



**MESSAGE OF THE DIRECTOR GENERAL OF THE
WEST AFRICAN HEALTH ORGANISATION (WAHO)**

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AFRICAN TRADITIONAL MEDICINE DAY

31 August 2022

- Hon. Ministers of Health of ECOWAS member states
- Practitioners of Traditional Medicine and Conventional Medicine
- Representative of the regional West African Colleges
- Distinguished colleagues in the academia and health care delivery,
- Representatives of Universities and research institutions
- Professional Colleagues, members of the media, ladies, and gentlemen

I bring you Greetings from the President of the ECOWAS Commission, His Excellency Dr. Omar Alieu Touray, and from the West African Health Organization (WAHO).

It is my distinguished pleasure to deliver this message as we mark this year African Traditional Medicine Day today 31st August 2022 with the theme **‘Two Decades of African Traditional Medicine Day: Progress towards achieving Universal Health Coverage in Africa’**.

Health is a fundamental human right. Humanity’s failure to provide Universal Health Coverage (UHC) is a violation of this right and must be addressed as a top priority. This can only happen when the ability to detect illnesses and outbreaks is made an integral part of it. Medical science provides clues that are key in the diagnosis and treatment of disease or injury, and Human Resources for Health and Research (including traditional medicine) are key to the major prognosis, treatment, and care of the population especially at the grassroots.

Forty years ago, precisely on 12th September 1978, a total of 134 countries gathered in Almaty (Alma-Ata) in Kazakhstan (Central Asia) and pledged through a declaration to assure “Health for All” by the year 2000. They failed to deliver on that pledge. Today, at least 400 million people have no access to basic medical care, and over 40% of the world’s population lacks social security protection.

Communicable and non-communicable diseases cause millions of deaths every year, increased billions of healthcare expenditures, and consequently increase trillions of economic losses at a global scale. However, some of the new range of communicable disease threats such as COVID-19, monkey pox, Ebola, influenza, severe acute respiratory syndrome (SARS), Middle East respiratory syndrome (MERS), the looming spectre of rising antimicrobial resistance (AMR), dengue, and Zika have challenged global health organization to provide a better health system to the world.

Conjointly, these known and unknown infectious diseases not only jeopardize human health but also endanger numerous economic and social prosperity. This is because of the lack of a single high-level entity that may have an eye on potential threats (caused by biological, accidental, or naturally occurring attacks, etc.), as well as on the network organization tasks with their vindication, investigation, and deterrence.

As we may aware, our region's health indices remain poor despite years of implementation of many health sector initiatives. Several years after the Ouagadougou Declaration on Primary Health Care and Health System in Africa: Achieving Better Health for Africa in the New Millennium (28-30 April 2008), our health systems remain fragile with several challenges, notably inadequate financing, weak surveillance systems, poor public health infrastructure, and critically inadequate human resource for health capacity. Using the minimum threshold of 2.28 health care professionals per 1,000 population, a World Health Organization survey in 2017 reported that 57 countries in the world had critical shortage of health workers. All 15 Member States of ECOWAS were amongst the 57, with the average health care professional density in the region being 0.73 (range 0.05 – 1.97) per 1,000 population.

To address this massive gap, countries need to invest in vaccine procurement, human resources for health (including Traditional Medicine), mobile or tele health, accurate prognosis, and diagnosis to cascade a sustainable, connected, integrated laboratory networks, procure quality diagnostics, and train more researchers in traditional medicine. We cannot therefore successfully address the health agenda in the region without addressing the critical shortage of human resource capacity for health. Some Member States have adopted pragmatic measures to improve the utilization of health professionals to achieve better health outcomes, but the implementation has been slow, with variable outcomes. Issues related to health professions and health policy formulation, relevance of education and training curriculum, continued professional development, inter-professional conflict and staff retention have continued to inhibit progress.

The use of Medicinal plants for treatment of diseases dates to the history of man. Medicinal plants therefore constitute a vital resource that can be harnessed for both health and socioeconomic benefits. However, the advantages of traditional medicine have been largely ignored in many quarters due to concerns about their quality, safety and efficacy, non-standardised dosages and limited scientific evidence.

Moreover, the World Health Organization (WHO) made proposals to the World Health Assembly in 1988 which was adopted as resolution WHA41.19 on Traditional Medicine. The resolution emphasized the need for international cooperation and coordination to establish a basis for the conservation of medicinal plants, to ensure that adequate quantities are available for the use of future generations. This resolution formally brought the rational and sustainable use and conservation of medicinal plants into the mainstream of public health policy today. As a follow up to this, many countries in the African region had since used the adopted tools through their national policies on medicinal plants conservation to cultivate new medicinal plants varieties into scientific information and inventories.

I am also pleased to inform you that at the 22nd Ordinary Session of the ECOWAS Assembly of Health Ministers held in Abuja, Nigeria in November 2021, the Honourable Ministers of health approved the establishment of the Advisory Committee and Steering Committee for

the WAHO Traditional Medicine programme. This reflects its desire to empower you as key partners; for promoting rational Traditional Medicine for its ultimate institutionalisation in national health systems. Sustaining this partnership obviously calls for enhanced collaboration between Traditional and Conventional Medicine practitioners, as shown by all the successful experiences in this area on the continent and beyond. I believe with this approval given by the Assembly of Health Ministers, the WAHO Traditional Medicine programme is better positioned to reach out to the countries for maximum population impact. For this great effort, the scientific and technical expertise available in the ECOWAS region constitutes a major asset in the capitalisation of human resources to be mobilised for an efficient and effective contribution of Traditional Medicine into the management of priority diseases, particularly the emerging and re-emerging diseases.

WAHO has also sponsored the production of the first and second West African Herbal Pharmacopeia which provides in detail the relevant information on the toxicity, identity and purity, macroscopic and microscopic characteristics, plant description, ethnomedical uses; scientific and clinical safety of available botanical medicine in West Africa. Indeed, across Africa, natural remedies are increasingly in demand for research and development to improve access to quality, essential medicines. It is for this reason that as part of its 2023 Work Plan for Traditional Medicine, WAHO intends to stimulate a partnership with the region's plant medicine research centres with a view to strengthening their capacities to enable them to focus on the production of plant medicines with proven efficacy.

The West African Health Organization at our own level will continue to be proactive and working with different organizations and partners to implement the decisions of the ECOWAS Heads of State and Government on all health matters in the region including training, capacity development and research on providing access to treatment of all emerging and re-emerging diseases and health conditions. We will spare no effort in supporting research and development of plant medicines to ensure their rational use for the benefit of the ECOWAS population.

In conclusion, I would like to extend my sincere gratitude to the Honourable Ministers of Health for their support to WAHO, and to all those who have contributed, directly and indirectly to promotion of traditional medicine in West Africa for access to health care and improvement of the health of our population at the grassroots level.

Long live African Traditional Medicine! Long live WAHO!! Long live ECOWAS

Thank you very much! Merci beaucoup!! Muito Obrigada!!