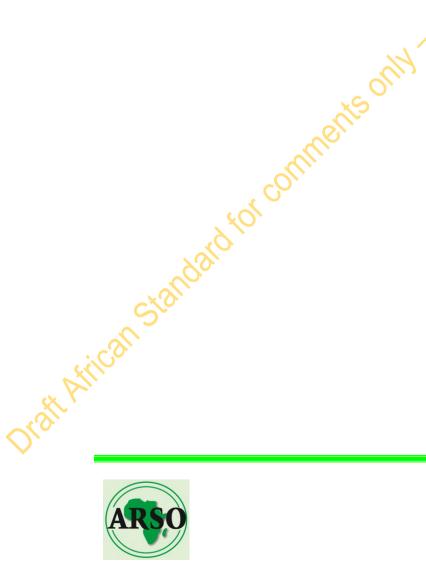
AFRICAN STANDARD

cited as African Standard

Code of ethics for African Traditional Medicine Practitioners (ATMP)



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Introduction

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AFRICAN STANDARD

Code of ethics for African Traditional Medicine Practitioners (ATMP)

1 Scope

This African Standard sets the Code of Ethics including Code of Practice, the disciplinary procedures and minimum standards for the practice of traditional medicine in countries of the African Region.

2 Normative references

The following referenced documents are indispensable for the application of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ARS 961, African Traditional medicines - Terms and terminology

3 Terms and definitions

For the purpose of this standard, terms and definitions given in ARS 961 and the following apply.

3.1

ethics

the science of moral value

3.2

code of ethics

a set of rules governing conduct based on moral values, which are stated by a recognized professional association

3.3

professional ethics

the moral principle, which should guide African Traditional Medicine Practitioners (ATMP) in their dealings with one another and with their patients, the patrons, the State etc.

3.4

Professional Ethics Committee (P.E.C.)

consisting of members appointed by the appropriate National Authority so as to ensure a reasonably balanced representation of the membership.

3.5

Proscribed conduct

dishonourable conduct or professional or ethical misconduct which transgresses the Code of ethics such other acts of misconduct as may reasonably be determined by the appropriate National Authority to be professional or ethical misconduct.

3.6

first hearing

the date, time, and place proposed for first consideration by the P.E.C. of allegations of proscribed conduct.

3.7

final hearing

date, time, and place proposed for final consideration by the P.E.C. of allegations of proscribed conduct.

3.7

National Authority

national entity in charge of regulating traditional medicines in each partner states.

4 Code of ethics for ATMP

4.1 General

Standard Individual ATMP shall, at all times, conduct themselves in an honourable manner in their relationship with their patients, the public and other practitioners.

Code of ethics for ATMP in relation to their work 4.2

The ATMP shall:

As a matter of primary concern, promote the health and well-being of the patient and the 4.2.1 general public.

4.2.2 Refrain from any act that may adversely affect the patient's health.

4.2.3 Practice traditional medicine only after having been formally registered to do so

4.2.4 Provide comprehensive services in their profession.

Desist from delegating their subordinate and/or assistant to tasks, which they should perform 4.2.5 personally. In the event of such undertaking, the practitioner should provide the necessary guidance and supervision.

Immediately report any observed undesirable reactions and side effects noted in the cause of 4.2.6 the treatment to the appropriate National Authority.

Limit their practice only to areas within their professional competence, e.g.: herbalism, bone 4.2.7 setting, traditional birth attendance, traditional surgery, traditional psychiatry, spiritualism, divination and faith healing. Cases beyond their competence should be referred to the appropriate National Authority.

4.2.8 Update their knowledge and maintain professional competence directly related to their specific areas of practice.

Provide information on traditional medicine to the public as well as to other health 4.2.9 professionals when necessary,

4.3 Code of ethics for ATMP in relation to their patients

The ATMP shall, in dealing with their patients:

4.3.1 Show a high sense of integrity at all times in their interaction with their patients.

4.3.2 Inform their patients about the procedures involved in the treatment, which they intend to administer.

Respect the right of a patient not to accept treatment by traditional medicine except if the law 4.3.3 requires such treatment of the disease.

4.3.4 Refrain from abusive use of that relationship for personal gains.

4.3.5 Refrain from any act(s) of discrimination towards patients. In this respect, they shall not discriminate between patients on the grounds of nationality, creed, colour, religion, social status, political affiliation etc.

Give appropriate advice to the patient, the patient's family and the community for purposes of 4.3.6 disease prevention, care (including home-based care), management and health promotion in the context of primary health care.

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- **4.3.7** Provide all the necessary information and guidance on the proper use of traditional medicines.
- **4.3.8** Keep clear and comprehensive records of all patients treated in their practice.
- **4.3.9** Be considerate in matters concerning fees/remuneration and justification for treatment.

4.3.10 Keep all information and views formed about patients entirely confidential, except if:

- a) Disclosure is clearly and justifiably in the patient's interest.
- b) There is a need for disclosure e.g. when the practitioner considers referral as necessary.
- c) When disclosure is mandatory by law.

4.3.11 Not disclose confidential information to a patient's spouse or any other person, except if authorized to do so by the appropriate National Authority.

4.4 Code of ethics for ATMP in relation to their colleagues

The ATMP, in maintaining good professional relationship with their colleagues, shall:

4.4.1 Support, respect and cooperate with fellow practitioners in addressing needs for scientific and technical information.

4.4.2 Regard other traditional health practitioners as colleagues and always appreciate the need for referral of cases, which they cannot manage, to a specialist more competent in treating that particular type of ailment.

4.4.3 Adhere to procedures laid down by the appropriate National Authority when referring patients or dealing with the patients referred to them by other practitioners.

4.4.4 Not express their opinion of a colleague's competence or conduct to a third party especially a patient, as it is unprofessional and unethical.

4.4.5 Report to the appropriate National Authority any act(s) of misconduct or malpractice by a fellow ATMP in order to uphold the honour and integrity of the profession and thereby contribute to the enforcement of the law.

4.4.6 Participate in the activities of their own professional associations and of other associations/organizations with the objectives of promoting traditional medicine.

4.4.7 Not express undue alarm or show any such reaction upon receiving a patient who has been improperly treated or referred to him by another ATMP.

4.4.8 Refrain from making comments that undermine the integrity of colleagues.

4.4.9 Not make any secret arrangement or negotiations with an ATMP for offers, commission, etc., in return for favours in patronage, referral, etc.

4.4.10 Not connive with other ATMP to engage in any malpractice(s).

4.4.11 Strive for the promotion of health, expansion of health service and the development of team work spirit with other ATMP.

4.5 Code of ethics for ATMP in relation to the public

4.5.1 Use of the title and use of instruments

Licensed ATMP shall:

a) Use the title and instruments they are licenced for.

b) Not use title and instruments that are outside their scope of practices.

4.5.2 Secrecy and confidentiality

The ATMP shall:

- a) Subject to the requirements of the law, observe strict confidentiality as regards the patient's disease(s), the types of traditional medicine used or any such information that patients may disclose to them in the course of consultation.
- b) Keep information such as the patient's history and other records under strict secrecy except as otherwise required by law or for purposes of settlement of financial reimbursement. This secrecy shall be exercised in regard to all other confidential information in their possession.

4.5.3 Accountability and Liability Due to Negligence

The ATMP shall be accountable and liable for negligence in the following situations:

- a) damage inflicted on the patient as a result of negligence and/or non-compliance in the discharge of their professional duties.
- b) negligence or professional misconduct on their part.
- c) failure to report undue obstruction of their duties by an unauthorized person(s);

4.5.4 Experiments involving human subjects and the use of ATM

In the conduct of research on the evaluation of the safety, efficacy and/or quality of African traditional medicines on humans in collaboration with scientists or institutions, traditional medicine practitioners or their associations that are members of such research team shall:

- a) participate in such joint experiments involving human subjects only when all the ethical standards are fulfilled. Each experiment should receive prior ethical clearance and approval by the appropriate National Authority, as well as the written consent of the subject.
- b) Immediately report, to the principal investigator of the research team, any adverse findings, especially when the health and/or well-being of the subject are in danger.

4.5.5 ATMP as a citizen

The ATMP, as responsible members of society, shall:

- a) Be law-abiding and strictly adhere to the laws of the country as well as socially accepted norms.
- b) Keep their honour and maintain high standard of integrity in the community where they live. They must promote and show concern for social justice in the community.
- c) Be enlightened and conversant with the laws in every aspect of their professional practice.

4.6 Code of ethics for ATMP in relation to sexual abuse

4.6.1 The ATMP shall not involve in practices that will lead to the engagement in sexual activity. The appropriate authorities should therefore prohibit any prescriptions or practices carried out in the name of traditional medicine, but leading to the involvement in sexual activity. The appropriate authorities should, in this respect, clearly spell out in the code of practice for traditional health practitioners, the responsibilities of these practitioners to protect patients, from sexual abuse.

4.6.2 Breach of this section of the code should warrant adequate disciplinary action by the appropriate National Authority e.g. expulsion from the membership of registered traditional health practitioners, as well as indictment for indecent assault, incitement to commit a sexual offence, etc. Any ATMP found to be in breach of this section of the code must be reported to law enforcement agents and the disciplinary authorities for appropriate sanction.

4.6.3 The ATMP, in dealing with minors, shall:

- a) On no account, prescribe or administer sexual activity as a form of treatment of any ailment whatsoever, physical or spiritual. They shall not, in the course of treatment, request or require a client to undress or expose them in a manner deemed to be indecent.
- b) Under no circumstances administer sexual compensation by a young girl or young boy. The compensation must be in cash or in kind.
- c) Not prescribe any medicines made from or containing parts of the human body or organs.

4.7 Management and ethical utilisation of African traditional medicines

The ATMP in the course of advertising, shall:

4.7.1 At all times, abide by the rules that shall be laid down by the appropriate National Authority from time to time. Advertising, both in its form and content, shall aim to protect the interest of patients.

4.7.2 Refrain from any act(s) purported to denigrate other traditional medicine practitioners or other professions.

4.7.3 Refrain from falsehood, and from making fraudulent, misleading, deceptive, self-laudatory, extravagant or unduly sensational claims.

- **4.7.4** Adhere to the legal requirements and to the provisions of the national code of advertising.
- **4.7.5** Not display materials likely to bring the profession into disrepute and shall refrain from making false promises to cure diseases.
- **4.7.6** Be subject to disciplinary action for contravening the national regulations.

4.7.7 ATMP shall be held personally accountable for professional misconduct by their staff or assistants not registered with the appropriate National Authority, but practising under their supervisions.

4.7.8 Infringement upon the Code of Ethics shall render ATMP liable to disciplinary action with possible loss of the privileges and benefits of registration with the National Authority.

4.7.9 The appropriate National Authority shall reserve the right to revise the provisions of this Code of Ethics from time to time.

4.8 Quality of prepared and stocked traditional medicines

The ATMP shall not make available for sale or dispense to patients, traditional medicines that are substandard, mislabelled or adulterated.

5 Code of practice for ATMP

5.1 **Premises and location of practice**

5.1.1 The ATMP shall comply at all times with the requirements of the Code of Practice. Any ATMP who fails to meet the requirements of the Code of Practice shall be held in breach of the Code of Ethics and shall be subjected to disciplinary measures on the grounds of professional misconduct.

- **5.1.2** In keeping with the Code of Practice, the ATMP shall:
 - a) carry out their practice in properly registered building(s) or premises as specified in their licence(s).
 - b) ensure that the building is in a clean and tidy environment. If only a part of the building is used for traditional medicine practice, the part so used must be clearly demarcated from the part used for other purposes, in order to ensure the privacy and cleanliness of the clinic. Adequate arrangements must be made for refuse collection and disposal as well as the general upkeep of the premises.
 - c) not practise in any district or area other than that specified in their licence(s) without the consent, in writing, of the appropriate National Authority.

5.2 Application for Licence

5.2.1 An application for a licence, or for the renewal of a licence, to practise as an ATMP shall be addressed to the appropriate National Authority in the form prescribed by the National Authority and shall contain such particulars as are required by the relevant rules.

5.2.2 Whenever a licensed practitioner changes address he/she shall notify the appropriate National Authority of such change within a specified period, failure of which shall constitute an offence.

5.2.3 The ATMP who deliberately furnishes false information, or information that is misleading, when applying for a licence, shall be guilty of an offence.

5.2.4 A licence to practise ATM shall be in the form prescribed by the appropriate National Authority.

5.3 Areas of competence

5.3.1 The ATMP shall work strictly within the areas(s) of competence for which they have been registered by the appropriate National Authority.

5.3.2 The ATMP shall not perform an abortion when it is illegal and shall not administer an abortifacient or known uterine muscle stimulant remedies to a pregnant patient. Furthermore, they shall not administer any instrument meant to induce abortion or assist in any such illegal operation.

5.4 Patient Examination and Treatment

5.4.1 The ATMP shall conduct intimate examination of a patient of the opposite sex only in the presence of a relative of the patient or a suitable assistant.

5.4.2 The ATMP shall treat or examine a child under the age of 18, only in the presence of a parent, supervising adult, or suitable assistant.

5.5 Fees

5.5.1 The appropriate National Authority shall set an inviolable fee chargeable for the treatment of various ailments or conditions. The fee shall cover:

- a) consultation and treatment in respect of a particular illness (including the provision of medication).
- b) travel allowance, when it needs to be applied, shall be up to a maximum amount established by the appropriate National Authority.

5.5.2 The provisions of subsection 5.5.1 above, shall not prevent any licensed ATMP from accepting gifts voluntarily given by any patient, except that such gifts shall not be accepted prior to the completion of consultation or treatment.

5.6 Patient Records and Notifiable Diseases

5.6.1 The ATMP shall keep complete and proper records of the name, address, age, sex and ailment of each and every patient, including the prescribed dosage, the name of the medicine dispensed or administered to the patient as well as the dates on which the patient reported for consultation or treatment. Whenever a patient is admitted for a day or more, then the record must include the dates of admission and discharge of the patient. Where the traditional health practitioner can neither read nor write, they must engage the services of a literate worker to help keep proper records.

5.6.2 The ATMP shall notify the health National Authority of any disease they are treating, which is on the current list of notifiable diseases.

5.6.3 The ATMP shall make all records available, upon request, for inspection by authorized persons.

5.7 Dispensing, labelling and administration of African traditional medicines

5.7.1 The ATMP shall comply with the regulations laid down by the appropriate National Authority as regards the dispensing and labelling of medicines. All medicines should be clearly labelled, specifying the correct dosage, other instructions for use, the name and address of the patient and the date on which the medicine was dispensed.

5.7.2 The ATMP shall, under no circumstances, use or dispense orthodox medicines, whether alone or together with traditional remedies. Such action shall be in contravention of the regulations.

5.7.3 The ATMP shall not administer traditional remedies by injection with syringes except with the official permission of the appropriate National Authority.

5.7.4 The ATMP shall not administer an anaesthetic.

5.7.5 The ATMP shall not administer an injection, whether by the sub-cutaneous, intra-muscular, intra-venous or any other route.

5.7.6 The ATMP shall not apply or use any drug or medicine or surgical procedures in order to facilitate the examination of any person.

5.7.7 The ATMP shall report immediately to the appropriate National Authority any outbreak of illness or diseases involving 10 or more persons simultaneously in the area in which they are entitled to practise which may come to their notice in the course of their practice.

6 Disciplinary Procedure: Dishonourable conduct, professional and ethical misconduct

6.1 All reported cases of professional misconduct on the part of an ATMP shall be referred to the Professional Ethics Committee (P.E.C) for necessary action.

6.2 In determining whether an action by an ATMP amounts to misconduct, consideration shall be given to any directions, advice or statements issued or made by, or on behalf of, the appropriate National Authority as regards that action whether of a general or specific nature, or of any Code of Ethics or rules adopted by the appropriate National Authority.

6.3 The P.E.C. shall serve on the ATMP concerned written notice of the allegation(s) made against him, including full details of the complaint received. The PEC shall, in this regard, inform the ATMP concerned of the first hearing, which shall be not less than 15 days after the date of service of the notice specified in this paragraph.

6.4 The P.E.C. shall notify the ATMPconcerned of his/her right to submit a full written statement of evidence, on his own behalf, or a written request to personally give oral evidence on his own behalf if he wishes to do so. In addition, the P.E.C shall inform him that the statement of evidence referred to in this Article should be in full, and that such statement and/or request of the practitioner concerned must be served on the P.E.C. within a period specified by the P.E.C. after service on the practitioner concerned of the notice specified in this paragraph.

6.5 The P.E.C. shall accept both oral and written evidence.

6.6 Should the ATMP concerned fail to serve on the P.E.C. a statement and/or reply and/or notice in accordance with the relevant Articles of this Code of Ethics the P.E.C. may, after expiry of the time for service specified herein, proceed to the first hearing or the final hearing, respectively without considering any written evidence which might have been included in such statement and/or reply and/or notice and in the absence of the ATMP concerned.

6.7 The P.E.C. may adjourn or postpone (more than once, if necessary) the first hearing or the final hearing, respectively, for such period as it thinks fit, provided that at least 15 days before the new date fixed for such hearing or as specified by the appropriate National Authority, it serves on the ATMP concerned written notice of the new date, time and place for such hearing.

6.8 The P.E.C. shall, at the time and place and on the date notified for the first hearing, or of any duly notified postponement or adjournment thereof, meet to decide whether a case of proscribed conduct has been established against the ATMP concerned. If it finds that a case has not been established against the ATMP concerned, the P.E.C. shall dismiss the case. If it finds that a case has been established, which if proved, might lead to the de-registration of the ATMP concerned, the P.E.C. shall not hear the matter but refer it to the appropriate National Authority. If it finds that a case has been established, but considers the complaint to be of less serious nature, then it shall have a hearing on the matter, by itself and, if it finds the case proved, it shall:

- a) censure the ATMP concerned; and/or
- b) fine the ATMPa sum prescribed by the appropriate National Authority. The amount of the fine shall be paid in full within a specified period, usually not exceeding 28 days or as specified by the appropriate National Authority.

6.9 The provisions of 6.8 above, shall be without prejudice to the powers of the P.E.C. to adjourn the first hearing.

6.10 The P.E.C. shall, not more than 14 days or as specified by the appropriate National Authority, after the hearing, serve written notice on the ATMP concerned of its decision and submit a written report to the appropriate National Authority. Should the P.E.C. decide to fine the ATMP concerned, the fine shall be stated in the written notice in addition to stating the period within which the ATMP concerned is required to pay the fine. Furthermore, the P.E.C. shall inform of his right to appeal to the appropriate National Authority.

6.11 If the ATMP concerned intends to appeal to the appropriate National Authority against a fine imposed by the P.E.C. he shall, not more than 14 days after being notified by the P.E.C., or as specified by the appropriate National Authority, send a written notice of his intention to appeal. Should the practitioner concerned fail to serve such notice within the stipulated time frame, he shall lose his right of appeal.

6.12 If the P.E.C. receives notice of appeal in accordance with the relevant articles of this Code of Ethics, it shall require the Chairman of the P.E.C to convene a meeting of the Committee of the appropriate National Authority, and not more than 14 days or as specified by the appropriate National Authority after so requiring, serve on the practitioner concerned notice of the fact that it has done so.

6.13 Any person about whom a complaint has been made or who has lodged a complaint against an ATMP or is likely to be called upon to give evidence in any such complaint or who is directly interested in its outcome shall not be eligible to sit on the P.E.C. or the Committee of the appropriate National Authority at which such complaint is considered and no member of the P.E.C. which considers

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such complaint shall be eligible to sit on the Committee of the appropriate National Authority in respect of the same complaint.

6.14 The procedure to be followed in serving notices in connection with incidents of proscribed conduct shall be as follows:

- a) a notice shall be served by the committee of the appropriate National Authority to any practitioner, either personally or by prepaid first-recorded delivery post, in a letter addressed to the ATMP at his last registered address;
- a notice sent by post shall be deemed to have been served on the day following that on which the letter containing the notice was posted;
- c) any notice, requisition or other document to be served on the appropriate National Authority or on any of its staff shall be sent by first class postal delivery to the registered office of the appropriate National Authority.

6.15 The Committee appointed by the appropriate National Authority shall be vested with all the powers conferred upon it by these Articles in so far as they relate to any disciplinary action to be taken against an ATMP or the reason thereof.

6.16 The law shall determine the quorum of the Committee appointed by the appropriate National Authority, when considering a complaint. The Committee may enlist the assistance of a Legally qualified professional.

6.17 The ATMP concerned shall have the inalienable right to be heard by the Committee appointed by the appropriate National Authority, he/she so desires, whether in person or through his legal counsel or solicitor or through a lay representative who must also be a traditional health practitioner. He shall have the right to choose to submit a statement in writing.

6.18 The ATMP concerned may, not less than 7 days (or as specified by the appropriate National Authority) before the scheduled date of the first hearing or the final hearing (but not an adjourned or postponed first hearing or final hearing), serve on the P.E.C. or the Committee appointed by the appropriate National Authority (as the case may be) a request for further time to enable him/her to prepare his/her case. The P.E.C. or the Committee appointed by the appropriate National Authority (as the case may be) shall, on receipt of such a request, adjourn or postpone the first hearing or the final hearing respectively for a period of at least 15 days (or as specified by the appropriate National Authority) from the date of the request for further time, in accordance with the applicable provisions of these Articles.

6.19 The Committee appointed by the appropriate National Authority shall serve on the ATMP concerned a written notice informing him of the date of the final hearing which shall be not less than 15 days (or as specified by the appropriate National Authority) from the date on which such notice is served, and notifying him/her of his/her right to submit, either:

- a) a statement of intent if any to be heard in person or to be represented by his/her counsel, solicitor or other representative; or
- a written explanatory statement on his own behalf, to be served on the Committee appointed by the appropriate National Authority not more than 14 days after service on the ATMPconcerned of the notice specified in this article.

6.20 The Committee appointed by the appropriate National Authority shall, at the scheduled time, place and date of the final hearing or on the duly notified date to which the hearing is postponed or adjourned, meet to decide on the case. In considering the case, any previous findings by a Court of competent jurisdiction or by any other relevant professional tribunal shall be binding on the Committee appointed by the appropriate National Authority. After hearing all the evidence presented for and against the ATMP concerned, the Committee appointed by the appropriate National Authority of proscribed conduct. If the Committee finds that the practitioner concerned is not guilty of proscribed conduct, it shall dismiss the case. If it finds that he/she is guilty of prescribed conduct it shall:

a) censure the practitioner concerned; and/or

- b) impose a fine on the practitioner concerned, the sum of which shall be decided by the appropriate National Authority. The fine shall be paid within a specified period not exceeding 28 days (or as specified by the appropriate National Authority). Furthermore, the appropriate National Authority shall reserve right to expel that practitioner from the association of ATMPand, if it thinks fit, prescribe a period of time during which no application for his/her re-registration shall be considered and/or
- c) resolve that the practitioner's registration be cancelled, whereupon he/she shall cease to be a practitioner forthwith. Nothing herein shall entitle the ATMP concerned to require the said Committee to re-consider its penal decision.

6.21 The Committee appointed by the appropriate National Authority shall, not more than 14 days (or as specified by the appropriate National Authority) after the final hearing, serve a written notice on that ATMP concerned of its decision, which shall be final and be binding on all parties and shall send a written report thereon to the Chairman of P.E.C.

6.22 The requirements of clause 6.20 above, shall be without prejudice to the power of the Committee appointed by the appropriate National Authority to adjourn the final hearing.

6.23 It is incumbent upon every ATMP who has been fined, in accordance with the provisions of 6.20(b) above to pay such fine in full within the stipulated period.

6.24 A person who has been fined and de-registered in accordance with 6.20(b) above or whose registration has been cancelled in accordance with 6.20(c) may apply for re-registration by the Committee appointed by the appropriate National Authority, provided that such application is made after the period which has been prescribed in accordance with 6.20(b) and 6.20(c).

6.25 The Committee appointed by the appropriate National Authority shall have the power to take appropriate decision on any matters or procedures relating to proscribed conduct which are not covered by these clauses, subject to approval of that decision by the appropriate National Authority.

7 Minimum requirements for ATMP

7.1 Modes of African Traditional Medicine Practice

In most countries of the African Region, traditional medicine practices include:

- a) Herbal medicine
- b) Bone setting
- c) Traditional birth attendance
- d) Traditional surgery
- e) Traditional psychiatry
- f) Divination
- g) Faith healing
- h) Metaphysics

7.2 Categories of ATMP

The ATMP in countries of the African Region may be classified into the following categories:

a) Lay healer

- b) Trainee traditional herbal medicine ingredient seller
- c) Traditional herbal medicine ingredient seller
- d) Trainee herbal medicine practitioner
- e) Traditional herbal medicine specialist practitioner graded into junior, senior and grand master
- f) Traditional herbal medicine general practitioner graded into junior, senior and grand master.

7.3 Skills and qualifications of ATMP

Requirements for the practice of ATM in terms of skills and qualifications vary from country to country. Some of them, which countries may wish to consider adopting, are spelled out as follows:

- a) The minimum level of education for all ATMP should be the primary school leaving certificate;
- b) The minimum age of practitioners should be 18 years;
- c) ATMP must be a member of a recognized Association of Traditional Medicine Practitioners in the community where he/she practises;
- d) Every ATMP must have successfully undergone the attestation procedure stipulated for registration by the association of ATMP in accordance with guidelines provided by the appropriate National Authority.

7.4 The skills required of ATMP

The skills required for the practice of African traditional medicine also vary from country to country. However, in some countries, the following minimum requirements are applied.

- a) an ATMP shall be able to recognize at least 30 different herbs;
- b) a general herb seller shall be able to recognize at least 50 herbs while those selling herbs for specific ailments must be able to identify a minimum of 10 herbs that can be used to treat those specific ailment(s);
- c) an ATMP who administers herbs shall be able to submit at least two medicaments prepared and used by him, so that they can be tested for efficacy (patent rights agreements should be signed as appropriate);
- d) practitioners who are traditional surgeons shall limit themselves to the practice of non-invasive surgery, i.e. surgery not beyond skin deep;
- e) all ATMP, regardless of their mode of practice or their skills, shall conduct their practice within the limits of the law.

7.5 Good practices in African Traditional medicine and Quality assurance

7.5.1 Record keeping and documentation

These should include:

- a) Scope of practices
- b) Effectiveness
- c) Case management
- d) Complications resulting from treatment
- e) Sale of herbs or products within the limits of the law
- f) Continuing education and experience

7.5.2 Feasible guidelines for monitoring requirements for the practice of African Traditional medicine

These should include:

- a) Registration and accreditation evidence of valid registration displayed on practice premises
- b) Re-certification (if stipulated as a requirement for valid current registration)
- c) Monitoring of facilities, instruments and practice environment
- d) Records of drug preparation/surgical operation procedures

Records of patient output (quantitative and qualitative) e)

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