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Foreword:

The people of Liberia stepped into the moment of the privilege to enjoy ten years of peaceful co-existence and stability after fourteen years of civil conflict which ended in 2003. This National Traditional Medicine Policy constitutes a demonstration of our joint commitment and willingness to work for a more promising future.

Liberia is now privileged to live in a peaceful and orderly environment that gives all Liberians the opportunity to design strategies and plans that will help the entire nation to make progress. The mission of the team that developed the National Traditional Medicine Policy and Strategy (NTMP&S) is to reform and integrate quality, accessible, equitable and sustainable traditional medicine in the healthcare service delivery system for all people in Liberia. The process of formulating this document was carried out with enthusiasm, dedication and proficiency.

It is our hope that the National Traditional Medicine Policy and Strategy will become an inspiring guideline for Liberians, partners and the Traditional Medicine workers in implementing and furthering the needed reforms in our system. The Division of Complementary Medicine (DCM) Policy will assist in reaching our goals.

Continuous hard work, consistent prioritization, and generous external support are needed to achieve the policy goal and objectives. The Ministry of Health through the Division of Complementary Medicine and the Liberia Medical and Dental Council (LMDC), the Complementary Board and the Traditional Medicine Federation of Liberia (TRAMEDFOL) share this vision with other stakeholders.

The National Traditional Medicine Policy and Strategy is aligned with the Ministry of Health and the Government of Liberia decentralization policies and strategies. A trained educated, skillful staff must be the foundation for increasing access to quality traditional medicine services. The essential components of the policy are: 1) leadership and governance, 2) building human resource capacity, 3) financing, 4) botanical research and development; and 5) manufacturing and infrastructure.

We are grateful to the Government of Liberia and other partners that provided the funding to develop this National Traditional Medicine Policy and Strategy and sincerely thank all those who have spent valuable time preparing this document. We are confident that the implementation of the National Traditional Medicine Policy and Strategy (2015-2019) possible and essential. We ask that you join us in our journey towards transformation and the development of our traditional medicine care program. This document constitutes the basis for the practice of Traditional and Complementary Medicine in Liberia.

Dr. Walter T. Gwenigale
Minister
Ministry of Health

Acknowledgements:

The National Traditional Medicine Policy and Strategy (2015-2019) was achieved through a lengthy and consultative process. The core team was led by the Honorable Minister of Health Dr. Walter T. Gwenigale. Today we proudly present this policy to the Government of Liberia and all its stakeholders that participated in its development.

The Ministry of Health expresses its appreciation to the many organizations and individuals that provided assistance and support in planning, developing and finalizing the National Traditional Medicine Policy and Strategy for Liberia. The development of the National Traditional Medicine Policy is the result of the work and guidance of the Liberia Medical Dental Council (LMDC) and the following personalities and institutions:

Dr. Bernice T. Dahn, Deputy Minister for Health Services/Chief Medical Officer, Republic of Liberia, Dr. Saye Dahn Baawo, Assistant Minister for Curative Services, Mr. Benedict C. Harris, Assistant Minister for Policy and Planning, Dr. Edwin S. Quoibia, Director, Division of Complementary Medicine, Dr. Moses G. Y. Pewu, Deputy Resource Director, LMDC, Dr. Nyaquoi K. Kargbo, Registrar General, LMDC, Rev. Edwin Z. Suwon, Assistant Director, Division of Complementary Medicine, Dr. John K. Reed, Board Chairman, Division of Complementary Medicine and Mr. Anthony Osaka Rogers, Computer Analyst/Secretary Division of Complementary Medicine, etc.

To all these people and institutions we owe special thanks, and would like to encourage their continual cooperation and support to the National Traditional Medicine Policy and Strategy (2015-2019).

Acronyms:

CAMPs	Complementary Alternative Medicine Practitioners
CHS	Community Health Service
CHT	County Health Team
CHV	Community Health Volunteer
DCM	Division of Complementary Medicine
EPA	Environmental Protection Agency
ECOWAS	Economic Community of West African States
FDA	Forestry Development Agency
GFATM	Global Funds for AIDS, Tuberculosis and Malaria
INGO	International Non-Governmental Organization
IPR	Intellectual Property Rights
LMDC	Liberia Medical and Dental Council
MOH	Ministry of Health
MOA	Ministry of Agriculture
MOI	Ministry of Internal Affairs
M&E	Monitoring & Evaluation
NDS	National Drugs Service
NTMP&S	National Traditional Medicine Policy and Strategy
PEC	Professional Ethics Committee
TAMP	Traditional Alternative Medicine Practitioners
TMPs	Traditional Medicine Practitioners
TRAMEDFOL	Traditional Medicine Federation of Liberia
UN	United Nations
WAHO	West African Health Organization
WHO	World Health Organization
WHO/AFRO	World Health Organization/African Region Organization

Summary:

Liberia has initiated short, medium and long term economic growth strategies to move the country towards the achievement of its vision of a middle income country by 2030. To support this vision, the Ministry of Health has developed a National Traditional Medicine Policy and Strategy (2015-2019) to complement conventional medical practices in Liberia. The process to develop this policy was consultative and participatory at all levels of the stakeholders within the country. It included a detailed situational analysis of traditional medicine in Liberia and a desk review of relevant documents and the regional policy framework on the alignment of WAHO countries policy harmonization. The essential components of the policy include 1) leadership and governance, 2) building human resource capacity, 3) financing, 4) botanical research and development; and 5) manufacturing and infrastructure.

To achieve Liberia's vision of becoming a middle-income country, the goal of this policy is therefore to improve the health and social welfare status of the population of Liberia on an equitable basis. Sustained leadership, stakeholders' commitment, resources and efforts are needed to achieve this through the objectives as below:

Objective 1: Strengthen leadership and governance for traditional medicine practices in Liberia.

Objective 2: Increase mobilization of adequate domestic and external sustainable financial resources to support traditional medicine practices

Objective 3: Improve human resource planning, development and management for traditional medicine practice in Liberia;

Objective 4: Ensure the establishment of traditional medicine infrastructure;

Objective 5: Strengthen and develop research in the field of traditional medicine.

The system shall be based on the three main levels of service delivery including primary, secondary and tertiary. The distinct package of traditional medicine will support the Essential Package of Health Services (EPHS); the cornerstone of the national strategy to improve the health and social welfare status of all people in Liberia. Commitment to this policy by all stakeholders is a precondition for its success.

Though the country presently faces the largest Ebola virus outbreak in history accounting for over 6,525 cases and 2,697 deaths including a total number of 157 deaths among health care workers, a lot of gains have been made in the health sector. Currently, total fertility rate has decreased from 5.2% to 4.7% children per woman between 2007 and 2013. Infant mortality rate is 54 deaths per 1000 live births and under-five mortality is 94 deaths per 1000 live births. Fifty-seven percent of all deaths to children under five take place before a child's first birthday in Liberia.

Therefore, the policy will be updated and enriched by new elements as implementation lessons are learned and knowledge accumulates. Based on this policy and its guiding principles and strategic approaches, sub-sector policies shall be maintained to provide a detailed understanding and policy guidance across a multitude of inter-related sub-sector issues. Finally, the National Health and Social Welfare Plan (2011-2021) is the instrument devoted to the implementation of this policy.

1.0 Introduction:

1.1 Policy Context

The development process of the National Traditional Medicine Policy and Strategy (2015-2019) comes at a critical point in the history of the Liberian health sector when the sector is in the process of reforms towards a more resilient sector by April 2015. The reform will consider the impact of the Ebola situation on the health sector and an assessment of the health system over the past three years (2011-2014) of implementation of the National Health and Social Welfare Policy and Plan (2011-2021)¹.

The Liberian health sector for the past nine (9) years has made significant strides towards the delivery of quality, equitable accessible health care services to its people. Recognizing that complementary medicine is an integral part of any health care delivery system, the National Health and Social Policy and Plan (2011-2021), mandates the development of guideline or framework to carry out evidenced based complementary medical practices within the country. The national policy states that the Ministry of Health (MoH) shall encourage research in the areas of complementary medicine in order to capitalize on its strengths and minimize weaknesses. It will foster collaboration between traditional and modern medicine in areas where one complements the other. It further goes on to state that as part of this process, the Ministry of Health will work with traditional practitioners to develop an operational framework and guideline for the delivery of complementary medical services².

The policy was developed through a consultative process coordinated by the Complementary Division of the Ministry of Health and the Liberia Medical and Dental Council including Complementary Board and the Traditional Medicine Federation of Liberia (TRAMEDFOL). Due to this thorough consultative process, the Ministry of Health is confident that the document incorporates the national consensus of all stakeholders within this sub-sector. The National Traditional Medicine Policy and Strategy is aligned with the Ministry of Health and the Government of Liberia's Decentralization Policies and Strategies. It also reflects the best information available at the time of the policy development. However, with the Division of Complementary Medicine and other stakeholders, the policy is liable to changes in future as situations unfold in the area of complementary medicine in Liberia.

1.2 Purpose & Scope

The National Traditional Medicine Policy and Strategy is intended to serve as a guide for Liberians, other partners and traditional medicine workers in implementing and furthering the needed reforms of traditional medicine in Liberia. The policy has been developed to integrate traditional medicine practices with the conventional western medical practices within Liberia's health system. It focuses attention on leadership and governance, financing, human resources, research and development including infrastructure and manufacturing.

¹ *Ministry of Health Post Health System Ebola Plan Development Concept: December, 2014.*

² *National Health and Social Welfare Policy and Plan, 2011–2021, Ministry of health and Social Welfare, Monrovia, 2011*

The policy will apply to all institutions, organizations. Individuals and other stakeholders involved with traditional medicine in the country. The application of this policy extends but will not be limited to Herbalist, Homeopath, Acupuncturist, Ayurvedic, Osteopath, Therapeutic Massager, Drugless Therapist, Bone Setter, Traditional Midwife, Chiropractic, Steam Bath, and Food Supplement.

2.0 Situational Analysis:

2.1 Demographic Status

The people of Liberia stepped into the moment of the privilege to enjoy ten years of peaceful co-existence and stability after fourteen years of civil conflict which ended in 2003. By 2013, Liberia was gradually moving up the development ladder ranking among the top 10 countries with the highest GDP growth rate. Coupled with this, the Government of Liberia has made significant strides to improve the livelihood of its citizenry in various areas of human development. Though the country presently faces the largest Ebola virus outbreak in history accounting for over 6525 cases and 2697 deaths including a total number of 157 deaths among health care worker; a lot of gains have been made in the health sector³. Currently, total fertility rate has decreased from 5.2% to 4.7% children per a woman between 2007 and 2013. Infant mortality rate is 54 deaths per 1000 live births and under-five mortality is 94 deaths per 1000 live births. Fifty-seven percent of all deaths to children under five take place before a child's first birthday in Liberia⁴. Additionally, fifty-six percent of births were delivered in health facilities, a level much greater than the thirty-seven percent reported in 2007.

2.2 Leadership and Governance: Leadership and governance is crucial to drive adopted policies. In the traditional medical practices sub-sector there exists major challenges in the day to day leadership and governance of traditional medical practices within the country. These major challenges range from assessing and evaluating the credentials of traditional medical practitioners and herbal facilities for licensure and certification. Setting up guidelines for measurement of herbal medical products and the elaboration of a framework that will enable the formulation of appropriate official documents such as patent rights to protect and regulate the operations of traditional medicine also remain a challenge.

Other issues include:

- The lack of well-developed rules to regulate the practice of the Traditional Medicine in Liberia;
- The lack of an acceptable standard of practice for traditional medical practice;

³ (World Health Organization, 2014a)

⁴ *Demographic and Health Survey Liberia, Liberia Institute for Statistics and Geo-Information Services, Ministry of Health and Social Welfare, Monrovia, 2013*

- The lack of a policy to preserve medicinal plants and animals in Liberia; and
- The lack of application and enforcement of national and international laws on the preservation of bio-diversity and endangered species.

2.3 Financing: Currently, there is inadequate investment from the Government of Liberia's overall budget to finance and ensure the active involvement of Traditional Medicine Practitioners (TMPs) in the national health care delivery system. Budgetary allocations to implement traditional medicine programmes have not been substantially forthcoming. The Division of Complementary Medicine relies greatly on external funding which are secondary or supplementary to normal government expenditures. There still exists the issue of the lack of financial resources for public education, information and for the training of TMPs through both the formal health system and associations of TMPs.

2.4 Human Resources: Human resources for health is an issue that does not only apply to traditional medicine practices but to the entire health system. Capacity issues of human resources for service delivery are current challenges faced by the sector. As with the conventional medical practice, the traditional medical practice faces the shortage of human resources. Traditional and conventional health practitioners lack adequate education and training in the usage of herbal medicines. There exist no training institutions to train traditional medicine practitioners and the availability of scholarships to encourage students to pursue tertiary education and other trainings in traditional medical practices is still far-fetched.

2.5 Infrastructure: Of the multiple issues faced by the practice of traditional medicine in Liberia, infrastructure to facilitate the practice of traditional medicine remains a serious challenge. There is not a single traditional research center within the country let alone a medicinal factory.

2.6 Research & Development: There is currently no traditional medicine research policy in Liberia least to say that one it is being implemented by a multidisciplinary medicine research council. Traditional medical practitioners need to be dignified. They are inadequately compensated and not duly acknowledged. National authorities to support multidisciplinary clinical studies on the safety and efficacy of traditional remedies in the treatment or management regimens of priority conditions are non-existent or very weak and academic and research institutions have not been encouraged or funded to take on initiatives in these efforts.

3.0 Policy Orientations:

3.1 Policy Foundations: (mission, vision, and goal)

- Mission: To reform and integrate quality, accessible, equitable and sustainable traditional medicine in the healthcare service delivery system for all people in Liberia.
- Vision: A functional traditional medicine system decentralized and practiced alongside modern medicine at all public health facilities in Liberia.
- Goal: To improve the health status of the inhabitants of Liberia.

3.2 Guiding Principles:

The Traditional Medicine Policy and Strategy will be implemented with four guiding principles greatly adhered to by the Ministry of Health and its stakeholders.

The principles include:

1. **Secrecy and confidentiality:** This policy shall subject traditional medicine practitioners to the requirements of the law to observe strict confidentiality as regards a patient's' diseases, the types of traditional medicine used or any such information that a patient may disclose to them in the course of consultation. A patient's information such as history and other records will be kept under strict secrecy except as otherwise required by law or for the purpose of settlement of financial re-imbusement. This secrecy shall be exercised in regards to all other confidentiality information in their possession.
2. **Sustainability:** The principle emphasizes the need for domestic investment into the implementation of this policy. It promotes the development of local and systemic financial and human resources capacities to sustain the policy.
3. **Decentralization:** The MoH has completed a functional review that mandates a lean Ministry with most functions of service delivery being de-concentrated at the county and district levels within the system. This policy will align with these structural arrangements enshrined with the GoL and the sector decentralization policies.
4. **Partnership:** In order to enable the participation and ascertain actions in accordance with this policy, the GoL will continue to engage partners and stakeholders to create continuous working relationships for the implementation of the policy. At all times consultations will be held with stakeholders to ensure full participation.

3.3 Policy Objective:

The policy objectives of the National Traditional Medicine Policy and Strategy (2015-2019) include:

Objective 1: Strengthen leadership and governance for traditional medicine practices in Liberia.

Objective 2: Increase mobilization of adequate domestic and external sustainable financial resources to support traditional medicine practices

Objective 3: Improve human resource planning, development and management for traditional medicine practice in Liberia;

Objective 4: Ensure the establishment of traditional medicine infrastructure;

Objective 5: Strengthen and develop research in the field of traditional medicine.

These policy objectives will further support the Ministry of Health overall policy objectives which include:

1. Increase access to and utilization of a comprehensive package of quality health and Social welfare services of proven effectiveness, delivered close to the community, endowed with the necessary resources and supported by effective systems;

2. Make health and social welfare services more responsive to people's needs, demands and expectations by transferring management and decision-making to lower administration levels, thereby ensuring a fair degree of equity;
3. Make health care and social protection available to all Liberians, regardless of their position in society, at a cost that is affordable to the country⁵.

3.4 Enabling Environment:

The MOHSW will strengthen the enabling environment for traditional and complementary medicine in Liberia by investing the legal framework, regulation and enforcement.

3.4.1 Legal Framework

Traditional and complementary medicine, whether in the public or the private sector, is governed by Title 33 of the Liberian Code of Laws Revised, also known as the Public Health Law and other regulations that may be established by independent agencies.

3.4.2 Regulation

The Ministry of Health and other independent agencies that may be created (as mandated and, if necessary or desirable, in collaboration with national judicial, regulatory and enforcement authorities) are to promote the monitoring and reinforcement of the Public Health Law, as the same may be amended or revised from time to time, in the following areas, including but not limited to: professional public, private for profit and private not-for-profit health institutions, departments, programs and facilities.

3.4.3 Enforcement

In conjunction with the judicial and regulatory enforcement authorities, the Ministry of Health will promote the monitoring and enforcement of the Public Health Law and other regulations that may be established. Mechanisms will be established to ensure compliance with existing and traditional and complementary medicine legislation, regulations, policies, standard operating procedures, protocols and guidelines.

4.0 Strategic Approach:

Objective 1: Strengthen leadership and governance for traditional medicine practices in Liberia.

Strategies:

1. The MoH shall establish a National Traditional Medicine Council that will have perpetual succession, a common seal and may sue and be sued in its own name; and
2. The Division of Traditional Medicine shall coordinate and work collaborative with stakeholders and other GoL line ministries and agencies to develop regulations, standard operating procedures, guidelines, registry, traditional medicine practitioners' database, and effect intellectual property rights to enhance traditional medicine practices in Liberia.

1. ⁵ *National Health and Social Welfare Policy and Plan, 2011–2021, Ministry of health and Social Welfare, Monrovia, 2011*

Objective 2: Increase mobilization of adequate domestic and external sustainable financial resources to support traditional medicine practices.

Strategies:

1. The Division of Complementary Medicine shall develop a costed operational plan for use as an advocacy and working tool to increase domestic investment in traditional medicine practices;
2. The MoH shall advocate for specific budget lines within its overall budgetary allotment from the Ministry of Finance and Development Planning (MFDP) to support complementary and traditional medicine; and
3. The Division will continue to align with regional partners (WAHO, MRU, ECOWAS, etc.) to secure external funding and other resources to support traditional medicine practices in Liberia.

Objective 3: Improve human resources planning, development and management for traditional medicine practice in Liberia.

Strategies:

1. The MoH shall prioritize short and long term training programmes and scholarships for traditional medicine practitioners in the country;
2. The Division of Traditional Medicine shall liaise with the Human Resources for Health (HRH) and the Health Management Information System (HMIS) Units to integrate traditional medicine practitioners' database within the integrated Human Resources for Health Information System (iHRIS);
3. The Division of Traditional Medicine shall identify the training needs of practitioners for short and long term training.

Objective 4: Ensure the establishment of traditional medicine infrastructure

Strategies:

1. The MoH shall identify and secure a land space for the establishment of the country's first traditional medicine research center; and
2. The MoH shall ensure the development of required infrastructure to facilitate the work of the traditional medical practices within the country.

Objective 5: Strengthen and develop botanical research in the field of traditional medicine

Strategies:

1. The Division of Complementary Traditional Medicine shall collaborate with the Research Unit of the MoH and other partners to develop research guidelines to encourage research by individual and institutions in traditional medicine;
2. The Division shall work with Research Unit/MoH to conduct a knowledge attitude and practice (KAP) survey to establish a baseline of the knowledge of the Liberian population on traditional medicine and its use in the country.

5.0 Implementation Arrangements:

5.1 Role of the Ministry of Health

The Ministry of Health and other government agencies and line ministries will assume substantial roles in the implementation of the National Traditional Medicine Policy and

Strategy. The Ministry will also have the responsibility to finance the implementation of the policy. Including these responsibilities it will also:

1. Establish safety and educational standards;
2. Finance administrative structure, research and training at the three levels of the health system;
3. Establish registration and regulatory rules and agencies; and
4. Ensure quality measures including laboratory sources, intellectual property rights protection and promotions.

To fully achieve these roles and responsibilities by the MoH and other partners, the Division of Complementary Medicine will coordinate the day to day operations of the policy implementation under the direct supervision of the Assistant Minister for Curative Services and Deputy Chief Medical Officer (DCMO), Republic of Liberia within the Department of Health Services. This division will maintain the necessary expertise to fulfill its core functions and:

1. Establish a Complementary Medicine Technical Working Group that will meet monthly;
2. Collaborate with and strengthen the Liberia Medicine Federation of Liberia;
3. Establish policies, guidelines and regulations related to traditional medicine, in collaboration with the Office of General Counsel at the Ministry of Health (MoH);
4. Coordinate donor support for TM with- the MOHSW's External Aid Coordination Unit; and
5. Communicate with other branches of Government and other line ministries and agencies,

6.2 Monitoring and Evaluation:

To monitor and evaluate the policy implementation, a detailed monitoring and evaluation framework will be developed by the Division of Complementary Medicine in collaboration with the Monitoring and Evaluation Unit within the Department of Planning, Research and Development. The Division will also create linkages with the HMIS and DHIS to incorporate indicators that will be used to measure progress towards the attainment of the policy goal and objectives at the district, county and central levels.

5.3 Policy Implementation:

5.3.1 Risks:

Including other unforeseeable risks, the policy and plan implementation will consider the following:

1. That socio-economic and political instability will hinder policy and plan implementation
2. That internal and external (regional) emergencies may lead to policy and plan under funding or complete closure; and
3. The unavailability of financial, human and other resources to implement policy and plan

5.3.2 Assumptions

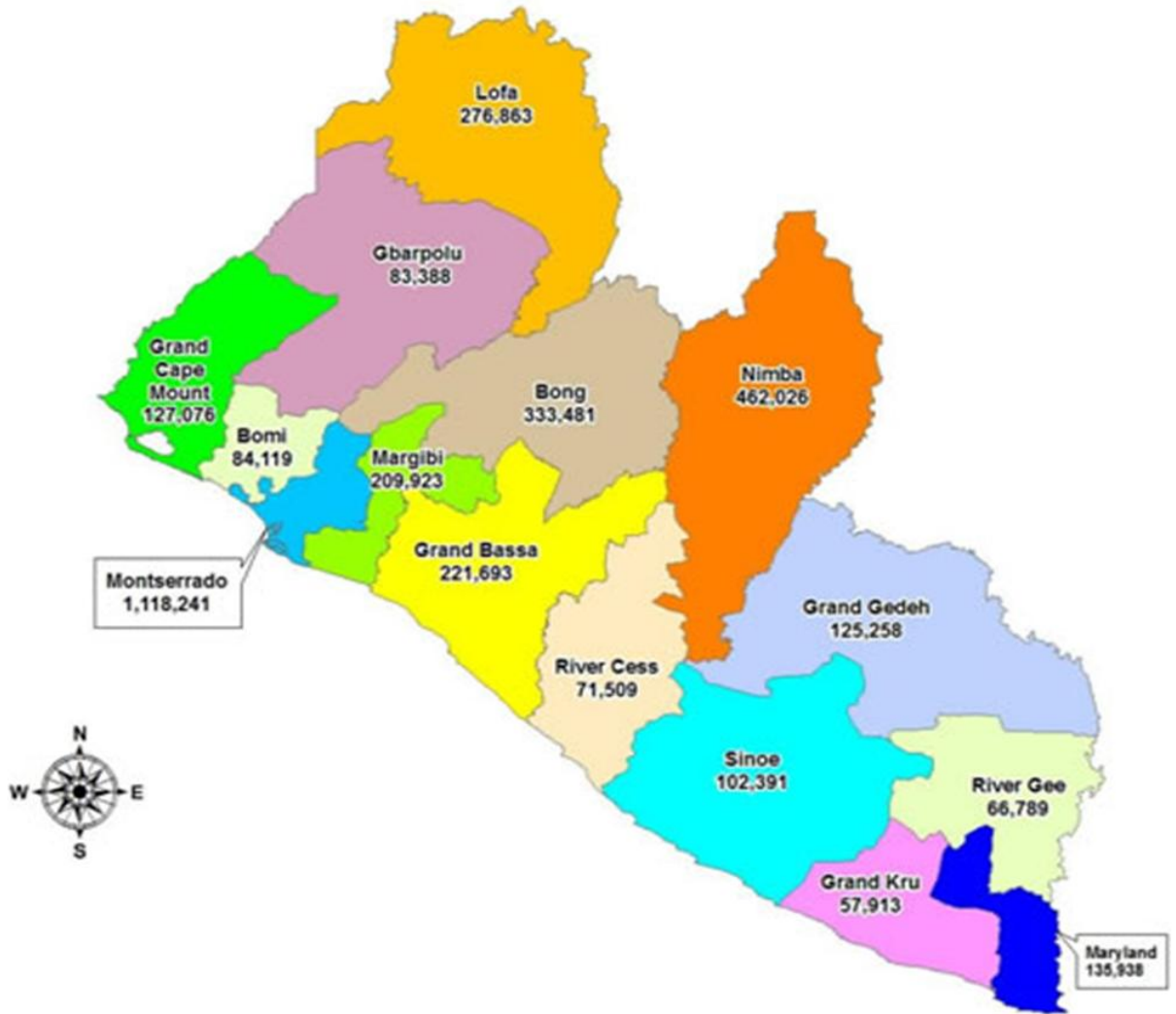
The policy and plan implementation is based on the following assumptions:

1. That national and regional stability will prevail and be sustained overtime to provide adequate environment for policy and plan implementation
2. That healthcare delivery and other infrastructure (roads, telecommunications, other utilities) will improve to facilitate service delivery in rural and hard to reach communities in Liberia;
3. That GoL economic recovery and fiscal space will improve overtime to enhance the increase of investment in traditional medical practices
4. That appropriate adjustments to the policy and plan will be made as situations unfold in future.

Annex 1: List of References:

1. *Demographic and Health Survey Liberia, Liberia Institute for Statistics and Geo-Information Services, Ministry of Health and Social Welfare, Monrovia, 2013.*
2. *Harmonized Traditional Medicine Policies and Regulatory Framework for ECOWAS Sub-region, 2007.*
3. *Ministry of Health Post Health System Ebola Plan Development Concept: December, 2014.*
4. *National Health and Social Welfare Policy and Plan, 2011–2021, Ministry of health and Social Welfare, Monrovia, 2011*
5. *Public Health Law - Title 33 - Liberian Code of Laws Revised*

Annex 2: Map of Liberia



ANNEX 3: DIVISION OF COMPLEMENTARY MEDICINE ORGANOGRAM

