The "Living Treasures" of the Traditional Medicine.

In Africa, the Traditional Medicine constitutes a very important element of the living cultural patrimony, deeply anchored in the history, in the culture and in the beliefs of the population, determining the attitudes and the behaviors in face of the personal, family and social events of the daily life. Beyond the only health problems, it participates in the local civilization and traditions, to the collective knowledge and attitudes, to the popular feelings and certainties.

The Traditional Medicine certainly concerns the traditional models of health and illness, but also the conception of the life and the death, the interpretation of the physical and metaphysic reality, the analysis of the daily experiences, the identification of the causes and the symptoms of the physical, mental, social and spiritual unbalance affecting the individuals and the society.

The practices of the Traditional Medicine existed in Africa before the arrival of the western medicine. They withstood the colonization in spite of the dispositions taken in this period to marginalize them.

Reservoir of knowledge, of philosophy, and of cosmogony still substantially not exploited, the Traditional Medicine not only offers some possibilities of effective and accessible treatments for the pathologies prevailing in the communities, but it also constitutes a national cultural inheritance, and a mean to connect the populations to their own history and their own culture.

In Mali, this cultural patrimony is very rich and diversified: every human collectivity, established on a territory, has a Traditional Medicine that is specific to the ethnic affiliations, to the history, to the cosmogony, to the ecosystem in which is living, and to the relationships interlaced in the time with other near or distant human groups.

As the major part of the cultural patrimony of Mali, it deals with a civilisation at the same time individual and collective, left to the oral means, often committed to the memory of persons to consider as "Living Treasures". Nevertheless, the inventory of these "Living Treasures" of the Traditional Medicine doesn't exist, neither a collective reflection on as to
valorize and to safeguard their knowledge and abilities and to transmit them to the future generations.

Beginning from the independence, Mali adopted a politics of valorization of the Traditional Medicine, according to the recommendations of the WHO. The creation of the National Institute of Phytotherapy and Traditional Medicine, inside the section Research and Control of the Division of Pharmaceutical Supply, is dated 1968. In 1973, this structure became National Institute of Research on the Pharmacopoeia and the Traditional Medicine (INRPMT) with the mission to study the medicinal plants and all other products and proceedings used in the Traditional Medicine. L’INRPMT was set under the authority of the Minister of the Public Health. In 1981, with the creation of the Malian Office of Pharmacy, the INRPMT became Division Traditional Medicine inside it. In 1986, the Division Traditional Medicine is attached to the National Institute of Research in Public Health and currently is a Department of the same Institute. The Department Traditional Medicine (DMT) it is a Collaborating Center of WHO in subject of Traditional Medicine from 1981.

Beginning from 1990, many Associations of Traditional Healers have been established. In March 2002, the delegates of the different associations gathered in a meeting decided to create the Malian Federation of the Traditional Healers and the Herbalists (FEMATH). The FEMATH currently counts more than 70 adherent associations in all the regions of Mali. In October 2006, the Government of Mali adopted a Document of National Politics of Traditional Medicine.

Certainly, the valorization of the Traditional Medicine in Mali can count on numerous assets. Nevertheless, one of the principal worries of the actors of the Traditional Medicine, that is the transmission of the traditional knowledge about health to the young generations, actually is not taken in account.

Really, in front of the evolution of the society, and of the urbanization, the traditional mechanisms of transmission of the knowledge don't work anymore. Before, the Traditional Healer chose, generally, in the family environment the most careful and respectful boy. This one stayed years and years close to the teacher: starting to pick up the medicinal plants in the brushwood, passing then to the preparation of the treatments and the overseeing of the patients. The formative journey began so in the infancy and continued up to the adult age with different initiation’ passages: before being cleared to practice the traditional art of healing for himself, the pupil had to show to have learned the knowledge of the teacher, to dominate the power of healing and to have acquired the wisdom to use this knowledge and this power with good intentions. Currently, the young people in the villages don't respect the old men anymore, thinking that their knowledge is old and useless. Somebody starts the training but, as soon as he has learned some good treatments, he abandons the village to
escape the control of the teacher, he dresses himself "to healer" and goes to the city for turning this knowledge into money: they have a little competency, not a lot of power and hardly no wisdom: it is they, in general, who walks from a town to another, crying inopportunely on the radios of proximity that they can recover from everything, above all from the incurable illnesses.

It is evident, therefore, that if we don't get to restore the traditional mechanisms of transmission of the knowledge or to identify the new ones, we risks to lose forever this living heritage of competencies and experiences that is a national property, belonging also to the whole humanity. Paraphrasing Amadou Hampâté Bâ, let us affirm that every old traditional healer that dies without transmitting his knowledge, is a whole pharmacopoeia that burns.

It is in this context that the present project sets himself to identify the "Living Treasures" of the traditional medicine, to honor them and to hock with them and with the associations of the Traditional Healers an operational reflection on as to assure the transmission of theirs knowledge.

The zone of intervention of this first pilot phase of the project is the District of Kolokani, located to 140 Km north of Bamako, capital of Mali and to 205 Km from Koulikoro, the regional capital. It is limited: to the north by the District of Nara; to the south by the District of Kati; to the west by the District of Diema; to the east by the District of Banamba. It includes 10 rural municipalities and 276 villages. It corresponds effectually to the historical and cultural region of the Beledougou, one of the cradles of the Bambara’s culture. The Beledougou is very reputed in Mali for the competence of his Traditional Healers. The surface is of 14.380 Km2s, with about 190.514 habitants, with a density of 13,25 habitants/Kms. The rate of natural increase gets up to 2%. The District is mainly populated (90%) from the Bambaras. The Peulhs and the Mauris follow.

From 1997, the promoters of Aidemet Ong are acting in Kolokani on the valorization of the resources of the local Traditional Medicine, particularly in the accompaniment of the associative dynamics of the Traditional Healers and in the implication of the traditional midwives in the struggle against the maternal and child mortality, with the support of different financiers partners: among others, the Italian Cooperation, the decentralized cooperation, Region Piemont and the Municipality of Messina (Italy), the European Union, the Program “Local Knowledge” of the World Bank, etc.

We count today in the District of Kolokani an Association of Traditional Healers for every Municipality, assembled in the Association of the Traditional Healers of the Beledougou (ATTB) established in 1998. The ATTB counts today 426 members, 67 of which are women (15,73%). We can affirm that in the District of Kolokani there is an organized Traditional Healer for every 446 habitants.

Indeed, Aidemet Ong has a well-established partnership with the actors of the Traditional Medicine of the District of Kolokani. It is for this that we decided to carry out this first phase test of the project in this District.

The estimated budget for a two year first experimental phase, during which we set to identify, to honor and to support about twenty of “Living Treasures of the Traditional Medicine” is of 46.450.000 Fs CFA, i.e. around 70.800 Euros. Aidemet Ong looks for technical and financial partners interested to undertake with us this fantastic challenge.