

Side event application / Formulaire de demande de réunion parallèle

Contact

Name/Nom: <input type="text"/>	Date of application: 06-April-2018
Delegation(s)/Délégation(s): Republic of Nicaragua	
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Concept

Description of proposed side event, including objective, expected results, proposed programme and speakers* /
Description de la réunion parallèle proposée, y compris les objectifs, les résultats attendus, l'ordre du jour et les orateurs* :

Background:

Across the world, traditional and complementary medicine (T&CM) is either the mainstay of health care delivery or serves as a complement to it¹. T&CM is found in almost every country in the world and the demand for its services is increasing². The Alma-Ata International Conference in Primary Health Care recognized (40 years ago) the importance of including TM practitioners as part of the Primary Health Care teams^{3,4}. The declaration of the first WHO Congress on Traditional Medicine (Beijing, China, 2008), held on the 30th anniversary of Alma-Ata, recognized T&CM as a resource of primary health care services to “increase availability and affordability and to contribute to improve health outcomes.”⁵ Based on the Beijing Declaration, the 62nd World Health Assembly (WHA) recommended that the WHO continue providing guidance to countries on T&CM integration into health systems, “especially to promote, where appropriate, the use of traditional/indigenous medicine for primary health care, including disease prevention and health promotion.”⁶

Countries across the globe continue to recognize the need to develop a cohesive and integrative approach to health care that allows governments, health care practitioners and, most importantly, those who use health care services, to access T&CM in a safe, respectful, cost-efficient and effective manner⁷. T&CM, of proven quality, safety, and efficacy, contributes to the goal of ensuring that all people have access to care².

The WHO has developed several recommendations including the WHO Traditional Medicine Strategy 2014-2023)² and the World Health Assembly resolution on traditional medicine in 2014 (WHA67.18)⁸ to encourage member states to integrate T&CM into their national healthcare systems.^{6,9-14} Most recently, the 69th WHA, in its resolution for “Strengthening Integrated, People-Centred Health Services”¹⁴ urged member states to “integrate, where appropriate, traditional and complementary medicine into health services, based on national context and knowledge-based policies, while assuring the safety, quality and effectiveness of health services and taking into account a holistic approach to health”.

Objectives:

The side event will explore the role of T&CM to both achieve universal health coverage (as proposed by the WHO Traditional Medicine Strategy 2014-2023 and WHA67.18 on traditional medicine)^{2,8}, and to the development of “Integrated, People-Centred Health Services” (as proposed by resolution WHA69.24)¹⁴, in the context of the 40th anniversary of the Alma-Ata declaration. Special attention will be put on T&CM’s underlying approaches, such as primary health care, and its focus on disease prevention and health promotion.

Expected Outcomes:

The side event will highlight some examples from countries that have been integrating T&CM into their national healthcare systems, and will offer an opportunity for ideas exchange. Special attention will be placed to the identification of best practices, role models of successful integration. It is expected that the event will serve as platform to advance the dialogue on how potential synergies between biomedicine and T&CM should be fostered. The event also hopes to open a space so that interested parties receive an update on the progress made on the implementation of the WHO Traditional Medicine Strategy, and resolution WHA69.24.

Proposed Program:

Moderator: to be defined by WHO

Part 1: Country Experiences: T&CM in Primary Health Care and Implementation of WHO Traditional Medicine Strategy (2014-2023):

- *Building the knowledge base for active management of T&CM through appropriate national policies:* Country Experience, Nicaragua: From Legislation to Public Health Action; T&CM in the Family and Community Health Model.
- *Strengthening the quality assurance, safety, proper use, and effectiveness of T&CM through regulation:* Country Experience to be defined. (Suggested: Member State from the WHO Western Pacific Region).
- *Strengthening the quality assurance, safety, proper use, and effectiveness of T&CM through regulation:* Country Experience, Bolivia: Traditional Medicine in the development of a Family Community Intercultural Health Model (official confirmation pending).
- *Promoting universal health coverage by integrating T&CM services into health care service delivery and self-health care:* Country Experience, Ghana (official confirmation pending).
- *Promoting universal health coverage by integrating T&CM services into health care service delivery and self-health care:* Country Experience to be defined (Suggested: Member State from the South-East Asia Region)

Part 2: Relevance of T&CM integration on the 40th anniversary of the Alma-Ata Declaration:

- *Evidence in Public Health, building bridges between research and Primary Health Care.* Distinguish Professor Jon Adams, World Federation of Public Health Associations (WFPHA); Director, Australian Research Centre in Complementary and Integrative Medicine (ARCCIM), University of Technology Sydney.

Part 3: WHO Traditional Medicine Strategy 2014-2023 in the 40th anniversary of the Alma-Ata Declaration, next steps:

- Implementation Progress of the WHO Traditional Medicine Strategy and moving towards Implementation progress, and the way forward towards strengthening integrated, people-centered health services. Dr. Zhang Qi, coordinator, Traditional, Complementary, and Integrative Medicine Unit, WHO.

Co-sponsored by the following member states: Curacao, Cuba, Bolivia, Ghana, Republic of Korea, Dominican Republic.
(countries to be confirmed: China, India, Iran, Brazil, Colombia, Ecuador, Mexico, Peru, South Africa...)

References:

1. Bodeker G, Ong C-K, Grundy C, et al. *WHO Global Atlas of Traditional, Complementary and Alternative Medicine*. (Bodeker G, Ong C-K, Grundy C, Burford G, Shein K, eds.). Kobe, Japan: WHO Centre for Health Development; 2005. <http://www.amazon.com/Global-Traditional-Complementary-Alternative-Medicine/dp/9241562862>.
2. World Health Organization. *WHO Traditional Medicine Strategy 2014-2023*. Geneva: WHO; 2013. http://www.who.int/medicines/publications/traditional/trm_strategy14_23/en/.
3. International Conference on Primary Health Care. Declaration of Alma-Ata. *WHO Chronicle*. 1978;32(11):428-430. doi:10.1016/S0140-6736(79)90622-6.
4. World Health Organization. *Primary Health Care; Report of the International Conference on Primary Health Care; Alma-Ata, USSR, 6-12 September 1978*. Alma-Ata, USSR; 1978. <http://apps.who.int/iris/bitstream/10665/39228/1/9241800011.pdf>.
5. WHO Congress on Traditional Medicine. Beijing Declaration. In: *WHO Congress on Traditional Medicine*. Beijing, China; 2008. doi:10.1177/0022034511399085.
6. Sixty Second World Health Assembly. WHA62.13 Traditional medicine. In: ; 2009:3.
7. World Health Organization. *National Policy on Traditional Medicine and Regulation of Herbal Medicines - Report of a WHO Global Survey*. Geneva; 2005. <http://apps.who.int/medicinedocs/pdf/s7916e/s7916e.pdf>.
8. Sixty Seventh World Health Assembly. WHA67.18 Traditional medicine. In: Geneva: WHO; 2014:2.
9. Sixty First World Health Assembly. WHA61.21 Global strategy and plan of action on public health, innovation and intellectual property. In: Geneva: WHO; 2008:48.
10. Forty Forth World Health Assembly. WHA44.34 Traditional medicine and modern health care. In: Vol III.; 1991:1.
11. Fifty Sixth World Health Assembly. WHA56.31 Traditional medicine. In: Geneva; 2003:3.
12. Hernandez AE. Language switching in the bilingual brain: what's next? *Brain Lang*. 2009;109(2-3):133-140. doi:10.1016/j.bandl.2008.12.005.
13. World Health Organization. *WHO Traditional Medicine Strategy 2002-2005*. Geneva; 2002. <http://www.who.int/medicines/publications/traditionalpolicy/en/>.
14. Sixty-ninth World Health Assembly. *Strengthening Integrated, People-Centred Health Services (WHA69.24)*. Geneva: World Health Assembly; 2016. http://apps.who.int/gb/ebwha/pdf_files/WHA69/A69_R24-en.pdf.

Event details / détails de la réunion

Expected number of participants/Nombre de participants attendus : 60

Exact title of the meeting/Titre exact de la réunion: **Integration of Traditional and Complementary Medicine (T&CM) in Primary Health Care, 40 years after Alma-Ata**

Interpretation/Interprétation

Interpretation may be provided in the official languages and the estimated costs are as follows: 2 languages: 2561 CHF; 3 languages: 5123 CHF; 6 languages: 11953 CHF.

L'interprétation peut être assurée dans les langues officielles aux coûts estimés suivants : 2 langues-2561 CHF; 3 langues : 5123 CHF; 6 langues : 11953 CHF.

Are interpretation services requested? / L'interprétation est-elle requise ? Yes/Oui ☒ No/Non ☐

(If yes, which languages)/(Si oui, en quelle langue) **English-Spanish, Spanish-English**

English/Anglais ☒ French/Français ☐ Russian/Russe ☐ Spanish/Espagnol ☒ Chinese/Chinois ☐ Arabic/Arabe ☐

Other language/autre langue:

Room Layout/Aménagement des salles

Due to type of furniture and technical equipment in the room, the layout of the rooms cannot be changed. For information regarding the location and layout of rooms at the Palais des Nations, please see:

[http://www.unog.ch/80256EE60057CB67/\(httpPages\)/BAE3AF717207A5AF80256EF80049C552?OpenDocument](http://www.unog.ch/80256EE60057CB67/(httpPages)/BAE3AF717207A5AF80256EF80049C552?OpenDocument)

Le type de mobilier et les installations techniques dans les salles ne permettent pas de modifier l'aménagement de celles-ci.

Pour tout renseignement sur l'emplacement ou la disposition des salles au Palais des Nations voir le lien :

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***Badges/ Badges d'accès**

WHA side events are for participants of the WHA and, as such, panellists and participants should be drawn from those participating in the Health Assembly.

Les réunions parallèles sont réservées aux participants de l'Assemblée; Les orateurs de ces réunions doivent donc être choisis parmi ceux-ci.

Please complete the form and send it to / Merci de remplir le formulaire et de l'envoyer à hqgoverningbodies@who.int