



The Context of Traditional and Complementary Medicine in Uganda: The urgent need for a Legal and Regulatory Framework

A presentation by THETA Uganda, Hotel Africana, Kampala

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Presentation outline

1. Background of THETA
2. Background of Traditional and Complementary medicine
3. Policy and regulatory framework -African region and Uganda in particular
4. The Indigenous and Complementary Medicine Bill 2015
5. Discussions, Q&A



THETA'S BACKGROUND

THETA-Uganda is a not-for-profit Ugandan Non-Governmental Organisation (NGO) registered as an NGO in 1995.

THETA's strategic objectives are:

- 1) To promote research in traditional medicine
- 2) Strengthen capacity for holistic health care
- 3) To build models for traditional and conventional medicine integration
- 4) To empower communities to take charge of their own health



VISION

A society where people enjoy good health as a result of their own collective actions as well as access to quality holistic health services

MISSION

To improve health of society through strengthening collaboration between the traditional and bio-medical health care systems and communities.




Definitions

Traditional medicine :

- It is the sum total of the knowledge, skill, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness (WHO 2013)






 **Complementary medicine /Alternative medicine:**
Refers to a broad range of health care practices that are not part of that country's own traditions or conventional medicine and are not fully integrated into the dominant health-care system. Complementary/alternative medicine is interchangeably with traditional medicine in some countries (WHO 2013).


 Complementary/Alternative medicine practices include; Acupuncture, Aromatherapy, reflexology etc.



Traditional and Complementary Medicine in the Global context

-  Traditional Medicine was first recognised as an important component of health care systems during the Alma Ata on Primary Health Care 1978. Since then many developed countries such as Canada, Germany, France, Australia, United Kingdom and USA have been using it as complementary and alternative medicine.
-  China, Vietnam and South Korea have officially fully integrated the Traditional and Biomedical Health Care systems.
-  India has promoted in parallel; development of both biomedical and traditional systems of medicine.



 In Africa, over 80% (60% in Uganda) of the population use Traditional Medicine for their Primary Health Care needs. Traditional Medicine has however not sufficiently been integrated into African health systems.



- 🌿 T&CM and highly valued for a number of reasons;
 - It is close to the homes and readily accessible
 - It is culturally acceptable and trusted by large numbers of people
 - Affordability of traditional medicines make them more attractive in the context of ever soaring health care costs
 - Traditional medicine stands out as a coping remedy for chronic/non communicable diseases

“Traditional Medicines of proven quality, safety and efficacy, contribute to the goal of ensuring that all people have access to health care”, WHO Director General, Dr. Margaret Chan, 2013”.



Context of T&CM

- 🌿 In 2013, World Health Organisation, Traditional Medicine Strategy (2014-2023) was launched, the 10 year strategy has two goals;
 1. Harnessing the potential contribution of T&CM to health, wellness, people centred health care and UHC;
 2. Promoting safe and effective use of T&CM through the regulation, research, and integration of T&CM products, practices and practitioners into the health system, as appropriate
- 🌿 The WHO strategy is designed to held member states to determine the best ways they can promote health and protect consumers who wish to avail themselves of T&CM products, practices and practioners



Traditional Medicine regulation in African context

- ✿ In 2001, the African Union Summit of Heads of State and Government held in Lusaka Zambia made a resolution declaring 2001-2010 a decade of African Traditional Medicine.
- ✿ In 2003, the First AU Session of the conference of African Ministers of Health Member held in Tripoli, Libya, adopted the Plan of Action (PoA) and Implementation Mechanism for the decade of African Traditional Medicine. The objective of the PoA was to promote recognition, acceptance, development and integration of Traditional Medicine by all member states in public health care system by 2010



POLICY AND LEGISLATION ON TRADITIONAL MEDICINE

- ✿ Only Twelve (12) countries reported having policies on traditional medicine before the declaration of the 2001-2010 decade of African Traditional Medicine. By 2010, 38 Countries out of 46 AU Member States in the African Region with developed policies on Traditional Medicine (Uganda adopted a policy framework on TCM in 2012)
- ✿ Sixteen countries indicated having had laws or regulations on TM before the declaration of the AU decade of African TM whereas Seventeen Countries (17) have developed laws on TM after the declaration of the Decade making a total of 33 (72%) out of 46 countries with such laws/ regulations (Uganda has not yet enacted a law on TCM)



TCM Policy Framework in Uganda

- ✿ The policy framework for T&CM practitioners in Uganda is established under the National Policy on Public Private Partnership in Health (MoH, 2012)
- ✿ Policy framework for T&CM practitioners among others calls for establishment of a legal framework for regulation, control and development of TCM (NPPPH, MoH 2012, pg. 61) to support;
 - Encourage continuous TCM education
 - Registration of TCM practitioners and practices
 - Monitoring adherence to TCM set standards of services



TCM Policy Frame work in Uganda....

- ✿ Establishing a statutory body to promote, control and regulate TCM practice (National Council for TCM Practioners)
- ✿ To encourage TCM practioners to be organised under various organisations to help develop accreditation criteria for their members
- ✿ Putting in place certification criteria for TCM practioners and facilities



The Indigenous and Complementary Medicine Bill 2015

- ✿ The ICB Bill 2015 seeks among others to:...
- ✿ Establish a National Council of Indigenous and Complementary Medicine Practitioners, its objects and functions (**National Council for T&CM Practitioners**)
- ✿ Provide for registration of practitioners and practices of indigenous and Complementary Medicine (**Minimum training/education requirements for practitioners of TCM, Practices to be registers**)
- ✿ Provide for the Minimum Standards to be maintained in the practice of Indigenous and Complementary Medicine (**Code of Ethics for Practitioners of TCM**)
- ✿ Provide for financial provisions including funds for the council etc




The Indigenous and Complementary Medicine Bill 2015 ...

- 🌿 Provide for Offences against the Act
- 🌿 This well intentioned bill needs to be scrutinised for its adequacy
 - To protect public health (setting high standards for practices and practitioners of TCM)
 - To create an enabling legal environment for development and professionalization of TCM in Uganda
- 🌿 This law may be benchmarked against similar laws in countries such as; Tanzania, Ghana and Zimbabwe



The Indigenous and Complementary Medicine Bill 2015

 Why enactment into law of ICM Bill 2015 is necessary:

1. There is urgent need to protect Public Health/consumers of TCM services from quacks
2. It's a good piece legislation that will accelerate development and professionalization of practice of T&CM and subsequently contribute to Universal access to quality health care by the people of Uganda
3. The law will create an enabling environment for effective implementation of the TCM policy framework of the Ministry of Health

THANK YOU

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