

**Maiden speech to the NCOP given by the new KZN Health MEC, Ms Peggy Nkonyeni, at Imbizo Conference Centre, Empangeni on November 4 2004.**

It is my privilege this afternoon to address this house on the Traditional Health Practitioners Bill. I would like to say at the outset that my department welcomes this legislation and strongly believes that it is long overdue. The Bill has particular relevance for KwaZulu-Natal, which is a province in which many communities rely on the wisdom and skill of traditional healers. We believe this legislation has an important role to play in regulating the art of traditional healing, an art that is passed down through generations by word of mouth. We believe the legislation can bring dignity and credibility to traditional healing. We would like to see traditional healing practice in this country being elevated to the same internationally acclaimed status as the traditional healing practices of countries like China and India.

Having said this, one would like to point out that it is early days yet because we still need a clearly defined and articulated regulatory framework. Many issues are yet to be properly thrashed out and clarified. For example, there has to be better clarity about the transitional arrangements that will allow currently practising traditional healers to conform to the requirements of the legislation, given that many of them are uneducated and some are even illiterate, which may make the interpretation of the regulations problematic for them. We therefore need to put in place arrangements that will allow the smooth transition into the new regulations given that the legislation should make it easier, rather than difficult, for the practitioners to comply.

The process of registering traditional healers was started right here in KwaZulu-Natal some years back when the need to streamline their practice became apparent and urgent. We are happy to say that traditional healers have been quite enthusiastic about the registration process. The experience and the lessons learnt during this interim arrangement in KZN will assist us in implementing the Bill.

There is no doubt that the whole traditional healing practice needs to be regularised, but we must guard against changing it so much so that those who practice it can hardly recognise it. We need to professionalise the art so that we can weed out quacks and those “fly by night” practitioners who prey on the desperation of their patients. We need also to look into the issue of practitioners who work from unstable and ill-defined places.

While we welcome the Bill and the possibilities it holds for our country, we do want to urge that there should be a balance between the use of herbs and nature

conservation. We need to pay serious attention to the rehabilitation and rejuvenation of the plants and trees that yield our medicinal herbs. We need also to guard against the economic exploitation of practitioners and trading in medicinal herbs to safeguard the intellectual property of traditional practitioners. We do want to caution, however, that traditional healing must not be seen as a mechanism to address unemployment, which would open it to abuse by quacks. As it is, we have a huge problem of unregistered nursing schools, which are mushrooming all over the province. Because people are desperate for jobs they flock to these schools and pay a small fortune for a qualifications that they cannot use anywhere, if they ever get a qualification. Many of these “schools” collect fees from students and simply disappear into the night.

Proper training of practitioners will help us to address issues of decent standards of hygiene; standardization of doses to reduce adverse effects and toxicity; and infection control. Training institutions for healers need careful thinking through so that departure from tradition is done such that it carries on board all practitioners.

There are some practices that are not traditional healing per se, but which over the years have come - rightly or wrongly - to be associated with traditional healing. These include experimentation with herbs of no known use; ukucwiya, which is the “harvesting” of human body parts in order to make herbal concoctions; and the abuse of patients by some unscrupulous practitioners. Our regulatory framework must allow us to properly control these.

I would like to take this opportunity to praise the traditional healers of our province for their unflinching support for and co-operation with the KZN Department of Health, particularly on HIV/ AIDS programmes. The Department, together with my predecessor Dr Zweli Mkhize, has worked with them on a number of initiatives. They have been particularly helpful in dispelling the myth that raping a virgin cures one of HIV or AIDS. They have categorically stated that this is not true and any healer who perpetuates this myth is nothing but a quack.

In conclusion, we would like to recognize the role that our province can play in helping with research, the implementation of the legislation and the screening of practitioners, given the experience we have had with registration of healers in KwaZulu-Natal. The role that all provinces can play in implementing this legislation must be properly structured so as to reduce the flood of work that would have to be handle by the national office.