

Twinning traditional healers and Western health

Is it possible?

Can traditional healers be integrated into a Western health system? **Anouk Verheijen** and **Susan Murray** pose some important questions around the forthcoming Traditional Health Practitioners Act.

Through passing the Traditional Health Practitioners Act (THPA) of January 2005, the government has tried to integrate Traditional Health Practitioners (THPs) into the national health system. This is a controversial issue and THPs' reacted with mixed feelings on this legislation. Concerns exist especially around the standardising of training, the promotion of research on traditional medicines and healthcare, inequitable commercialisation of research findings and government regulating the practice of traditional health care.

In August 2006, the Constitutional Court declared the Act unconstitutional and thus invalid. The reason for this judgement was the lack of public involvement in the law making process. The South African parliament was given 18 months to ensure public participation and to re-enact the legislation.

Will this new legislation be the right way to recognise THPs in South Africa?

THPs still play an important role in primary health care especially as the national health care system has a huge shortage of medical people.

Also, many black South Africans see certain illnesses as 'cultural illnesses' which only traditional medicines can treat. Up to 80% of South Africans still use traditional health care and visit herbalists, diviners, traditional birth attendants, traditional surgeons and faith healers. The Traditional Health Practitioners Act of 2005 tries to formalise, standardise and control this sector in order to protect the interests of patients using traditional health care.

As with all new legislation, the real impact of this Act will only become clear in the implementation process. State policies often do not reflect the actual capacity of the state to implement and monitor legislation. This appears to be the case for the THPA, as the implementation process has been slow to date.

One and a half years after passing the Act, the government has still not appointed the Interim Council to guide the implementation of the Act. This regulating council will consist of representatives from traditional and Western health care. In addition, representatives from the Department of Health and the South African Pharmacy Council will be part of the council. These representatives and

the regulations emerging from the new Act are still unknown so it is difficult to review the possible impact of the legislation.

Beyond this however some points in the 2005 Act were problematic. The attempt to standardise training of healers is one of the most complicated issues. The Act states that only THPs with proven and suitable qualifications will be registered. However, the nature of these qualifications and how they will be proven is not adequately defined. Standardised training of THPs is not the norm as each area has different types, stages and duration of training and rituals marking each stage also differ.

Furthermore, standardisation is difficult as many THPs believe they have been trained by their personal ancestors. Practicing THPs often merely accompany the trainee in carrying out the different rituals, which need to be conducted throughout the training, and assist with interpreting the trainee's "non-Western" forms of training, establishing culturally acceptable and standardised training is a huge challenge to the Act's regulating council.

A related point is that respect for THPs within communities is largely independent from training, but relates instead to the amount of patients healers are treating. Information about patients successfully treated is part of the marketing technique of THPs and their social status is dependent on this. This is in conflict with Western health care where patient confidentiality is vitally important.

One of the other important elements of the Act is the registration of all THPs. According to the Act, unregistered THPs are committing an offence when supplying or prescribing traditional medicines to their clients. This in essence makes all non-government sanctioned traditional healing illegal. However, many questions remain around the registration process of THPs. Which information will be kept in the registers and how much will be made publicly available? What will the registration criteria be and how will these be measured? How much will the registration fee be?

As the regulating council, not yet in place, will decide on such matters answers to these questions remain unclear. At the same time, one of the national, formalised bodies of THPs, the Coordinating Committee of Traditional Health Practitioners Association, has started an independent registration process. Two or more parallel processes of registration, if this happens, will create confusion and so there is a great need for grassroots clarification and communication on national legislation, policies and structures.

A related aim of the Act is for registered THPs to issue sick notes that employers must accept as this would recognise patients' rights to



traditional health care. Employers' acceptance of these sick notes will surely depend on the legitimacy of the THP registration process that must still be defined.

Another point of concern is how implementation of the Act will deal with the many illiterate THPs. For instance, the Act envisages a system where patients can claim their money back from a THP who treated them when they are opposed to the amount charged. They can submit their reasons for withdrawal of the payment to the Council. The Act prescribes that after this THPs must respond by submitting in writing "the relevant factors to be considered by the Council in support of the amount charged." The National Department of Health states that the issue of literacy will be dealt with in the as yet unreleased regulations.

Perhaps the most fundamental challenge to legislators is that many THPs feel government has no role to play in, or right to regulate, their work. THPs often regard themselves as the bearers and custodians of culture and, from a Western perspective, traditional healing encompasses physical and

psychological *and* cultural, spiritual or 'religious' healing work. This multiple role is not recognised in the way the legislation is written, which from a THP's perspective over-emphasises the Western concept of health care. How will government handle the ethical question of its role in attempting to regulate the indivisible spiritual and cultural aspects of traditional health care?

It is hoped that these issues will be carefully and inclusively resolved during the upcoming public participation process and that government will make adjustments and clarifications before the Traditional Health Practitioners Act is passed into law again.

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This article is based on research by the Africulture Project of Umthathi Training Project, an organisation based in Grahamstown in the Eastern Cape. The project is developing training in the cultivation of medicinal indigenous plants. It also aims to help local Traditional Healthcare Practitioners to deal with problems they face.