**TRADITIONAL**

**&**

**NATUROPATHY**

**REGULATORY**

**FRAMEWORK**

**IN AFRICA:**

***A Comparative Analysis***

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## **PREFACE**

Naturopathy emphasizes prevention and the body’s innate ability to heal, utilizing natural substances and therapies. Naturopathy is gaining traction in Africa, appealing to those seeking alternatives to conventional medicine.

While both traditional and naturopathic medicine approaches prioritize natural healing, their philosophies and practices can differ significantly. Legislation varies across countries, with some nations implementing comprehensive frameworks while others lag behind. Many practitioners operate outside formal regulations, complicating oversight and quality assurance.

The UN Statistics Division has subdivided the African continent into five regions: Northern Africa, Central or Middle Africa, Southern Africa, East Africa, and Western Africa. Law and policy are powerful tools that can improve health systems.

Modern Medicine development cements on strict laws and policies. Hence, there is a need for African countries to develop laws and policies to improve naturopathy and other traditional complementary medicines.

Furthermore, the legislative regulatory framework of naturopathy and traditional and complementary alternative medicines focuses on product and practitioner registration. Besides, an unregulated industry is a public health threat.

The objective of this book is to explore the legislative regulatory framework of naturopathic practices and other traditional complementary medicines in the African continent.

**I** conducted a review of various health laws and policy documents in the five regions of Africa; southern Africa, Eastern Africa, West Africa, Northern Africa, and Central Africa. In each region, we conduct each country-specific healthcare legislation with keywords such as Naturopathic law, naturopathic Medicine practice, legislation, traditional medicine act, alternative medicine act, and healthcare laws.

**I**  found that Southern African countries have very well-developed laws on naturopathy and distinct laws for traditional medicine regulation. Southern African countries have recognized naturopathy and other complementary therapies under allied health professions or health professions.

Other African regions have laws on traditional and other complementary medicines under public health laws. Others have unified laws that regulate traditional and Alternative Medicine.

Statutory definitions of traditional and alternative medicines also vary based on the African regions. Finally, others have minimum educational requirements for registration as a traditional medicine healer as pertains to alternative complementary medicines.

**I** found that specific laws on naturopathic practice are available in the southern African countries as compared to the rest of the African regions. We present a commentary on the legislative regulatory framework of naturopathic and other traditional complementary medicines in Africa to guide public health decisions in Africa.

## **CHAPTER ONE**

## **STATUTORY FRAMEWORK & CASE STUDIES IN AFRICA**

## **INTRODUCTION**

Laws and policies are instrumental in the development of any sector ( Burris et al. 2010; Teitelbaum et al. 2021). The medical professions have witnessed development through effective laws and policies. This is not the case in the traditional and complementary medicine landscape.

As lawyer, development researcher and a practitioner of naturopathy in the African region, I hold the view that there is a need to develop traditional and complementary medicines in Africa to improve the health of the people. This can only be done with an effective legislative regulatory framework; there are different players in the traditional and complementary medicine landscape.

Legal definitions of traditional and complementary medicine have been problematic in Africa. The Traditional and Alternative Medicine draft bill(2018) in Ghana considers alternative medicine as practices imported into the country and also outside the realm of traditional medicine.

This means that in Ghana, there are three established medical practices; conventional medicine, alternative and traditional medicine. Though traditional medicine is recognized by the promulgation of the Traditional Medicine Practice Act 575, in 2000, alternative practices such as naturopathy and others received ministerial directives(Obu and Aggrey-Bluwey, 2022) in 2010 mandating the Traditional Medicine Practice Council to consider regulating alternative medicine. The legal question is whether this ministerial directive is legal; especially deriving the power in Section 38 of the Traditional Medicine Practice Act 575.

Due to the many confusions surrounding this, it has created a gap in the development of other alternative systems of medicine in Ghana. This confusion goes beyond Ghana and other African countries are also experiencing a similar situation of underdeveloped laws or no legislative regulatory framework for traditional and alternative medicines.

We do know that modern medicine has seen drastic development and recognition due to the legislative regulatory framework (E. Blythe Stason, 1967). In the profession of naturopathy and other traditional complementary medicine, there has been a public outcry about how these practitioners are regulated and who regulates their activities. Other concerns have been their standard and scope of practice. Besides, an unregulated profession is a public health threat.

The gaps in the law regulating modern medicine and traditional and complementary medicine have made traditional and alternative medicine unattractive in Africa.

To develop laws to regulate any profession, it has to start with a principal legislation. The second stage is the regulation that is provided by the principal enactment. A regulation is a subsidiary legislation that allows the people who would work with the law to develop more specialized laws to help regulate the profession.

The power to make regulations is provided for in the principal enactment. In most principal enactments, the power to make a regulation is handed to the Minister of the sector. Regulation once enacted provides the legal machinery required to achieve the administrative and technical goals of the law. Regulations describe the obligations and responsibilities of licensed practitioners and the penal sanctions if these are not respected.

In this book, I hereto explore how traditional and other complementary medicines are regulated in Africa and the extent of the development.

***Theoretical framework***

*Theory of Regulation*

A theory of regulation is a set of propositions or hypotheses about *why* regulation emerges, *which actors* contribute to that emergence, and typical *patterns of interaction* between regulatory actors(Bronwen Morgan and Karen Yeung, 2012). Legislative regulation helps to maintain the public good or protect public interest.

The positive variant aims to provide economic explanations of regulation and to provide an effect analysis of regulation. The normative variant investigates which type of regulation is the most efficient or optimal.

Besides, regulatory compliance helps in fair competition in a particular field. It also helps to make rules and standards.

Regulation helps to define a clear framework within which health professionals acquire and maintain the competence needed to carry out their trade.

***Objectives***

1. To explore the legislative regulatory framework of naturopathy and other traditional complementary medicine practices in Africa
2. To explore which African countries have distinct laws on naturopathy
3. To explore the statutory definition and classification of naturopathy and traditional medicine
4. To explore the types of legislation in naturopathy and other traditional medicines
5. To explore the minimum requirements for statutory registration of naturopathy and other traditional complementary medicines
6. To propose recommendations for legislative regulations in African naturopathy and other traditional complementary medicine

## ***How I identify the statutory Provisions***

This book relies on the extant literature on healthcare laws, ministerial directives, orders, proclamations, or decrees across the 55 African countries. Materials accessed for this research were obtained from several different databases opened to the public.

The databases used include policy documents, WHO documents, country-specific healthcare laws, regulations, ministerial reports, and Google search engines such as PUBMED, Google Scholar, Research Gate, and online news reports.

In searching the databases, different combinations of keywords were used. The initial search was done using the word, “health laws,” “policy documents,” “Naturopathic law”, “naturopathic Medicine practice”, “legislation”, “traditional medicine act”, “alternative medicine act”, “complementary medicine act, ” “Ministerial directives,” “Public health laws,” “Decrees”, “Proclamations”, “Orders, “and “Medical laws” in the five regional blocks of Africa; southern Africa, Eastern Africa, West Africa, Northern Africa, and Central Africa.

The results of the searches included articles published in international peer-reviewed journals, legislations and regulations on health laws, WHO reports, and traditional complementary medicine Acts published online. Relevant articles from these sources were compiled and meta-analyzed.

## ***Discussions & Case Studies***

***To explore the legislative regulatory framework of naturopathy and other traditional complementary medicine practices in Africa.***

***Fig 1. Authors Construct -The African regions have the following laws that regulate traditional and naturopathic practices***

The first objective of this book is to explore the legislative regulatory framework of naturopathy and other traditional complementary medicine practices in Africa. I herein provide the analysis:

## 

## ***Southern African Region***

The Southern African Development Community (SADC) is a Regional Economic Community comprising 16 Member States; Angola, Botswana, Comoros, Democratic Republic of Congo, Eswatini, Lesotho, Madagascar, Malawi, Mauritius, Mozambique, Namibia, Seychelles, South Africa, United Republic of Tanzania, Zambia and Zimbabwe. The mission of SADC is to promote sustainable and equitable economic growth and socio-economic development through efficient, productive systems, deeper cooperation and integration, good governance, and durable peace and security; so that the region emerges as a competitive and effective player in international relations and the world economy(SADC, 2024). I herein analyzed these countries' legislative regulatory frameworks about naturopathy and other traditional complementary therapies.

**Angola**

 The Angolan government approved the National Policy of Traditional and Complementary Medicine(Allafrica. 2020). However, there is no legislative regulatory framework for naturopathy and other traditional complementary therapies.

**Botswana**

***Traditional medicine law***

Section 14.86 of the National Development Plan of 1976–1981: provided some strides for the traditional healer (ngaka) in Botswana, in the rural areas(WHO, 2001).

Section 13.28 of Chapter 13 of the National Development Plan of 1979–1984 (10, 11) also admonished the fact that there are traditional healers in Botswana and there is the need to provide a policy framework (WHO, 2001).

As of 2024, no legislative regulatory framework for traditional medicine. However, the government plans to consider legislation (Xinhua, 2019).

***Naturopathy and Other Complementary Therapies Law***

On the other hand, Naturopaths, Chiropodists, Homeopaths, Osteopaths, and Acupuncturists are considered *Associated Health Professions* under Part 111 of the Botswana Health Professions Act, 17 of 2001(Botswana Health Professions Act, 17 of 2001)

The long title of the Act reads: *“An Act to regulate and control the practice of medicine, dentistry, pharmacy, and allied health professions, and for matters connected and associated therewith”.* The Act was Assented on 19/10/2001 with Commencement on 2/11/2001.

The act did not provide for the definition of naturopathy or who is a naturopath. However, section 2 of Part I deals with interpretation, and considers a Naturopath as an associated medical practitioner”

An associated Medical Practitioner herein means*” a duly qualified member of one of the professions referred to in Part III of Schedule B, and registered as such in terms of section 9, entitling him to practice that profession in Botswana.”*

*This means that a Naturopath who intends to practice has to have the same requirements as a qualified Medical Practitioner under the same law. Section 9 is under part III of the act — Registration and Licensing of Practitioners.*

An “intern” in Naturopathy also means a person registered as an intern in terms of section 9, who is required to complete a period of internship training in an approved hospital or institution to acquire practical skills and experience before becoming entitled to practice his profession without supervision.

In Part II of the Act— Botswana Health Professions Council, Committees and Professional Boards, there is only a slot for the associated medical practitioners such as Naturopath, Homeopaths, chiropractors, etc, and have to be elected amongst themselves.

**Comoros**

***Traditional medicine law***

Law No. 11–001/AU of 26 March 2011 on the Public Health Code in its Title III: Exercise and Organization of Traditional Medicine, particularly in Articles 262–279, of Comoros(Obu, 2023) provides the policy roadmap for traditional, complementary and alternative medicine. However, no legislative regulatory framework exists for traditional medicine.

***Naturopathy and other complementary therapies law***

On the other hand, there is no legislative regulatory framework for alternative medicine or a specific law on naturopathy.

**Democratic Republic of Congo**

***Traditional medicine law***

Decree of 19 March 1952 on the practice of medicine, as amended (WHO, 2005 ). The Decree grants exemplary status to traditional medicine practitioners but also places limitations on their practice. Section 15 states the following: The provisions of this Decree shall not apply to nationals of the Belgian Congo or of neighboring African territories who, in population groups where such customs prevail, carry out treatments and administer drugs by the usage custom provided they do not constitute a breach of public order.

The Second Ordinary Congress of the Popular Revolutionary Movement in Zaire adopted a resolution in November 1977 encouraging research into the rehabilitation and recognition of traditional medicine as a complement to allopathic medicine and urging the establishment of a division dedicated to traditional medicine within the Department of Health.

***Naturopathy and other complementary therapies law***

No specific legislation on naturopathic Medicine. However, naturopaths can take solace in

**Eswatini**

***Traditional medicine law***

No legislative regulation for traditional healers.

***Naturopathy and other complementary therapies law***

However, the Medical and Dental Practitioners Act, of 1970, which registers and licenses medical and dental practitioners under the Medical and Dental Council also extends to Naturopaths.

Section 32 of Part IV deals with Regulations. Section 32(b) gives the authority to the  Minister based on the recommendation of the Council to make Regulations for the control of chiropractors, homeopaths, naturopaths, and electropaths(Medical and Dental Practitioners Act, 1970).

Hence, in 1978, The Control of Natural Therapeutic Practitioners Regulations 1978 was made and commenced on 24th February 1978.

In this law, section 2 defines a “Natural Therapeutic Practitioner” as a person who practices as a chiropractor, homeopath, naturopath, or electropath.

The law also places restrictions on practitioners. It states that: “A person practicing as a natural therapeutic practitioner shall not;

(a) perform any surgical operation or administer any injection to any person;

(b) practice midwifery;

(c) withdraw blood from any person;

(d) treat or offer to treat cancer or prescribe a remedy for cancer or claim that any article, apparatus, or substance will or may be of value for the “alleviation of the effects of the curing or treatment of cancer;

(e) perform any internal examination on any person;

(f) claim or by any means whatsoever hold himself out, to be a medical practitioner or use the name medical practitioner, or doctor or any other name, title, description or symbol indicating or calculated to lead persons to infer that he has any qualifications of a medical practitioner, or

(g) prevent any person from being treated by, or improperly influence any person to abstainfrom treatment by, a person registered in terms of the Act.

**Lesotho**

***Traditional medicine law***

The Lesotho Universal Medicinemen and Herbalists Council Act of 1978 followed the Act of 1976(Abrams et al. 2019). This law regulates traditional healers and is distinct from naturopath statutes.

***Naturopathy and other complementary therapies***

The law that regulates naturopaths is the Natural Therapeutic Practitioners Act of 1976. Section 2 of the Natural Therapeutic Practitioners Act of 1976( Abrams et al. 2019) defines natural therapeutics as the provision of services to prevent, heal, or alleviate sickness or disease or alleviating, preventing, or curing pain “by any means other than those normally recognized by the medical profession”.

In this law, Naturopaths, homeopaths, osteopaths, chiropractors, and acupuncturists are regulated. Section 3 prohibits non-registered persons from practicing as natural therapeutic practitioners.

**Madagascar**

***Traditional medicine law***

Decree N°221/02/MI/SPAT/ ANTA/ as of 3rd June 2002 formed the national association of traditional healers(IK Notes, 2006).

Decree N°2339/2002 dated 28th August 2002 provided the roadmap for setting up the National Advisory Committee on Traditional Medicine.

Traditional medicine is regulated by the public health code (**Law N° 2011 – 002**) With The Health Code. The explanatory memorandum on The Act to the Health Code, which is the subject of the Act replaces Order No. 62072 of 29 September 1962 codifying the laws regarding Public Health(Law No. 2011-002 With The Health Code).

Article 92 regulated traditional health practitioner

Article 95.- The exercise of Traditional Medicine is legally authorized and recognized, to any natural or legal person, individually or in combination, in the conditions determined by the provisions of this Code. Traditional practitioners engaged in the treatment of patients as part of traditional medicine can exercise according to local laws and regulations. But in any case, they can make a diagnosis by use of slang terminology or allopathic medicine, homeopathy, and osteopathy or manipulate prepared or classified chemicals "pharmaceutical" and outside the traditional pharmacopeia, prescribe any drug product or pharmaceutical specialties within the competence of pharmacists.

Article 96.- Under the terms of this Code is meant by: *Traditional Medicine: the sum total of all knowledge and practices used in diagnosis, prevention, and elimination of physical imbalances, and mental and social processes based solely on practical experiences and passed down from generation to generation observations orally or in writing, to prevent, cure diseases and alleviate suffering.*

Tradipraticien Health: anyone who practices Traditional Medicine as defined and the principles set out above. The traditional healer can be:

 A traditional birth attendant: a term for anyone found to be competent to provide a woman and her newborn, before, during, and after delivery based health care on concepts prevailing in the community where she lives;

 One or a traditional therapist: a term for any person recognized by the community in which she lives as competent to provide health care based on the concepts of disease and disability prevailing in the said community. These Traditional Healers are designated by different names depending on the region. A full list and details will be made by the Enforcement Decree of the Act;

 one or Herbalist: a term for anyone selling medicinal plants;

 one or Medical-druggist: a term for anyone who sells medicinal substances other than plants (animal or mineral origin).

***Naturopathy and other complementary therapies law***

Naturopathy, homeopathy, osteopathy, and acupuncture are regulated by the same public health code (**Law N° 2011 – 002**)

Article 72.- No person may practice the profession of physician acupuncturist (trice) of odonto oral surgeon and midwife if it is nationality Malagasy, holder of diplomas or certificates recognized by the Malagasy State, and registered in the Roll of the Order concerned.

Article 97.- The practice of HOMEOPATHY and OSTEOPATHIE, individually or in combination, is legally permitted and recognized in Madagascar by the provisions of this Code.

Article 98.- Under the terms of this Code is meant by:

- Homeopath: a physician who received training in homeopathy, the original processing method developed by Hahnemann in 1970 and based on the principle of pharmacological reversal of infinitesimal dose-effect or law of similars. In essence, homeopathic techniques enable a holistic and individualized therapeutic approach.

An osteopath is any person having received training in osteopathy, a manual therapy method developed in 1874 by Andrew T. STILL drawing on his observations and his knowledge of anatomy.

**Malawi**

***Traditional medicine law***

No specific information is available on laws regulating traditional and naturopathy. However, the Medical Practitioners and Dentists Act Chapter 36:01 Assented to on 28 August 1987 and Commenced on 5 February 1988 allowed the practice of African traditional medicines. This version of the Act was revised and consolidated in the Fourth Revised Edition of the Laws of Malawi (L.R.O. 1/2015), by the Solicitor General and Secretary for Justice under the authority of the Revision of the Laws Act( (Malawilli, 2014)

The long title of the Act states: *“An Act to provide for the establishment of the Medical Council of Malawi, the registration and disciplining of medical practitioners and dentists, the licensing of private practice of medical practitioners and dentists, the regulation of training within Malawi of medical personnel and generally for the control and regulation of the medical profession and practice in Malawi and for matters incidental to or connected therewith.”*

Section 61 emphasized that African systems of therapeutics allowed. “*Nothing contained in this Act shall be construed to prohibit or prevent the practice of any African system of therapeutics by any person in Malawi: Provided that nothing in this section shall be construed to authorize the performance by a person practicing any African system of therapeutics of any act which is dangerous to life”.*

No law found to regulate naturopathy and other complementary therapies.

**Mauritius**

***Traditional medicine law***

The Ayurvedic and Other Traditional Medicines Act 37 of 1989 revised 3rd September 1990 is the principal that regulates Ayurvedic and other traditional medicine in Mauritius(The Ayurvedic and Other Traditional Medicines Act of 1989)

The Act interpretation sections define “Ayurvedic medicine” as an Indian system of medical practice.

Traditional medicine in this act is defined as "*the practice of systems of therapeutics according to homeopathy, Ayurvedic, and Chinese methods".*

Section 24 places illegality on any practitioner who uses any title that is not recognized by the Act.

Section 25 also mandates only titles authorized by the Minister are supposed to be used by the practitioners.

Also, once your name is removed from the registered, you are banned from practicing traditional medicine.

Section 27 also provides the regulations for the minister to make the requirement for education qualification to practice traditional medicine; the scope of practice and the universities to be recognized to deem to graduate from to practice traditional medicine.

Section 13 also mandates that the minimum qualification needed to practice traditional medicine is a Diploma.

Hence, Naturopathy is also regulated by The Ayurvedic and Other Traditional Medicines Act 37 of 1989 revised on 3rd September 1990.

***Other complementary therapies law***

**The Allied Health Professionals Council ACT 2017 Act No. 9 of 2017 regulates only Chiropractors and Osteopaths(The Allied Health Professionals Council ACT 2017)**

Chiropractors and Osteopath are regarded as allied health professionals and regulated under the

General Chiropractor: One needs a Chiropractic degree (BAC or HSC + 5-6 years study) issued by an institution accredited by the Council on Chiropractic Education (CCE) Europe, USA, Canada or Australia (2) Chiropractic Specialist A General Chiropractor qualification and Post-graduate Diploma (2 years issued by a recognized Board of Specialist Chiropractors or Master’s Degree (3 years) issued by an institution accredited by the Council on Chiropractic Education (CCE) Europe, USA, Canada or Australasia.

Osteopath: Minimum of 4 years of study for a Diploma in Osteopathy from a recognized osteopathic training school approved by the Ministry of Health of the country in which courses are dispensed

**Mozambique**

Though a national policy exists (WHO, 2005), no law exists to regulate both traditional and alternative complementary practices.

**Namibia**

***Traditional medicine law***

Two public policy documents acknowledged traditional healers – the National Health Policy Framework (MHSS 2010a) and the Community-Based Health Care (CBHC)Policy (MHSS 2009, 2007)( Meincke, 2018)

There exists a Namibian traditional medicine programme within the Department of Primary Health Care of the Ministry of Health and Social Services (MHSS)( Meincke, 2018).

In the case of the National Health Policy Framework, the definition of traditional medicine was regarded as one of the alternative medicine systems, that is cemented on culture.

Traditional healers previously were given the needed recognition as a profession by the Allied Health Services Professions Act in 1993 under ‘any other profession’ relevant to healthcare provision. This led to the creation of the Traditional Medical Practitioners Board. The board was later dissolved after the amendment of the Allied Health Services Professions Act in 1993 as the amendment did not recognize them to be regarded as allied health professionals(Meincke, 2018).

There is a draft proposal in 2010 for the development of the Traditional Health Practitioners Bill. This bill intends to set up the National Traditional Health Practitioners Council(Meincke, 2018).

In the absence of a law on tradition, The Namibia Eagle Traditional Healers Association (NETHA) established in 1990, provides self-regulation.

***Naturopathy and other complementary therapies law***

On the other hand, the Allied Health Professions Act 7 of 2004 (Act No. 7 of 2004) Section 55 is the principal law that regulates naturopathy in Namibia. The act also regulates homeopaths, chiropractors, osteopaths, and other complementary practitioners in Namibia.

**The long title of the Act states that it “***provides for the establishment and constitution of a professional Council for the allied health professions; to determine the powers, duties, and functions of such Council; to regulate the registration of persons practicing the allied and complementary health professions; to specify the education, training, and qualifications of persons practicing such professions; to prohibit the practicing of such professions without being registered; and to provide for matters incidental thereto”.*

Furthermore, there a specific Regulations relating to the Scope of Practice of a Naturopath enshrined in Government Notice 351 of 2022 (GG 7951) that came into force on the date of publication: 10 November 2022.

The Government Notice which publishes these regulations notes that they were made on the recommendation of the Allied Health Professions Council of Namibia. It also repeals the regulations contained in GN 90/ 2014 (GG 5503).

**The law defines “Naturopathy” to means a “***system of healing, treating diseases and promoting health in which neither surgical nor medical agents are used, but which is based on the use of - (a) non-toxic natural substances, other than medicines; and (b) the human body’s inherent biological healing mechanisms to self-heal, for the treatment of a disease.”*

Also, there is a Regulations relating to the Minimum Requirements of Study for Registration as a Naturopath in Government Notice 73 of 2011 (GG 4730) that came into force on the date of publication: 8 June 2011. In this subsidiary legislation, the minimum requirement to practice naturopathy is a degree or a Diploma in Naturopathy with not less than 5 years of study from an accredited university.

The regulations further recognized schools such as the University of the Western Cape and, the Republic of South Africa-Bachelors Degree in Science: Complementary Medicine(Naturopathy).

**Seychelles**

***Traditional medicine law***

No legislative regulations exist for traditional and alternative medicines. Though, national policies are being developed (WHO, 2005).

***Naturopathy and other complementary therapies law***

In Seychelles, Acupuncturists are regulated under the Health Professionals Act which came into force on 20th June 2006 and later consolidated on 30th June 2012. The act did not recognize Naturopaths, homeopaths, and other complementary healers.

**South Africa**

***Naturopathy and other complementary therapies law***

*The Health Professions Act* 56 (South Africa) 1974 No. 31825 was amended in 2009 with the insertion of rule 8A provided a platform for practitioners to cohabite with other practitioners who are also registered under the Act. However, regulation averted complementary givers as workers in the public health system.

As time progressed, the Chiropractors, Homeopaths, and Allied Health Service Professions Council became the Allied Health Professions Council of South Africa in 2000.

It was further amended and published in Government Gazette No. 21825 of 2000 and subsequently promulgated as the *Allied Health Professions Act* 63 (South Africa) R127 2001 No. 22052.

It paved the way for the setting up of professional boards, thus allowing naturopaths and others to have their registration with their various professional boards.

A previous law, The Associated Health Service Professions Act 63 (South Africa) 1982 No. 8160 also provided for legal recognition and registration and created the Associated Health Services Professions Board. When the law was passed, those who were registered in 1974 were allowed to further register again( Ericksen-Pereira et al. 2020) as part of the savings and transitional provisions under any statutory obligations.

The law did not make room for new registration of naturopaths after 1982. However, the register was opened to chiropractors and homeopaths with the establishment of the Associated Health Service Professions Amendment Act 105 (South Africa) 1985 No. 9867. This Act further allowed the new board the power to control and regulate the education of allied registered practitioners(( Ericksen-Pereira et al. 2020).

Courses for training chiropractors and homeopaths were approved by the Minister of Education in 1987 and started in 1989( Ericksen-Pereira et al. 2020).

In its current form*,* The Allied Health Professions Act 63 Of 1982 as amended is the legal framework that regulates naturopaths, homeopaths, chiropractors, and other complementary medicine practitioners in South Africa. Thus the law consolidates the following laws;

Chiropractors Act, 76 of 1971, Chiropractors Amendment Act, 96 of 1972, Homeopaths, Naturopaths, Osteopaths and Herbalists Act, 52 of 1974, Chiropractors Amendment Act, 20 of 1976, Health Laws Amendment Act, 20 of 1977, Sections 4 up to and including 8, and Homeopaths, Naturopaths, Osteopaths and Herbalists Amendment Act, 1980( The Allied Health Professions Council of South Africa, 2015).

The Act created the Allied Health Professions Council of South Africa (AHPCSA) as a statutory health body to regulate all allied health professions, such as Ayurveda, Chinese Medicine and Acupuncture, Chiropractic, Homeopathy, Naturopathy, Osteopathy, Phototherapy, Therapeutic Aromatherapy, Therapeutic Massage Therapy, Therapeutic Reflexology, and Unani-Tibb.

The long title of the act states**: “***To provide for the control of the practice of allied health professions, and for that purpose to establish an Allied Health Professions Council of South Africa and to determine its functions, and to provide for matters connected therewith”.*

*The act also defines ‘allied health profession' “means the profession of ayurveda, Chinese medicine and acupuncture, chiropractic, homeopathy, naturopathy, osteopathy, phytotherapy, therapeutic aromatherapy, therapeutic massage therapy or therapeutic reflexology, or any other profession contemplated in section 16(1) to which this Act applies.”*

The act did not define what accounts for naturopathy. The act created different professional bodies to oversee the affairs of the profession. One is the Professional Board for Homeopathy, Naturopathy, and Phytotherapy (PBHNP). The Act allows the registration of all students in accredited institutions to be registered as students and interns. The act also stipulates the educational requirements for registration. For those who obtained their qualification outside South Africa, the Act allows for registration if only the said qualifications would allow the holder to obtain a license to practice in the said country.

***New Development in South Africa***

In its current form, The Allied Health Professions Act 63 Of 1982 as amended did not provide the legal definition of naturopathy. After forty(42) years, a clearer definition of naturopathy was developed through Section 38 of the Act which allows the Minister to make regulations based on the recommendation of the Council in the Schedule Section and Gazette on 9th February 2024.

The regulation is cited as Regulations Relating to the Profession of Naturopathy, (2023).

It defines naturopathy as” *As a system of medicine that involves the diagnosis and treatment of a physical or mental defect, illness, disease, deficiency or abnormality in any person, or in the promotion and maintenance of health based on a holistic approach which uses the healing power of nature to stimulate the body’s ability to heal itself supported by natural and traditional medicine systems, together with the use of various therapies, including, but not limited to, nutritional and herbal therapy, hydrotherapy, thermal therapy, massage therapy, exercise therapy, vibration therapy, reflex therapy, light therapy, electrotherapy, and magnetic therapy.”*

The Regulation further spelled out what modalities constitute naturopathy in South Africa and the scope of practice. The diagnostic scope of naturopathy extends beyond conventional procedures such as laboratory investigation, diagnostic imaging, and clinical examination. It includes naturopathic diagnosis and assessment tools such as iridology and others once the practitioner is qualified to use them.

The Naturopath in South Africa also has a wider scope to prescribe naturopathic substances accepted by their Council. The law further makes room for the Naturopath to incorporate other naturopathic substances into practice once it is recognized in literature or references in any other naturopathic law or Council outside the scope of South Africa.

***Traditional Medicine law***

Traditional healers in South Africa are also regulated by the Traditional Health Practitioners Act No. 22 of 2007. The Act came into force on 7 January 2008 after receiving Presidential assent and establishing the Traditional Health Practitioners Council of South Africa.

The long title of the Act states “*To establish the Interim Traditional Health Practitioners Council of South Africa; to provide for a regulatory framework to ensure the efficacy, safety, and quality of traditional health care services; to provide for the management and control over the registration, training, and conduct of practitioners, students, and specified categories in the traditional health practitioners profession; and to provide for matters connected therewith”.*

The Act also provided the following definitions:

*"herbalist" means a person who engages in traditional health practice and is registered a herbalist under this Act;*

*Traditional health practice" means the performance of a function, activity, process or service based on a traditional philosophy that includes the utilisation of traditional medicine or traditional practice and which has as its object— (a) the maintenance or restoration of physical or mental health or function; or (b) the diagnosis, treatment or prevention of a physical or mental illness; or (c) the rehabilitation of a person to enable that person to resume normal functioning within the family or community; or (d) the physical or mental preparation of an individual for puberty, adulthood, pregnancy, childbirth and death, but excludes the professional activities of a person practising any of the professions contemplated in the Pharmacy Act, 1974 (Act No. 53 of 1974), the Health Professions Act, 1974 (Act No. 56 of 1974), the Nursing Act, 1974 (Act No. 50 of 1974), the Allied Health Professions Act, 1982 (Act No. 63 of 1982), or the Dental Technicians Act, 1979 (Act No. 19 of 1979), and any other activity not based on traditional philosophy; "traditional health practitioner" means a person registered under this Act in one or more of the categories of traditional health practitioners;*

*"traditional medicine" means an object or substance used in traditional health practice for— (a) the diagnosis, treatment, or prevention of a physical or mental illness; or (b) any curative or therapeutic purpose, including the maintenance or restoration of physical or mental health or well-being in human beings, but does not include a dependence-producing or dangerous substance or drug;*

*"traditional philosophy" means Indigenous African techniques, principles, theories, ideologies, beliefs, opinions customs, and uses of traditional medicines communicated from ancestors to descendants or from generation to generation, with or without written documentation, whether supported by science or not, and which are generally used in traditional health practice;*

*"traditional surgeon" means a person registered as a traditional surgeon under this Act;*

The Act allows the Minister to make regulations on the minimum educational requirements for training and prior registration. The training could be under a traditional tutor or educational institution.

**United Republic of Tanzania**

***Unified law***

The United Republic of Tanzania has Traditional and Alternative Medicine No. 23 of Act 2002 that regulates both traditional and Alternative Medicines and established the Traditional and Alternative Health Practice Council.

The long title of the Act states: “*An Act to make provisions for promotion, control, and regulation of traditional and alternative medicines practice, to establish the Traditional and Alternative Health Practice Council and to provide for related matters”.*

The Act defines an alternative health practitioner" as “*a person formally trained and has acquired knowledge, skills and competence in alternative medicine practices and disciplines as recognized internationally”;*

"alternative medicine" means “*the total sum of knowledge and practice used in diagnostic, prevention and elimination of physical, mental and social imbalance relying exclusively on various established alternative medicine system of respective disciplines”;*

**"***traditional health practitioner" means a person who is recognized by the community in which he lives as competent to provide health care by using plants, animals, mineral substances, and other methods based on the social, cultural, and religious background as well as on the knowledge, attitudes, and beliefs that are prevalent in the community regarding physical, mental and social well being and the cause of disease and disability; "traditional medicine" means a total combination of knowledge and practice, whether applicable or not, used in diagnosing, preventing or eliminating a physical, mental or social disease and which may rely exclusively on experience and observation handed down from one generation to another orally or in writing;*

The Act has no educational requirement to practice traditional medicine. However, for alternative medicine, the mandate is that a degree or certificate is needed to practice alternative medicine from an accredited school.

**Zambia**

***Traditional medicine law***

The Health Professions Act. No 24 of 2009 regulates osteopaths only and not other complementary practitioners.

For traditional and alternative medicine there is a proposed draft bill.

**Zimbabwe**

***Traditional medicine law***

Traditional medicine is regulated by the Traditional Medical Practitioners Act [Chapter 27:14]. The law came into force on 16th October 1981, except for s. 31 (2) and (3): 1st June 2000. The Act established the Traditional Medical Practitioners Council.

The long title states “ *AN ACT to establish a Traditional Medical Practitioners Council; to provide for the registration and regulation of the practice of traditional medical practitioners; and to provide for matters incidental to or connected with the foregoing.”*

The law defines the practice of traditional medical practitioners as” *means every act, the object of which is to treat, identify, analyze or diagnose, without the application of operative surgery, any illness of body or mind by traditional methods.*

The Act specifies the title to be given to the practitioners. Section 32 mandates practitioners to use the title “Registered Traditional Medical Practitioner” or by the initials “R.T.M.P.” It also gives a platform for those giving honorary traditional medicine practice titles to use “Honorary” or the abbreviation “Hon.

***Naturopathy and other complementary therapies law***

There is a different law for naturopathic practitioners and others outside traditional medicine( ZW, 2020).

The Health Professions Act Chapter 27: 19, Act 6/2000, 22/2001 (s. 4), 14/2002 (s. 43), 28/2004 (s. 29), provided the framework for the regulations of naturopaths, homeopaths, chiropractors, and others.

Section 37 of Part VI of the Act established the Natural Therapists Council of Zimbabwe; to provide for the registration and regulation of the practice of homeopaths, naturopaths, and osteopaths in Zimbabwe, and to provide for matters incidental to or connected with the foregoing.

The long title of the Act states*: “AN ACT to establish a Health Professions Authority of Zimbabwe, a Medical and Dental Practitioners Council of Zimbabwe, an Allied Health Practitioners Council of Zimbabwe, a Natural Therapists Council of Zimbabwe, a Nurses Council of Zimbabwe, a Pharmacists Council of Zimbabwe, a Medical Laboratory and Clinical Scientists Council of Zimbabwe, an Environmental Health Practitioners Council of Zimbabwe and a Medical Rehabilitation Practitioners Council of Zimbabwe, and to provide for the composition and functions of the Authority and those councils; to provide for the registration of persons in health professions and the issue of practising certificates to registered persons; to provide for the exercise of disciplinary powers in relation to registered persons; to provide for disabilities of and offences by unregistered persons who perform acts specially pertaining to health professions in respect of which a register is kept or who represent themselves to be practitioners in any such health profession; to provide for the registration and control of health institutions and the regulation of services provided therein or therefrom; to repeal the Chiropractors Act [Chapter 27:04], Medical, Dental and Allied Professions Act [Chapter 27:08], Natural Therapists Act [Chapter 27:09] and Psychological Practices Act [Chapter 27:11]; to amend references to health practitioners, councils and associated matters in other Acts; and to provide for matters connected with or incidental to the foregoing”.*

## ***Eastern African Region***

The African Development Bank(2024) reports that the eastern African region has 13 countries. These 13 countries are Burundi, Comoros, Djibouti, Ethiopia, Eritrea, Kenya, Rwanda, Seychelles, Somalia, South Sudan, Sudan, Tanzania, and Uganda.

Some of these countries are also part of the Southern African Development Community (SADC) which we covered earlier on. Hence, we would concentrate on those countries that are not part of the SADC.

These are Burundi, Djibouti, Ethiopia, Eritrea, Kenya, Rwanda, Somalia, South Sudan, Sudan and Uganda. We analyzed them systematically.

**Burundi**

Though no specific legislative framework for traditional and alternative medicines. Burundi’s Public Health Code of 1982, mandates that those interested in tropical medicine must have formal education. In the case of those attending to patients using traditional medicine can continue and must obey regulations established by the Minister of Public Health(WHO, 2001).

**Djibouti**

There is no specific legislative framework for traditional and alternative medicines.

**Ethiopia**

Proclamation 100 of 1948, Penal Code 512/1957, and Civil Code 8/1987 provide the framework for traditional medicine practice.

The is no specific mention of a legislative framework for naturopathy and other alternative medicines**.**

However, those who want to practice naturopathy and others could take solace under the Proclamation 100 of 1948, Penal Code 512/1957, and Civil Code 8/1987 for traditional medicine practice(WHO, 2001).

**Eritrea**

In Eritrea, there is no specific legislation on traditional medical practice, and other alternative practices and calls for legislation have been proposed.

**Kenya**

Kenya National Drug Policy of 1994 acknowledged traditional medicine as a key component of Kenya's culture and thus the need to mainstream it into the primary health care system.

There is no specific legislative regulatory framework for traditional and alternative medicines. However, Section 75 of the Health Act No. 21 of 2017, and Act No. 27 of 2022 have provided the roadmap for Parliament to take steps to promulgate an act to regulate traditional and alternative medicine.

The Health Act Cap 241 defines alternative medicine and complementary medicine therapies as health practices that are non-indigenous to the traditions of the country and non-integrated into the health care system.

In the case of traditional medicine knowledge, skills, and practices based on theories, beliefs, and experiences indigenous to different cultures are used in the maintenance of health as well as in the prevention, diagnosis, and improvement or treatment of physical and mental illness(Laws of Kenya, 2022).

**Rwanda**

In 2019, Rwanda developed a national policy on traditional and alternative medicines. The policy defines alternative medicines as treatments that are used instead of standard treatments.

No comprehensive legislation. However, Ministerial Order No. 007/2008 of 15/08/2008 and Law No. 47/2012/ dated 14/01/2013 provide regulation for herbal medicines( (FDA, 2022).

**Somalia**

No legislative regulatory framework exists in Somalia for traditional and alternative medicines.

**South Sudan**

No legislative regulatory framework exists in Somalia for traditional and alternative medicines.

**Sudan**

No legislative regulatory framework exists in Somalia for traditional and alternative medicines.

**Uganda**.

***Unified law***

The Traditional and Complementary Medicines Act 2019 is the legislative instrument that regulates both traditional and complementary medicines(Parliament of Uganda, 2019).

The Act defines complementary medicines as practices that are not part of the traditional medicines in Uganda and have been incorporated into the healthcare system. They can be used along with conventional medicines. Such therapies are naturopathy, homeopathy, Ayurveda, aromatherapy, and reflexology.

The Act also defines traditional medicines as the total knowledge based on the people of Uganda's cultural beliefs and theories. They can be explained or not explained and can be used to prevent, diagnose, or treat any diseases.

There is equity on the council between traditional and complementary healers' representation.

The appointment of the registrar is in the bosom of the Minister, the Public service department, and the Council. (Uganda, 2019)

The Act places restrictions and offenses on those who are not registered but practice traditional and complementary medicine in Uganda.

The qualification for a traditional healer is to have either education, knowledge, or skills. However, in the case of complementary medicine, the minimum qualification is to have a valid qualification in the field so desired.

The Practitioner must also complete an internship program to qualify to register. The Act also allows foreigners to register to possess a recognized qualification in the country where the certificate was awarded.

The practitioner must also complete an internship programme in Uganda. Section 54 allows dual practice, a conventional medical practitioner is allowed to practice. Section 55 places restrictions on titles for practitioners. Practitioners are not allowed to use conventional titles such as ‘doctor, ’ ‘nurse’, ‘professor’ or any other unless the practitioner is qualified to use such a title.

The Act further allows the Minister to prescribe titles to practitioners based on their level of qualifications.

Chiropractors are regulated differently under the Allied Health Professionals Act Cap 268 1996. The Act established the Allied Health Professionals Council(World Chiropractic Federation, 2021).

## ***North Africa***

There are five main countries in northern Africa, namely, Tunisia, Libya, Morocco, Egypt, and Algeria (EDA, 2024).

I herein explore their respective legislative regulatory framework on traditional and alternative medicines.

**Algeria**

The Algerian Public Health Code of 23 October 1976 proscribed the practice of medicine without a license.

Section 364 cements the practice of herbalists, no exceptions were made for the practice of traditional medicine. Section 47 (159) explicitly prohibited medical auxiliaries from using “secret or occult procedures”.

Law 85-05 of 16 February 1985 repealed the 1976 code placing a monopoly on the practice of medicine. Section 197 mandates that those who want to practice allopathy or dentistry must have a diploma of doctor of medicine or dentistry from Algeria or an accredited foreign country.

Section 241 language provides one cannot practice traditional medicine as it constitutes an illegal practice of medicine or dentistry.

This also means that if a traditional healer acts as a physician or dentist, and makes a diagnosis, without meeting the requirements as stipulated in Sections 197 or 198 [governing the mandatory qualifications for medical and dental specialists, it amounts to illegality.

Section 225 includes provisions prohibiting medical auxiliaries from “announcing or applying technical procedures other than those that are taught in national training programs”. This notwithstanding, traditional medicine practitioners seem to be tolerated(WHO, 2001).

**Egypt**

Though there is a national policy on herbal medicine, there is no specific legislative regulatory framework for practitioners (WHO, 2005). There is also no law on chiropractic and other complementary therapies.

**Tunisia**

A recent report explained that the Tunisia parliament approved a law to host a Chinese Medical team that includes acupuncture ( Xinhua, 2023).

No specific law regulates traditional and alternative medicine practitioners.

**Libya**

No specific law regulates traditional and alternative medicine practitioners.

**Morocco**

No specific law regulates traditional and alternative medicine practitioners.

## ***Central or Middle Africa***

The countries in central Africa are Angola, Burundi, Cameroon, Central African Republic, Chad, Democratic Republic of the Congo, Republic of the Congo, Equatorial Guinea, Gabon, Rwanda, and São Tomé and Príncipe(Wikipedia, 2024).

Some of these countries were found in both southern and Eastern African regions and we have already explored their legislative regulatory framework**.**

**Cameroon**

Law 81/12 of 27 November 1981 approved the Fifth Five-Year Social, Economic, and Political Development Plan (1981–1986) of Cameroon. Section 16-1.3.1.5 provides the roadmap for the integration of traditional medicine into the national health plan (WHO, 2005).

Law n° 90/053 of 19 December 1990 led to the creation of several Associations of Traditional Healers all over the country( Asonganyi, 2011).

Cameroon is yet to get a specific legislative regulatory framework on traditional and alternative medicines.

**Central African Republic**

No official legislative or regulatory texts governing the practice of traditional and alternative medicine

**Chad**

No official legislative or regulatory texts governing the practice of traditional and alternative medicine

**Republic of the Congo**

Congo has official legislative/regulatory texts governing the practice of traditional medicine(WHO, 2005).

In 1996, legislation on the recognition of traditional medicine and complementary/alternative medicine was drafted but not passed yet(WHO, 2005).

**Equatorial Guinea**

Until 1985, Equatorial Guinea (EQ) did not officially recognize traditional medicine practices. At that time, Law 4/1985 was enacted, which created the National Directorate of Traditional Medicine, dependent on the Ministry of Health and Social Welfare.

The Association of Traditional Medicine of Equatorial Guinea (ASOMETRAGE) now officially registers all Fang traditional healers. There is legislative text that recognizes traditional medicine healers(WHO, 2005).

**Gabon**

No legislative regulatory framework exists.

**São Tomé and Príncipe**

No legislative regulatory framework exists.

## ***Western Africa***

The 15 members of the Economic Community of West African States (ECOWAS) are Benin, Burkina Faso, Cabo Verde, Cote d’Ivoire, The Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone, and Togo(United States Trade Representative, 2024).

**Benin**

The Traditional Medicine policy was adopted in 2002. Benin also has a Traditional Medicine Programme in the Ministry of Public Health with a Director.

A law or regulation on TM/CAM was adopted in 2001, and a national programme on TM/CAM was put in place in 1999(WHO, 2005).

**Burkina Faso**

The Natural Substances Research Institute and a Health Ministry service were created in 1978 to promote traditional medicine and pharmacopoeia. Traditional healers in Burkina Faso received recognition. Title IV of the Public Health Code of 28 December 1970 recognizes traditional medicine(WHO, 2005).

Section 49 states: *“The practice of traditional medicine by persons of known repute shall be provisionally tolerated; such persons shall remain responsible, under civil and penal law, for the acts which they perform. Subsequent items of legislation shall define the practice of this form of medicine and the status of persons engaged therein”.*

Furthermore, the Practice and Organization of Traditional Medicine, Chapter IV of Law 23/94/ADP of 19 May 1994 promulgates the Public Health Code. This chapter defines traditional medicine and traditional medicine practitioners and reiterates their official recognition in Burkina Faso(WHO, 2005).

No educational recognition is needed to practice traditional medicine, though, traditional programmes are available.

**Cabo Verde**

There is no legislative regulatory framework for traditional and complementary medicine(WHO, 2005; Romeiras et al. 2023).

**Cote d’Ivoire**

There is no legislative regulatory framework for traditional and complementary medicine(WHO, 2005).

**The Gambia.**

There is no legislative regulatory framework for traditional and complementary medicine. However, in 2023, a model legal framework for the practice of traditional medicine: The Traditional Medicine and Practitioners Act 2023 was drafted. The draft Act which may be called the Traditional Health Medicine Practitioners Act.

The draft bill proposes traditional healers have a certificate of competence which would be given to persons who have passed the Council’s examination.

The bill proscribes practicing traditional medicine without a license and extends to foreigners.

Foreigner traditional medicine practitioners shall write an examination or face an interview panel or both before being eligible for practice in the country. The council has the right to refuse any visiting traditional medicine practitioner to practice in the country.

The bill also mandates that a waiting period of six months is needed to enable the council to do their due diligence on the background of the practitioner.

The bill also set up a disciplinary committee to address all issues against a practitioner.

The Minister has the power to approve all rules made under the principal legislation to have legislative effects.

The bill also addresses the ethical code for practitioners. For instance, a practitioner shall only conduct an intimate examination in the presence of a relative of the patient or a person of the same sex.

The modes of traditional medicine health practice are;

* Herbal medicine
* Bone setting
* Traditional birth attendance companions/midwifery
* Traditional surgery
* Traditional psychiatry
* Divination
* Faith healing
* Metaphysics
* Veterinary services

**Ghana**

The Traditional Medicine Practice Act 595 is the legislative instrument that regulates the practice of traditional medicine. The Act does not extend to the practice of complementary and alternative medicines. The Act was drafted in 1999 and assented in 2000.

The Act establishes a council to regulate the practice of traditional medicine, register practitioners and license them to practice, and regulate the preparation and sale of herbal medicines.

The Act does not emphasize the educational requirement needed to get registered as a traditional medicine practitioner. It is however an offence for one to practice traditional medicine without licensure.

Section 13 of the Act mandates the Minister, based on recommendations of the Board and in consultation with the Association, may, prescribe by Regulations the title of practitioners based on qualifications and the type of service rendered.

In the case of complementary and alternative medicine, it is practiced and regulated based on Ministerial directives issued in 2010(Obu and Aggrey-Bluwey, 2022).

Currently, there is a pending draft developed in 2018 known as the Traditional and Alternative Medicine Bill (2018) that consolidates traditional and alternative medicine. This bill is to set up the Traditional and Alternative Medicine Practice Council(TAMPC) to regulate the practice of traditional and alternative medicine.

The explanatory memorandum acknowledged that there was a gap in the existing Act 575 on who qualifies to be a traditional medicine practitioner and seeks to address it. Also, following the decision of the Government that legislation in the health sector should be fused as appropriate, it has been decided expedient to consolidate traditional and alternative medicine provisions in one enactment as both relate to practices that are distinct from allopathic medicine.

The Act's long title states: to provide for the promotion and regulation of the practice of traditional medicine and alternative medicine and related matters.

The qualification for registration as a traditional healer is to have adequate proficiency in the practice of traditional medicine. In the case of alternative medicine, the Act is straightforward on the requirements for registration; holds a valid qualification in the field of specialization in alternative medicine, undergone an internship for a period determined by the Board, passed the professional qualifying examination recognized by the Board and the application is endorsed by the Federation in respect of members of the Federation.

The Act also makes room for those with qualifications such as a certificate of degree in traditional medicine; produce evidence of qualification from a recognized institution, show evidence of having completed an internship; and have passed the professional qualifying examination conducted by the Council.

Furthermore, the bill states that non-citizens and foreign-trained practitioners who intend to practice in Ghana; must hold a work permit, undergo internship training in an institution approved by the Board, and for a period determined by the Board, pass the professional qualifying examination conducted by the Council; and has a proof of qualification and proof of registration of the practice of that person in the country of origin of that person in the country where that person was trained.

The new bill also regulates food supplements and healthy foods in section 21. It restricts persons who practice food supplements and health foods without registration. The requirement for registration is to hold a relevant qualification recognized by the Council and show evidence of training on the use of food supplements or healthy foods.

Section 42 created the offenses in this bill. It is an offense to willfully and falsely use any title without the relevant qualifications. It is also an offense to erect a signboard that advertises a practice in a manner that is not in conformity with the guidelines of the Council and makes claims to the public that are deceptive.

When one goes against any of the offenses provisions, the person commits an offense and is liable on summary conviction to a fine of not less than one hundred penalty units and not more than one hundred and fifty penalty units or to a term of imprisonment of not less than six months and not more than one year or to both.

Section 44 provided the interpretations. Naturopathy is defined as “*a system of health that is usually drugless, which uses a wide variety of therapies including hydrotherapy, heat, massage, nutritional supplements and herbal medicines with the purpose of stimulating the optimum function of the whole person and supporting the innate healing capacity of that person”.*

“allopathic medicine” means a system of medical practice that is based on the application of rational scientific evidence and inquiry which has been the dominant medical practice since the 19th century and is also referred to as western or orthodox medicine.”

“African traditional medicine” means the types of Indigenous traditional medicine

practiced in Africa;

“alternative medicine” includes traditional medicine systems that are imported and any form of medicine that is outside allopathic and African traditional medicine which involves the management or treatment of diseases in co-operation with natural forces and the defensive mechanisms of the body;

“alternative medicine practitioner” means a person registered under this Act to practice medicine that is outside the mainstream of allopathic medicine and traditional medicine, and involves the management or treatment of diseases, sometimes in cooperation with natural forces and the defensive mechanisms of the body;

“traditional medicine” means the sum total of knowledge, skills, and practices based on theories, beliefs, and experiences Indigenous to different cultures that are used to maintain health, as well as to prevent, diagnose, improve, or treat physical or mental illness;

“traditional medicine practitioner” means a person who uses any aspect of traditional medicine for the prevention, promotion, and maintenance of health, diagnosis, and treatment of diseases;

“chiropractic” means a medical health care system that deals with the relationship between the spinal column and the nervous system whereby subluxation or fixation is present, palpation is applied to correct the neuromusculoskeletal system;

“acupuncture” is a Chinese healing art in which special needles are used to pierce and stimulate very precise points on the body to produce a wide range of therapeutic effects;

“ayurvedic medicine” means a system of medicine or way of living that is used for the prevention and treatment of diseases based on Vedic sacred philosophies developed in India during the 5th Century BC to the 5th Century AD and may be in the nature of the use of herbs, medicinal baths, and foods;

“food supplement” means a preparation partly or wholly from natural sources intended to supplement the diet of a person and to provide nutrients;

"health food" means food and supplements that are marketed to provide needed nutrients to the body;

“homeopathy” means a highly scientific therapeutic system that concentrates on treating the whole patient rather than the disease by using minimal doses of very highly diluted solution of substances that causes a similar disease in a healthy individual to stimulate the immune system of the patient to do the healing;

The Schedule  *(Section 22 (2)) cements on* alternative medicine diagnostic or therapeutic modalities or systems to be licensed include:

(a) Acupressure;

(b) Radionics;

(c) Hydrotherapy;

(d) Magneto therapy;

(e) Naturopathy;

(f) Reflexology;

(g) Therapeutic massage;

(h) Botanical Medicine;

(i) Ayurvedic Medicine;

(j) Chiropractic;

(k) Osteopathy;

(I) Homeopathy;

(m) Acupuncture;

(n) Pranic healing; and

(o) Reiki.

**Guinea**

No law regulates traditional and alternative medicines. However, Ordinance 189 PRG of 18 September 1984 mandates that anyone who wants to practice medicine can only practice with a Guinean diploma of Doctor of Medicine, a foreign diploma that has the same status or that allows the person to practice in his or her country. Section 9 has many provisions that are unlawful in medicine.

**Guinea Bissau**

No legislative regulatory framework for traditional or alternative medicine practice.

**Liberia**

Liberia has a Division of Complementary Medicine under the Ministry of Health. There is also the Complementary Board and the Traditional Medicine Federation of Liberia (TRAMEDFOL)(Medbox, 2020)

The regulatory framework for traditional and complementary medicine is enshrined in Title 33 of the Liberian Code of Laws Revised in 2017, also known as the Public Health Law and other regulations. National Traditional Medicine Council has also been proposed (Medbox. 2020).

**Mali**

The Department of Traditional Medicine and the National Research Institute of Medicine and Traditional Medicine were formed in 1973. They were charged with the mandate to develop scientific evidence in traditional medicine and set standards, codes of ethics, regulations, and status for herbalists and other traditional healers.

The Minister of Public Health and Social Affairs gave an order on 16 May 1980. This order established a Scientific and Technical Committee to work with the National Research Institute of Medicine and Traditional Medicine to fast-track the regulations of traditional medicine.

Decree 95/1319/MSS-PA/SG of 22 June 1995 establishes organizational and functional rules for the private consultation clinics, medicinal herbs stores, and improved production units. This decree set the grounds for regulating traditional medicinal plant sellers after registration was allowed to open private practices (WHO, 2015).

**Niger**

Those interested in traditional medicine were allowed to be attached to hospitals in Niamey. They practice under the guidance of a Medical doctor until satisfied by the Medical doctor that the practitioner is fit for practice to obtain a license from the Ministry of Public Health and Social Affairs(WHO, 2015).

**Nigeria**

The Traditional Medicine policy was adopted in 2005 while the Traditional Medicine Bill was prepared, reviewed by stakeholders, and approved by the Federal Executive Council in 2006.

Traditional, Complementary, and Alternative Medicines Department came into being following the approval by the Head of Service in a letter OHCSF/MSO/72/IV/132 dated 4th April 2018. The activities of the Traditional, Complementary, and Alternative Medicines Department commenced fully in July 2018(Federation Ministry of Health and Social Welfare, 2024). The Traditional Medicine Bill is pending ratification by the National Assembly.

In the case of alternative, the legislative regulatory framework is enshrined under the Medical and Dental Practitioners Act Cap 221 (now Cap M8) 1990 Laws of Federation of Nigeria 1990 which sets up the Medical and Dental Council of Nigeria.

This law was amended viz Decree No. 78 of 1992 and the functions of the Medical and Dental Council of Nigeria were expanded to include: Supervising and controlling the practice of homeopathy, and other focus of alternative medicine (naturopathy, acupuncture, and osteopathy)(Medical and Dental Council of Nigeria, 2024).

**Senegal**

In 1985, the government took a set to recognize traditional medicine practitioners. There is a registry for traditional health practitioners. Some official strategies and activities encourage collaboration between traditional and allopathic medical practitioners (WHO).

**Sierra Leone**

The Traditional Medicine Act of 1996 is the legislative instrument that regulates the profession of traditional medicine. The Act establishes the Scientific and Technical Board on Traditional Medicine and two committees under it: the Disciplinary Committee to advise the Board on matters relating to the professional conduct of traditional medicine practitioners and the Drugs Committee to advise the Board on the classification and standardization of traditional medicines.

The Scientific and Technical Board is charged with securing the highest practicable standards in the provision of traditional medicine in Sierra Leone by promoting the proper training and examination of students of traditional medicine, controlling the registration of traditional health practitioners, and regulating the premises where traditional medicine is practiced.

The Act also restricts the use of the title ”Traditional Medical Practitioner. ” The Act also forbids traditional healers from providing medical. Part IV of the Act contains a list of the diseases for which traditional medical providers may advertise treatment(WHO, 2005).

**Togo**

Togo’s law on health practitioners exempts traditional medicine. Section 68 of the Criminal Code of 1980, has the definition of the illegal practice of medicine and reflects Article L 372 of the French Code of Public Health. However, the second paragraph of Section 68, states the following:

“The above provisions do not apply to medical practitioners who practice according to traditional methods.” Togo has a registry of traditional health practitioners(WHO, 2005).

***Fig 2. Authors Construct -We found the following as the most common statutory recognitions of alternative complementary medicine in Africa***.

## **CHAPTER TWO**

## ***STATUTORY IDENTIFICATION & PROVISIONS IN AFRICA***

This chapter discusses the second objective that explore which African countries have distinct laws on naturopathy.

## ***To explore which African countries have distinct laws on naturopathy***

***Fig 3.******Authors Construct- Southern African Countries have distinct laws on naturopathy as compared to the rest of the regional blocks.***

I found nine(9) countries in Africa that have a distinct legislative regulatory framework for naturopathy. This separates naturopathy from traditional medicine. This can be traced to the countries in the southern African community.

Lesotho for instance, considers naturopaths as natural therapeutic practitioners under the Act. On the other hand, the Herbalist Council regulates traditional medicine practitioners.

Eswatini, though has no legislative regulatory framework for traditional medicine, has a separate law for naturopaths. The Medical and Dental Council regulates naturopaths under the Health Professions Act.

This also applies to Nigeria, where the Medical and Dental Council regulates naturopaths and other alternative medicine practitioners.

In Botswana, Naturopaths are considered as associated health Professionals under the Botswana Health Professions Act. Traditional medicine practitioners have no legislative regulatory framework.

Zimbabwe also has a distinct law that regulates naturopaths and other complementary therapy practitioners under the Health Professions Act. Traditional Medicine practitioners are also regulated under the Traditional Medical Practitioners Act.

Zambia only regulates osteopaths under the Health Professions Act. No legislative regulatory framework exists for naturopathy and other traditional complementary medicine practitioners.

In South Africa, naturopaths are regarded as allied health professionals. They hence regulated under the Allied Health Professions Act. Traditional Medicine Practitioners are also regulated differently under the Traditional Health Practitioners Act.

Finally, in Namibia, naturopaths are also considered allied health professionals and are regulated under the Allied Health Professions Act. Traditional healers have no legislative regulatory framework.

Namibia on the other hand, has been able to develop its laws using the regulations sections.

## ***AFRICAN COUNTRIES WITH IDENTIFIABLE LAWS ON TRADITIONAL AND ALTERNATIVE MEDICINE***

## ***SOUTHERN AFRICAN COUNTRIES***

|  |  |  |  |
| --- | --- | --- | --- |
| S/N0. | AFRICAN COUNTRIES | LAW ON (NATUROPATHY) | LAW ON TRADITIONAL MEDICINE |
|  | Botswana | Associated Health Professionals Act, 17 of 2001 | N/A |
|  | Comoros | N/A | Public Health code  (Title III) |
|  | DR. Congo | N/A | Decree of 19th March, 1952 |
|  | Eswatini | Medical and dental practitioners Act, 1970 (regulation 1978 on control of natural therapeutics) | N/A |
|  | Lesotho | Natural Therapeutic Practitioners Act of (1976) | Universal Medicinemen and Herbalist Council Act (1978) |
|  | Madagascar | Public Health code (law no. 2011.002) with the Health Code. | Public Health code (law no. 2011.002) with the Health Code. |
|  | Mauritius | Ayurvedic and other traditional medicine Act 37 of 1989 revised 3rd September 1990  Allied Health Professionals Council Act no.9 of 2017 for only Chiropractic and Osteopaths. | Ayurvedic and other traditional medicine Act 37 of 1989 revised 3rd September 1990 |
|  | Namibia | Allied Health Professions Act 7 of 2004 | N/A |
|  | Seychelles | Health Professionals Act 2006 for only acupuncturists | N/A |
|  | South Africa | Allied Health Professions Act 63 of 1982  Regulations Relating to the Profession of Naturopathy(2023) | Traditional Health Practitioners Act no.22 of 2007 |
|  | Tanzania | Traditional and Alternative medicine no. 23 of Act 2002 | Traditional and Alternative medicine no. 23 of Act 2002 |
|  | Zambia | The Health Professions Act no. 24 of 2009 for only Osteopaths | N/A |
|  | Zimbabwe | The Health Professions Act Chapter 27:19, Act 6/2000, 22/2001 (s.4), 14/2002 (s.43), 28/2004 (s.29) | Traditional Medical Practitioners Act 1981 chapter 27:14 |

***Tab 1-Southern African countries have distinct laws on Naturopathy & Traditional Medicine.***

***N/A-means not applicable***

## **EAST AFRICAN COUNTRIES**

|  |  |  |  |
| --- | --- | --- | --- |
| S/N0. | AFRICAN COUNTRIES | LAW ON (NATUROPATHY) | LAW ON TRADITIONAL MEDICINE |
|  | Ethiopia | N/A | Proclamation 100 of 1948, penal code 512/1957, and civil code 8/1987 for tropical |
|  | Rwanda | N/A | Ministerial order no. 007/2008 of 15/08/2008 and law no. 47/2012 dated 14/01/2013 |
|  | Kenya | Health Act No. 21 of 2017 and Act No. 27 of 2022 mandate parliament to initiate regulation on traditional and complementary medicine | Health Act No. 21 of 2017 and Act No. 27 of 2022 mandate parliament to initiate regulation on traditional and complementary medicine |
|  | Uganda | Traditional and complementary medicines Act 2019 | Traditional and complementary medicines Act 2019 |

***Tab 2- Shows few Eastern African countries have laws on traditional and alternative medicines.***

**WEST AFRICAN COUNTRIES**

|  |  |  |  |
| --- | --- | --- | --- |
| S/N0. | AFRICAN COUNTRIES | LAW ON (NATUROPATHY) | LAW ON TRADITIONAL MEDICINE |
|  | Benin | Law on traditional medicine and complementary alternative medicine was adopted in 2001 | Law on traditional medicine and complementary alternative medicine was adopted in 2001 |
|  | Burkina Faso | N/A | Title iv. of Public Health code of 28th December 1970 |
|  | Ghana | Ministerial Order 2010 | Traditional Medicine Act 2002 |
|  | Togo | N/A | Article L 372 of French Code of Public Health |
|  | Liberia | N/A | Title 33 of the Liberian Code of Laws revised in 2017 also known as Public Health Law. |
|  | Mali | N/A | Decree 95/1319/NSS.PA/SG of 22 June 1995 |
|  | Nigeria | Medical and Dental Practitioners Act cap 221 now (cap m8) 1990 as amended viz decree no. 78 of 1992 | N/A |
|  | Sierra Leone | N/A | Traditional Medicine Act of 1996 |

***Tab 3. Few West African Countries have laws on traditional and alternative medicines. In countries with no identifiable laws on alternative complementary medicines, practitioners can still practice under traditional medicine laws.***

## ***Explore the statutory definition and classification of naturopathy and traditional medicine.***

The third objective is to explore the statutory definition and classification of naturopathy and traditional medicine in Africa.

The review found different legal perspectives on what constitutes traditional and naturopathic medicine in the African perspective.

***Fig 4. Authors Construct - Naturopathy has different statutory meanings in Africa.***

For instance, naturopathy in the Ghanaian proposed Traditional and Alternative Medicine Bill (2018) defines naturopathy as usually drugless therapies.

Namibia Law also limited it to only prescribing natural therapies. Most of the law did not provide the legal definition of naturopathy.

Lesotho also considers naturopathy as a natural therapy. Another linked it to traditional medicine.

***Traditional Medicine***

***Fig 5. Authors Construct-Traditional Medicine has different statutory meanings in the African regions***

Type 1

Consider Traditional Medicine based on how they are formulated and prepared. It also focuses on their safety.

Type 2

Define Traditional Medicine based on the country of origin. It cements the Indigenous practice and is recognized by the people in the community.

Type 3

Defines Traditional Medicine as those imported into the country and have no link to that country. The country could be within other African countries or abroad.

Type 4

Define traditional medicine based on rational science. It has been developed based on using the scientific protocol.

## ***To explore the types of legislation in naturopathy and other traditional medicines***

***Fig 6. Authors Construct -Traditional Medicine has different players in the African regions***

The fourth objective is to explore the types of legislation in naturopathy and other traditional medicines.

Most countries in the southern African community link naturopathy to the allied health profession, health professions, associated health profession, and natural therapist profession.

In the other African region, others have linked naturopathy and traditional medicine to public health laws.

Others have a consolidated law that regulates naturopathy and traditional medicine in the same Act.

Furthermore, others consider naturopathy and traditional medicine as the same unit. The traditional use of conventional titles such as Doctor, Professor, and Nurse is prohibited unless the practitioner qualifies. Titles found in the legislative regulatory framework for traditional medicines practitioners are;

* Chartered Traditional Medical Practitioner
* Traditional Medical Practitioner
* Regulated Traditional Medical Practitioner
* Traditional Healer
* Traditional Health Practitioner
* Tradipraticien Health
* Traditional Medicine Practitioner
* Traditional Doctor.

***Fig 7. Authors Construct: Africa has different statutory titles for traditional medicine practitioners***

## ***To explore the minimum requirements for statutory registration of naturopathy and other traditional complementary medicines***

*Fig 8. Authors Construct: different jurisdictions have different requirements for registration for traditional medicine practice in Africa.*

Most African regions consider naturopathy and other alternative medicine practices as highly professional and need strict regulatory mechanisms just as mainstream practice. Hence, the minimum educational requirement needed is a Diploma with mandatory clinical training.

Traditional Medicine practice requirements are more flexible. However, others have a Diploma or certificate of competence as the minimum requirement to practice.

Others have 21 years as the minimum age requirement needed to practice traditional medicine.

Some regions also have a situation where the traditional medicine practitioner has to practice under the supervision of a medical doctor for a prescribed term before licensure is given.

Finally, others have also proposed a professional qualifying examination as a requirement.

## ***To propose recommendations for legislative regulations in African naturopathy and other traditional complementary medicine***

Finally, the last objective is to propose recommendations for legislative regulations in African naturopathy and other traditional complementary medicine.

I recommend that African countries without a legislative regulatory framework in the practice of naturopathy and other traditional complementary alternative medicines should take inspiration from others.

For instance, we found that Northern and Central African regions do not have any identifiable legislative regulatory framework on traditional and complementary medicines. However, mainstream practice laws appear strict and monopolistic; there is a friendly environment to champion traditional and alternative complementary medicines.

In East Africa for instance, only Uganda has an act of parliament on traditional and complementary medicine. Hence, East African countries must initiate steps to initiate a legislative regulatory framework for traditional and complementary medicine.

In West Africa sub-regions, most laws are enshrined in the public health laws and by proclamations. Ghana and Sierra Leone were found to have identifiable Traditional Medicines Act. In the case of Ghana, complementary therapy practices were not covered in the Traditional Medicine Act and were recognized by a Ministerial directive issued in 2010.

There is no law on traditional medicine; however, the Medical and Dental Council regulates naturopathy and other alternative medicine.

I further recommend titles for traditional medicine practitioners should be protected by statutes.

I also recommend that other African countries considering a legislative regulatory framework for naturopathy and other complementary medicines should provide a clear distinction as done in the southern African communities.

Finally, the southern African communities' legislative regulatory framework provides a roadmap for the legislative regulatory model in traditional and alternative medicine frameworks.

The regulation of traditional medicine and naturopathy in Africa is essential for safe and effective healthcare delivery. Continued efforts to enhance regulatory frameworks, engage communities, and promote research will be vital for the future.

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