Plants as players in the health care system in South Africa. Lessons learned from South Africa

Professor Diana Gibson
University of the Western Cape
Department of Anthropology and Sociology
RASH: Research in Anthropology and Sociology of Health
Background

• After 1993 - SA government embarked on consultation to develop IKS Policy
• 1996 - the CSIR & Portfolio Committee (A,S&T) commissioned 9, HD universities to audit technologies & knowledge used by poor & marginalised to subsist
• Task team - develop IKS policy draft
• Ring fenced finding for research on IKS - NRF
IKS Policy

Adopted in 2004.

The policy:

• affirms & promotes African cultural values and identity in time of globalization
• will develop practical procedures to advance services provided by IK holders and practitioners
• will stimulate IK to enhance employment and wealth creation
• will promote intersections with other systems of knowledge
Contestations concerning IKS

- Meaning and basic assumptions about knowledge itself - thinking in dichotomies
- IKS as a form of social and cognitive justice
- Knowledge diversity debated - different epistemologies assessed on ability to advance understanding – ask how knowledge is produced?
Current developments regarding IKS (2014)

- Bioeconomy
- Epistemology
- Climate Change
- Women
- Energy Practices of Khoi, Nama, Griqua, San communities
- Shifting boundaries of knowledge production
IKS 2015

• Publication of draft Protection, Promotion, Development and Management of Indigenous Knowledge Systems Bill in Government Gazette

• as well as a related process of public consultation.
Because of plant diversity, SAy a focal point for indigenous medicinal plants (TM)

In literature, policies, discussions epistemological plurality between traditional medicine (IKS) & science - as dichotomous.

Science (medical, pharmaceutical) represented as neutral & apolitical.

IKS and TM constituted as cultural and ideological (Green 2008a,b; 2012).
Own research
Study of TM

UKZN Muti lab a first

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The School of Science and Technology is pleased to announce the opening of the first laboratory for the study of Muti, a traditional healing practice in South Africa. The lab, located in the campus of the National University of South Africa, is equipped with state-of-the-art technology and is open to students and researchers interested in the field of traditional medicine. The lab will be directed by Dr. Mpho Ramabulana, a renowned expert in the field of Muti. The lab is expected to attract students from across the country and internationally, creating a unique opportunity for research and collaboration in this important field. The lab will be open for visits by the public on Saturday, 20 March, from 10 am to 4 pm.
Plant medicines on the agenda

- Linked to wider nation-building project
- Situate SA as leader in field
- Advance field of TM
- Promote TM for the development of a bio-economy.
Plant trade
Knowledge holders?
Research and trials

Lessertia trial team

Umckalaobo
Policies and regulation…

- Directorate of Traditional Medicine
- African Traditional Medicine Day.
- National Drug Policy of 1996
- Medicines and Related Substances Amendment Act (no 72 of 2008)
- Traditional Health Practitioners Act (22 of 2007)
- Interim Traditional Health Practitioners Council in 2013.
Plant medicine contestations

HIV/AIDS controversy

Plant medicine controversy
Plants used and traded in Western Cape

Lessertia frutescens: cancer bush: diabetes, high blood pressure, immune modulator

Leonotus leonorus: wilde dagga: colds
Oedera squarrosa (L.)
Anderberg & Bremer: Koorsbos: cold

Salvia Africana corulea:
Bloublomsalie: cold, high blood pressure

Tagetes minuta:
Koebiebos: diabetes

Nepeta cataria:
Kattekruip: high blood pressure, cold
Aloe ferox: bitter
aalwyn: diabetes, skin conditions

Monoculus monstrosus: skaapbos: high blood pressure, diabetes

Elytropappus rhinocerotis (L.f.) Less.: Renosterbos: high blood pressure

Sceletium tortuosum (L.) N.E. Brown[: kougoed: diabetes: stress]
Protection of IK

• Draft Protection of traditional Knowledge Bill (2013) – currently under discussion
• National Environmental Management: Biodiversity Act 10 (2004)
• Bioprospecting, Access and Benefit Sharing Regulations (2008)
• give e.g. holders of traditional medicinal plants knowledge some rights to engage, (free, prior and informed consent) with users (e.g. phrmaceutical companies) on of their indigenous biological resources and traditional knowledge.
• can also enter into benefit sharing agreements.
Lessons learned

• Political will
• Policy and Strategy
• Research
• Auditing, Documenting, Preservation
• Legislation
• Human Resources and Institutional capacity Building