WHO Traditional Medicine
Strategy 2014-2023

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Overview of my presentation

- Background and progress in the last decade
- Major challenges
- The strategy and the implementation
Traditional and Complementary Medicine (T&CM)

Some popular systems/forms of T&CM:

- Ayurveda Medicine
- Chiropractic
- Homeopathy
- Naturopathy
- Osteopathy
- Traditional Chinese Medicine
- Unani Arabic Medicine
Background: utilization patterns

- **Traditional Medicine (TM) is one of the primary sources of health care.** For instance, the ratio of traditional healers to population in Africa is 1:500 whereas the ratio of medical doctors to population is 1:40,000. For millions of people in rural areas, native healers therefore remain their health providers.

- **Due to cultural and historical influences.** In some countries such as Singapore and the Republic of Korea where the conventional health care system is quite well established, 76 percent and 86 percent of the respective populations still commonly use TM.

- **T&CM as complementary therapy.** This is common in developed countries where the health system structure is typically well developed, e.g. North America and many European countries.
Background: demand and needs

- Over 100 million Europeans are currently T&CM users, with one-fifth regularly using T&CM and preferring health care which includes T&CM. There are many more T&CM users in Africa, Asia, Australia and North America.

- In India, there are 785,185 registered Ayurveda, Yoga, Naturopathy, Unani, Siddha and Homeopathy (AYUSH) practitioners and an estimated one million village-based, traditional AYUSH community health workers.

- In China, 907 million visits to traditional Chinese medicine in 2009 – 18% of all medical visits; 13.6 million traditional Chinese medicine inpatients – 16% of the total in all hospitals surveyed.
Background: demand and needs

- An extensive number of patients with multiple sclerosis resort to complementary and alternative medicine treatments: prevalence of use ranges from 41 percent in Spain to 70 percent in Canada and 82 percent in Australia.

- In China, the top five diseases for admission to traditional Chinese medicine hospitals in 2008: cerebrovascular accident, intervertebral disc displacement, haemorrhoids, ischaemic heart disease and essential hypertension.
Background: demand and needs

DG: “nearly a quarter of all modern medicines are derived from natural products, many of which were first used in a traditional medicine context. TM is thus a resource for primary health care, but also for innovation and discovery.”
Background: Progress since 2002

![Bar chart showing progress since 2002 in number of MS with TM policy, number of MS regulating herbal medicines, and number of MS with national research institute for TM.]

- Number of MS with TM policy:
  - 1999: 25
  - 2012: 69

- Number of MS regulating herbal medicines:
  - 1999: 65
  - 2012: 119

- Number of MS with national research institute for TM:
  - 1999: 19
  - 2012: 73
Background: regulation on practitioners

Regulations on T&CM practitioners (129)
Country reports, 2012

- With regulations on T&CM practitioners (56, 43.5%)
- With no regulations on T&CM practitioners (56, 43.5%)
- Not answered (17, 13%)

129

Background: education

Member States that provide T&CM education at university level
Source: country report

- 72 (56%) No T&CM education at university level
- 18 (14%) Not answered
- 39 (30%) With T&CM at university level

Total: 129
Challenges

Difficulties faced by Member States with regard to regulatory issues related to the practice of T&CM, multiple choice (129)

Country reports, 2012

- Lack of research data: 105
- Lack of mechanisms to control and regulate TM/CAM advertising and claims: 83
- Lack of appropriate mechanisms to control and regulate herbal products: 78
- Lack of appropriate mechanisms to monitor and regulate TM/CAM providers: 75
- Lack of financial support for research on TM/CAM: 68
- Lack of expertise within national health authorities and control agencies: 67
- Lack of mechanisms to monitor safety of TM/CAM practice: 65
- Lack of cooperation channels between national health authorities to share information about TM/CAM: 63
- Lack of mechanisms to monitor safety of TM/CAM products, including herbal medicines: 60
- Lack of education and training for TM/CAM providers: 58
- Other: 15

Number of Member States
Challenges

- Progress relating to regulation on herbal medicines is moving faster, while regulation on TM practice and practitioners is advancing at a slower rate.

- Member States where lack of knowledge in formulating national policy has led to a lack of regulations on TM practice and practitioners as well as a lack of integration of TM services into health service delivery and self-health care.
WHO related strategies

- WHO Traditional Medicine Strategy 2002-2005 and traditional medicine (TM) was included into WHO medicines strategies

- 2002: launch 2002-5 strategy
- 2003: first global survey on TM/CAM policies
- 2008: included in global strategy and action plan on PH, innovation and intellectual property
WHA62.13 Resolution on TM requests the WHO to update the WHO TM strategy 2002-2005 based on countries’ progress and current new challenges in the field of TM.

The major challenges and the needs of Member States in the area of T&CM have changed comparing to 10 years ago.
WHO TM Strategy: Goals

- Harnessing the potential contribution of T&CM to health, wellness, people-centred health care and universal health coverage

- Promoting safe and effective use of T&CM through the regulation, research and integration of T&CM products, practices and practitioners into the health system, as appropriate
WHO TM Strategy: Objectives and directions

2014-2023

Build knowledge base for management through policies
- understand and recognize role and potential
- strengthen knowledge base, build evidence and sustain resources

Strengthen quality assurance, safety, proper use and effectiveness by regulating
- products: monitoring and implementation
- practices and practitioners: education & training, skills development, services and therapies

Promote universal health coverage by integration
- capitalize on potential contribution to improve health services and health outcomes
- informed choice about self-health care
Implementation of WHO TM Strategy: Indicators for monitoring

- Member States reporting
- A national/provincial T&CM policy
- Increased governmental/public research funding on T&CM
- National regulation for T&CM products
- National/provincial regulation for T&CM practice
- National/provincial regulation/registration for T&CM practitioners
- National plan/program/approach for integrating T&CM service into national health service delivery
- Consumer education project/program for self-health care using T&CM

WHO
WHO TM Strategy: Monitoring the implementation

- Secretariat Report noted and draft resolution by EB 134
- Mid-term review of the progress
- Final review of the progress
- Make adjustment if necessary

WHA resolution on implementation of the strategy
WHA Resolution on Traditional Medicine

WHA67.18 adopted in May 2014 urges Member States:

- To adapt, adopt and implement, where appropriate, the WHO strategy as a basis for national T&CM programmes or work plans
- To develop and implement working plans to integrate TM into health services particularly primary health care services
- To report to WHO on progress in implementing the strategy
WHA Resolution on Traditional Medicine

WHA67.18 requests the Director-General of WHO:

- To facilitate Member States’ implementation of the WHO strategy, supporting their formulation of knowledge-based national policies, standards and regulations, and strengthening national capacity building.

- To provide policy guidance to Member States on how to integrate T&CM services within health care systems.

- To provide technical guidance in ensuring safety, quality and effectiveness of T&CM services.
UHC Definition (WHO, 2010)

- All people are able to use needed health services (including prevention, promotion, treatment, rehabilitation, and palliation), of sufficient quality to be effective;

- The use of these services does not expose the user to financial hardship

Global Health History Seminar on Traditional Medicine and Ayurveda,
WHO-HQ, Geneva, 19 March 2015

World Health Organization
Designing, coordinating and improving services at point of care

- Integrating improvement into vertical programme delivery
- **Health promotion** – innovation in "edutainment" for kids
- **Prevention and Primary care** – the quality improvement arena
- **Curative care** – managing the hospitals agenda
- **Long term, home and palliative care** – the pending avalanche in LMICs
Current activities

- Promotion/implementation of the strategy and resolution through networking
- Identification of models for good practice in integration of T&CM services into health care service delivery particularly in PHC
- Country support – developing national policy and work plan
Current activities

- Joint project on inclusion of TM into ICD-11
- Initiation of a pilot project on quality improvement and safety in T&CM services
- Benchmarks for practice in acupuncture
- Guidelines and technical documents
Current activities

- Training workshop for governmental officials responsible for T&CM
- Country support for upgrading the Knowledge and skills of traditional Health practitioners
Current activities
Integration of TM into National Health System

"The two systems of traditional and western medicine need not clash. Within the context of primary health care, they can blend together in a beneficial harmony, using the best features of each system, and compensating for certain weaknesses in each."

Dr Margaret Chan
Director-General of WHO
At opening ceremony of WHO Congress 7th November 2008, Beijing
Integration of T&CM into National Health Systems

The patients and the public will be benefited from both.

Western medicine

Traditional and complementary/alternative medicine