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**PROMOTING THE ROLE OF TRADITIONAL MEDICINE IN HEALTH SYSTEMS:  
A STRATEGY FOR THE AFRICAN REGION**

**Report of the Regional Director**

**EXECUTIVE SUMMARY**

1. In the Alma-Ata Declaration of 1978 recognition was given to the role of traditional medicine and its practitioners in achieving health for all. The WHO Regional Committee for Africa, by its resolution AFR/RC34/R8 of 1984, urged Member States to prepare specific legislation to govern the practice of traditional medicine as part of national health legislation and ensure an adequate budget allocation that will make for effective development of traditional medicine.
2. The forty-ninth session of the Regional Committee invited WHO to develop a comprehensive regional strategy on traditional medicine and, by its resolution AFR/RC49/R5, requested the Regional Director to support countries in carrying out research on medicinal plants and promoting their use in the health care delivery systems. In order to implement these orientations, the countries will need to articulate policies which would enhance the development and use of traditional medicine. Furthermore, research leading to improved access to essential traditional medicine and appropriate utilization of medicinal plants in health systems should be pursued.
3. The proposed strategy aims at assisting the countries to optimize the use of traditional medicine in order to contribute to the achievement of health for all. The principles on which the strategy is based are advocacy, recognition by governments of the importance of traditional medicine for the health of the people, the institutionalization of traditional medicine and partnerships. The priority interventions are policy formulation, capacity building, promotion of research and development of local production.
4. The Regional Committee is invited to examine this report and provide guidance for implementing the strategy.

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## INTRODUCTION

1. The World Health Organization estimates that 80% of the population living in rural areas in developing countries depend on traditional medicine for their health care needs<sup>1</sup>. WHO defines traditional medicine as "the total combination of knowledge and practices, whether explicable or not, used in diagnosing, preventing or eliminating physical, mental or social diseases and which may rely exclusively on past experience and observation handed down from generation to generation, verbally or in writing". This Strategy promotes the integration into health systems of traditional medicine practices and medicines for which evidence on safety, efficacy and quality is available and the generation of such evidence when it is lacking. In this context "integration" means increase of health care coverage through collaboration, communication, harmonization and partnership building between conventional and traditional systems of medicine.
2. The Alma-Ata Declaration of 1978, the relevant recommendations of WHO governing bodies and the orientations of the Regional Health-for-All Policy for the 21st century underscore the importance of traditional medicine and its practitioners in primary health care. They also address the strategic options that are expected to help achieve health for all. Other partner agencies of the United Nations and the Organization of African Unity have also been stressing the importance of traditional medicine.
3. Despite these policy orientations, few countries have developed national policies, legal frameworks and codes of conduct for the practice of traditional medicine. Several countries have created associations of traditional medicine practitioners and developed programmes for the training of traditional medicine practitioners including traditional birth attendants and for their inclusion in undergraduate courses in the health sciences.
4. The situation of traditional medicine remains delicate in some Member States. Major weaknesses include inadequate policies and legal frameworks, insufficient evidence on safety and efficacy, lack of knowledge of attitudes, practices and behaviours in traditional medicine, lack of coordination among institutions, inadequate documentation and lack of protection of intellectual property rights and of endangered medicinal plant species. To address these weaknesses there is need to strengthen and develop traditional medicine and integrate it into the national health systems of Member States.
5. This document responds to the recommendation of the 49th session of the Regional Committee for Africa requesting WHO to develop a comprehensive strategy on traditional medicine.

## SITUATION ANALYSIS AND JUSTIFICATION

6. Trends in the use of traditional and complementary medicine are on the increase in many developed and developing countries. In Australia in 1998, about 60% of the population used complementary medicine, 17 000 herbal products had already been registered and a total of US\$ 650 million was spent on complementary medicine. In 1992, 20 million patients in Germany used homeopathy, acupuncture as well as chiropractic and herbal medicine as the most popular forms of complementary medicine. In Malaysia, it is estimated that about US\$ 500 million is spent every year on traditional medicine, compared to only about US\$ 300 million on modern medicine. In Sri Lanka, 50-60% of the population rely on traditional medicine and Traditional Birth Attendants.
7. The herbal medicine market has expanded tremendously in the last 15 years and the total annual sale of herbal medicines is still growing. In 1996, the total annual sale of herbal medicines reached US\$ 14 billion worldwide. In China, traditional medicines account for 30-50% of total medicinal consumption<sup>2</sup>.

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<sup>1</sup> Bannerman RB, Buton J and Wen-Chieh C (1983). Traditional medicine and health care coverage. World Health Organization, 9-13.

<sup>2</sup> World Health Organization (1998) Background information for reviewing the Traditional Medicine Cabinet Paper. WHO/EDM/HQ.

8. Some countries in the African Region are producing locally, on a pilot-scale, various plant-based preparations for chronic diarrhoea, liver disorders, amoebic dysentery, constipation, cough, eczema, ulcers, hypertension, diabetes, malaria, mental health and HIV/AIDS. Some of these medicines have been registered and included in the national essential drug lists. Some research institutions, including WHO collaborating centres, are carrying out research on traditional medicine.

9. The African Region is facing difficulties in ensuring equitable access to health care and only about half of the population in the Region have access to formal health services. Traditional medicine, however, maintains its popularity for historic and cultural reasons. In Benin and Sudan, for example, 70% of the population rely on traditional medicine while, in Uganda, users of traditional medicine make up 30% of the population. In Ghana, Mali, Nigeria and Zambia, 60% of children with fever were treated with herbal medicines at home in 1998.

10. A survey, using a questionnaire, was carried out in 1998 on the situation of traditional medicine in countries of the African Region. The results of the survey showed that many countries have yet to develop and implement national policies on traditional medicine as part of their national health policies, enact legislation, set up structures and develop codes of ethics and conduct for the practice of traditional medicine. The organisational aspects of traditional medicine have to be strengthened. National bodies for the management of traditional medicine should be established, associations of traditional medicine practitioners should be created and closer collaboration forged between the practitioners of traditional medicine and those of conventional medicine. Moreover, the survey indicated that needs in traditional medicine had to be assessed and training programmes established and strengthened. There is also need to improve the regulatory environment, the protection of intellectual property rights and the development of small-scale local production into large-scale manufacturing.

## THE REGIONAL STRATEGY

### Aim and objectives

#### *Aim*

11. The aim of this strategy is to contribute to the achievement of health for all in the Region by optimizing the use of traditional medicine.

#### *Objectives*

12. The objectives are:

- (a) to develop a framework for integration of the positive aspects of traditional medicine into health systems and services.
- (b) to establish mechanisms for the protection of cultural and intellectual property rights.
- (c) to develop viable local industries to improve access to traditional medicines.
- (d) to strengthen national capacity to mobilize stakeholders and formulate and implement relevant policies.

### Principles

#### *Advocacy*

13. Countries should embark on advocacy for community orientation, dissemination of appropriate information, promotion of positive attitudes and practices and discontinuation of bad practices.



### ***Government recognition of traditional medicine***

14. The recognition by governments of the importance of traditional medicine for the health of the people in the Region and the creation of an enabling environment are the basis for optimizing the use of traditional medicine. There is need to rally the sustainable political commitment and support of policy makers, traditional medicine practitioners, nongovernmental organizations, professional associations, the community, teaching and training institutions and other stakeholders, through advocacy and utilization of social marketing and participatory methods.

### ***Institutionalization of traditional medicine***

15. The setting up or strengthening of structures for traditional medicine is essential for optimizing the use of traditional medicine and should be based on a thorough analysis of the prevailing systems with the involvement of traditional practitioners themselves and the communities. Some of the organizational arrangements required are:

- (a) The establishment of a multidisciplinary national body responsible for the coordination of traditional medicine; the formulation of a policy and legal framework; the allocation of adequate resources; the development of strategies and plans for improving the regulatory environment for the local production and rational use of traditional medicines; and greater protection of intellectual property rights.
- (b) The setting up of professional traditional medicine bodies to enhance the discipline in areas such as the drawing up of a code of conduct and ethics; the development of norms and standards; the establishment of mechanisms for the official recognition of traditional medicine, including the identification, registration and accreditation of qualified practitioners.
- (c) Mechanisms of collaboration between conventional and traditional medicine practitioners in areas such as referral of patients and information exchange at local level.

### ***Partnerships***

16. The ministry of health should collaborate with other ministries, professional associations, consumer groups, nongovernmental organizations, associations of traditional medicine practitioners, regional and interregional working groups on traditional medicine and training institutions in both the public and private sectors to optimize the use of traditional medicine.

### **Priority interventions**

#### ***Policy formulation***

17. The countries should formulate a national policy on traditional medicine as part of their overall national health policy. This should be followed by legislation spelling out the rights and responsibilities of traditional medicine practitioners and addressing legal issues related to the cultivation, conservation and exploitation of medicinal plants and their rational use. Existing legislation should be reviewed to conform to national policies.

18. WHO will develop guidelines and organize regional and intercountry workshops to stimulate the development of national policies on traditional medicine. WHO will also advise the countries on relevant legislation for the practice of traditional medicine.

#### ***Capacity building***

19. The countries should assess their needs in regard to traditional medicine practice, develop regulations on traditional medicine practice and draw up a code of ethics to guarantee the provision of safe and quality services.

20. Integration of traditional medicine into health systems at country level requires a better understanding of the specific role of traditional medicine. Therefore, health science institutions should incorporate aspects of traditional medicine into the training curricula of health professionals and embark on continuing education and skills development programmes.

21. WHO will promote the acquisition of knowledge and skills by facilitating the exchange of experiences and supporting the development of training programmes and training materials.

#### *Research promotion*

22. At the country level, research and training institutions, including WHO collaborating centres for traditional medicine, should be supported to carry out research on traditional medicine. Resources should be mobilized to support participatory research particularly on knowledge, attitudes, practices and behaviours and on safety, efficacy and quality to enhance the role of traditional medicine in health systems. Intercountry, regional and international collaboration in medicinal plant research, cultivation and use should be fostered.

23. WHO will identify and strengthen institutions carrying out research on traditional medicine. WHO collaborating centres will be strengthened to carry out research and disseminate the results. Medicinal plant research that could promote self-reliance and reduce costs will be supported, as will the documentation of inventories of effective traditional medicine practices and the development of national formularies on traditional medicines.

#### *Development of local production*

24. At the country level, mechanisms for developing and improving the local production of traditional medicines should be put in place. Such mechanisms should include encouraging local industry to invest in the cultivation of medicinal plants; exchanging information about ongoing research; and learning from experiences existing outside the Region. Governments should play the key role of creating an enabling political, economic and regulatory environment for local production. Access to traditional pharmaceutical products should be improved. A list of traditional medicines could be agreed upon and mechanisms worked out towards introducing medicines with evidence-based efficacy and safety in the essential drugs list. Large-scale cultivation and conservation of medicinal plants should be carried out with the involvement of traditional medicine practitioners and the communities.

25. WHO will undertake advocacy and encourage the countries to develop local production and include medicines with proven safety and efficacy into their national essential drug lists.

#### **Implementation framework**

##### *The role of ministries of health*

26. At the country level, governments should recognize the importance of traditional medicine to their health systems. They must be instrumental in creating an enabling environment for promoting traditional medicine. Their role should be, among others, to allocate adequate resources to traditional medicine and mobilize additional resources to support the institutionalization of traditional medicine and facilitate the training of health personnel in traditional medicine.



### *The role of other sectors*

27. Sectors such as education, information and communication should be involved in processes such as the development and promotion of culture and traditional practices and in educating the population to empower them to make the right choices as regards the use of traditional medicine. The natural resources, agriculture and industry sectors will have an important role to play in the conservation of medicinal plants and the local production of traditional medicines.

### *The role of partners*

28. Communities, nongovernmental organizations and other partners will have major roles to play in optimizing the use of traditional medicine in Member States. Several international partners are particularly well placed to facilitate specific aspects of the implementation of the regional strategy. These partners include the ADB, UNEP and UNIDO in matters related to the conservation of medicinal plants and the development of local production.

29. WHO will advocate political commitment, support from stakeholders and the creation of an enabling environment for traditional medicine and will facilitate the mobilization of resources to assist the countries in the implementation, monitoring and evaluation of this strategy. Guidelines and tools to assist the countries in developing policies and regulations, strengthening national traditional medicine programmes and developing local production, among others, will be prepared and made available to the countries. WHO will encourage the involvement of all interested partners in the Region in the implementation of the strategy.

### **Monitoring and evaluation**

30. WHO will collaborate with the countries in monitoring and evaluating the implementation of the strategy.

### **DETERMINANTS OF SUCCESS**

31. Critical determinants of success of the implementation of this strategy are political commitment, ownership of the strategy, development of country-specific strategies, mobilization and judicious use of available resources, utilization of research results for decision making, effective partnerships and establishment of management bodies. The human and financial resources of the Regional Programme on Traditional Medicine will be strengthened to facilitate the implementation of the strategy.

### **CONCLUSION**

32. The development of the present strategy reflects the importance Member States and WHO attach to the role that traditional medicine and its practitioners play in health development in Africa. Integration of traditional medicine in health systems will result in increased coverage of, and access to, health care. The promotion of positive traditional medicine practices and the use of traditional medicines of proven efficacy and safety will supplement other efforts to achieve health for all.

33. The implementation of this strategy requires concerted collaboration among all the partners and effective and rational mobilization of all resources available at the country and regional levels. In that context, the promotion of the role of traditional medicine in the African Region is critical to, if not decisive in, assisting Member States to integrate traditional medicine into their national health systems.