health collaboration working toward a common goal of improving human and animal health on a national scale. One moment that truly brought this to light during my time in Namibia was when I sat in on a training session at the start of a new region's campaign. I found myself not only engaged in discussions and presentations by veterinarians and animal health workers on canine rabies, but also by state officials and health care personnel on human exposure and public health. The individuals involved in this project are at the very forefront of rabies eradication efforts. With continued support and a strong commitment by the Namibian government to make canine rabies eradication a national priority, I firmly believe that through long-term implementation of vaccination campaigns and continued persistence in addressing challenges in the field, successful rabies eradication is possible through the NRCS.

The work being done behind the scenes by project leaders in project management, organization, and training, as well as the vast efforts being made in the field by vaccination teams and regional veterinarians is truly impressive. A campaign of this magnitude is not possible without the efforts of many, but without the persistence and dedication of Dr. Athingo, this campaign would not be where it is today. In the short time I had the privilege of working alongside her, I realized quickly what a true leader she is in the fight towards rabies eradication.

Through this project, I've been able to combine my interests in the clinical, sociological, and public health aspects of international veterinary medicine through first-hand fieldwork on the front lines of rabies surveillance, control, and intervention. Building my understanding of the impact of such a severe zoonotic disease at the community level has brought to light the reality of many topics I have studied in the classroom. Aside from the clinical veterinary education this project offered, my biggest learning opportunities stemmed from the interactions I had with the veterinarians, vaccination teams, and the community members with whom I had the privilege of working alongside and serving. The opportunities to help educate pet owners about rabies, to participate in high volume vaccination, and to discuss/analyze control strategy successes and areas for improvement with leaders in the field has helped me gain perspective on the important role veterinary medicine plays in zoonotic disease surveillance and control. The knowledge and perspective I gained in Namibia will follow me as I continue to work towards the culturally aware and globally active veterinarian I aspire to be.

Acknowledgements

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