

**SPEECH BY MINISTER OF HEALTH, DR JOE PHAAHLA, MP, AT THE  
TRADITIONAL MEDICINE SUMMIT 2023  
BIRCHWOOD CONFERENCE CENTRE**

**23 – 24 FEBRUARY 2023**

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Programme Director,  
Representatives from Traditional Health Practitioner Organisations,  
Director-General of Health, Dr Sandile Buthelezi,  
Government Officials,  
Distinguished Guests,  
Ladies and Gentlemen,

It is an honour to join and address you on this the occasion of the first Traditional Medicine summit. Traditional systems of medicine are a topic of global importance. In most of the developing world, traditional medicines continue to play a significant role in the treatment and management of some of the devastating and life-threatening diseases.

In countries across the world, traditional medicine is the first port of call to treat diseases for many millions of people around the world, and today about 60–80% of the world's population, mainly from developing countries, depended primarily on traditional medicines.

From literature, we know that traditional medicine is the set of knowledge, skills (ability to employ empirical knowledge), and practices based on theories, beliefs, and experiences of different cultures, whether they are explicable or not and used for the maintenance of health and for the prevention, diagnosis, improvement, or treatment of physical or mental illness. Generally, the use of herbal medicine is highly frequent in traditional medicine for the treatment of diseases. However, traditional medicine is a wider area, where the use of animals, fungi, or other components of nature (rocks, minerals, etc.) can also be included for the treatment of conditions or diseases.

Across the world, traditional medicine either is the mainstay of healthcare delivery or serves as a complement to it. In some countries, traditional medicine or nonconventional medicine may be termed complementary

medicine for its, more recently, popular use in parallel with allopathic medicine, especially for the treatment and control of chronically diseases.

Diffusion and the increasing use of traditional medicine have created challenges in public health from the point of view of politics, safety, efficacy, quality, access, and rational use. Mainly because for some ethnic groups, traditional medicine has represented the only option for disease prevention and cure; this is mainly due to exclusion and extreme poverty in which they live, as well as the lack of health services.

## Programme Director

Traditional medicine is an important healthcare component in low-income countries. The prevalence of traditional medicine use in low-income countries is estimated to be between 40% and 71%, for example, in sub-Saharan Africa, it is estimated at 58.2% on average in the general population, but prevalence rates vary widely among studies.

The high prevalence of traditional medicine use in low-income countries has important clinical implications, especially when traditional medicine and conventional treatments are used concurrently. Traditional medicine use has important historical and cultural significance in diverse settings and populations and may provide benefit when used safely and appropriately.

Traditional medicines have been used in many countries throughout the world over many centuries. Today, these medicines still represent an important part of healthcare in some countries. By way of example, more than 100 countries have regulations for herbal medicines, but practices of traditional medicine vary greatly from country to country and from region to region, as they are influenced by factors such as culture, history, personal attitudes, and philosophy. While it is necessary to tailor legislation and delivery to reflect the needs and traditions of our people, several themes and issues are common across the globe, such as the importance of practitioner training, the issues related to safety, the need to enhance research into both products and practices, and the importance of labelling.

Also, the use of traditional medicines has expanded globally and has gained popularity in the last few decades. Specifically, these practices have not only continued to be used for primary healthcare of the poor

in developing countries but have also been used in other countries where conventional medicines are predominant in the national healthcare system. With this tremendous expansion in the use of traditional medicines worldwide, safety and efficacy as well as quality control of herbal medicines and traditional procedure-based therapies have become important concerns for many of these countries. For this reason, World Health Organization has been increasingly involved in developing international standards and technical guidelines for these types of medicines, and in increasing communication and cooperation between countries. The challenge now is to ensure that traditional medicines are used properly, and to determine how research and the evaluation of traditional medicines should be carried out.

We know that colonialism has impacted negatively on the perception of the practice of traditional medicine. When I grew up, traditional medicine was associated with witchcraft and evil spirits, but I am glad that there was mindset shift and today people embrace multiculturalism and traditionalism. Traditional remedies which use medicinal plant and animal products have been long used as treatments for human diseases and medical conditions for ages, it is said to be one of the oldest and most diverse of all medicine systems.

May I point out that since the Alma-Ata Declaration on primary health care, in 1978, which recognized the role and benefits of traditional medicine and its practitioners in health care services delivery, the World Health Organization produced the WHO traditional medicine strategy and most recently the 2014-2023 Strategy which was launched in October 2013. This strategy was developed to help health care leaders to develop solutions that contribute to a broader vision of improved health and patient care. The strategy has two goals:

- To support Member States in harnessing the potential contribution of Traditional and Complementary Medicines to health, wellness and people centred health care.
- To promote the safe and effective use of Traditional Medicine through the regulation of products, practices, and practitioners

Ladies and gentlemen

I urge you to use these two days to map our way as a country in formalising Traditional Medicine and its inclusion in the National Health System. The robust and frank discussions should be entrenched in the three pillars of the Traditional Medicine system, which are Practitioners, Practice and Products. Ladies and Gentlemen, I am highlighting these points in consideration of the integral part that Practitioners play in the health system. I would also like to commend the role played by the Traditional Health Practitioners organisations and Provincial Structures in preparation for this event.

We need to demonstrate the importance of the relationship that should exist between the Department, Traditional Health Practitioners, and different formations in the sector. This relationship should be intensified as demonstrated during the outbreak of COVID-19 and the period under lockdown.

During lockdown, the Department together with different stakeholders in the sector, managed to develop Guidelines for Traditional Health Practitioners in managing the pandemics, which were approved by the Ministerial Advisory Committee on COVID-19 at that time.

We commend the understanding and commitment shown by Traditional Health Practitioners in the fight against the virus and playing roles such as:

- Dissemination of Public Health awareness messages.
- Educate community on the importance of personal hygiene.
- Provide necessary counselling to patients.
- Postponing all rituals, ceremonies like graduations, initiations schools and events organised for pursuing the rights of passage and other similar activities.

We are aware of the concerns raised with the Department by the sector and trust that all of you present here today, from both government and the traditional medicine sector have come here, fully committed to resolve these matters. There are matters relating to the mandate of the Regulator and should be addressed by the interim Traditional Health Practitioners Council of South Africa as soon as it is appointed.

We also acknowledge that issues related to Traditional Medicine cut across different Departments such as Science and Innovation, Environmental Affairs, COGTA etc. Those concerns that are related to legislation administered by other Departments such as those I mentioned should be attended to, while following due process.

Another matter which needs special attention is related to the sick notes issued by Traditional Health Practitioners. This is an issue which is affecting employers both in public and private sector. We need to do what is necessary, for these sick notes to comply with the requirements of the Basic Conditions of Employment Act.

This legislation requires that an acceptable and verifiable sick note should be issued by a health practitioners who is registered with the respective Regulator. In this case our Regulator is the interim Traditional Health Practitioners Council of South Africa. Appointment of this Council will be prioritized so that registration of Traditional Health Practitioners should be expedited.

Though, I would like to caution against the abuse of system of sick notes which has been a practice by some medical practitioners and prompted investigations. The Traditional Health Practitioners Council should protect the reputation of the sector by ensure that the members who are implicated in the misconduct and abuse of the system of issuing sick notes, are dealt with decisively.

Many doctors have been arrested for allegedly selling sick notes to patients not diagnosed with any illnesses. The employers have the right to scrutinise any sick notes if they become suspicious or experience an abnormal increase in sick notes handed in by their employees all from the same doctor.

The Traditional Health Practitioners Act 2007 (Act No. 22 of 2007) was developed and passed in Parliament following all the required processes including consultations with the relevant Stakeholders. While the Department was implementing the legislation, we identified some of the shortcomings that requires amendments. We need to establish the Council for Traditional Health Practitioners, which will be a permanent structure, within prescribed

periods of appointment validity. This is one of the main items we identified in the legislation that requires amendment.

We trust that discussions at this Summit, included the way forward in finalising the Policy on Traditional Medicine. This matter has been under discussion for far too long and we need to have a policy position on matters related to Traditional Medicine. The policy framework should be a guiding document for the inclusion of African Traditional Medicine in the South African Health Care System and to facilitate a situation where different disciplines of medicine (conventional and traditional) co-exist in the National Health Care System.

South Africa is a constitutional democracy. We are subjected to legislation passed by Parliament. The department is mandated to implement legislation pertaining to its sphere of work and the Traditional Health Practitioners Act is an example of such Legislation. It is also important that as Stakeholders, we familiarise ourselves with the mandates that we carry in this constitutional democracy. Your activities as Stakeholders should not impede the Department in implementing the legislation but should always be complementing the Department's processes while also protecting the legitimate interest of Practitioners.

The draft policy suggests the development of legislation that will facilitate the establishment of the National Institute on African Traditional Medicine. This Institution should be created to facilitate an enabling environment and create space for more research activities based on the theory and practice of African Traditional Medicine. This will promote the conduct of clinical research based on African traditional medicine in an appropriate environment. The National Institute of African Traditional Medicine should play a coordinating role to ensure safety, quality and timeous availability of African traditional medicines and raw materials.

SAHPRA is currently developing guidelines for registration of Traditional Medicine products. The Regulations will contribute towards Industrialization of Traditional Medicine products, and they are an integral part in the value chain. We encourage SAHPRA to expedite this process so that we can unlock the potential Traditional Medicine products can contribute to our economy. During the peak of COVID-19, many traditional health practitioners

approached the department that they have medicine that could cure COVID-19 pandemic, unfortunately we couldn't assist because of pending SAHPRA processes to develop and finalise the guidelines for registration of such products.

In conclusion, let me remind this summit that in 2000 in Ouagadougou, city of Burkina Faso, during the 50<sup>th</sup> Session of WHO Regional Committee for Africa, a decision was taken to celebrate African Traditional Medicine Week on the last week of August and African Traditional Medicine Day on the 31st of August of each year. In 2022, we celebrated African traditional medicine Day under the theme “***Two Decades of African Traditional Medicine Day Towards Achieving Universal Health Coverage in Africa***”. The finalisation of the process of registration of traditional health practitioners will assist to accelerate the pace at which we integrate traditional Medicine in the Primary health care programmes.

We wish you a successful engagement and positive outcome

Many thanks for your audience.