

Global strategies and plans of action that are scheduled to expire within one year

WHO traditional medicine strategy: 2014–2023

Report by the Director-General

1. In May 2014, the Sixty-seventh World Health Assembly adopted resolution WHA67.18 on traditional medicine,¹ in which it urged Member States to adapt, adopt and implement, where appropriate, the WHO traditional medicine strategy: 2014–2023² and requested the Director-General, inter alia, to facilitate, upon request, Member States' implementation of the strategy.
2. Through resolution WHA67.18, the Director-General was further requested to report to the Health Assembly periodically, as appropriate, on progress made in implementing the resolution. Accordingly, in decision WHA75(19), the Seventy-fifth World Health Assembly requested the Director-General to submit a consolidated report on the implementation of resolution WHA67.18 (2014) to the Seventy-sixth World Health Assembly in 2023, through the Executive Board at its 152nd session.³
3. The WHO traditional medicine strategy: 2014–2023 will expire within the coming year. This report therefore also responds to the request in decision WHA73(15) (2020) to allow Member States to consider whether global strategies or action plans that are so scheduled to expire have fulfilled their mandates, should be extended and/or need to be adjusted.

CONTEXT

4. The WHO traditional medicine strategy: 2014–2023 was developed in response to resolution WHA62.13 (2009)⁴ on traditional medicine, requesting the Director-General, inter alia, to update the WHO traditional medicine strategy 2002–2005, based on countries' progress and current new challenges in the field of traditional medicine.
5. The WHO traditional medicine strategy: 2014–2023 has two key goals, as well as three main strategic objectives, each of which contains strategic directions and specific actions to guide Member States, partners, stakeholders and the Secretariat in positioning traditional and complementary medicine

¹ See document WHA67/2014/REC/1, resolution WHA67.18.

² WHO traditional medicine strategy: 2014–2023. Geneva: World Health Organization; 2013 (<https://apps.who.int/iris/handle/10665/92455>, accessed 3 November 2022).

³ See document WHA75/2022/REC/1, decision WHA75(19).

⁴ See document WHA62/2009/REC/1, resolution WHA62.13.

within countries' health systems and to support the development of solutions to both promote health and protect patients.

IMPLEMENTATION

6. A steady and progressive trend has been observed in the global implementation of the WHO traditional medicine strategy: 2014–2023 and resolution WHA67.18. In total, 170 Member States have acknowledged their use of traditional and complementary medicine.

Strategic objective 1: To build the knowledge base for active management of traditional and complementary medicine through appropriate national policies.

7. According to the WHO global report on traditional and complementary medicine 2019,¹ national frameworks and infrastructure for traditional and complementary medicine have improved significantly. A total of 98 countries reported having a national policy on traditional and complementary medicine, 107 Member States have a national office for traditional and complementary medicine, and 75 Member States have a national research institute for traditional and complementary medicine that is either fully or partially funded by the government. The number of countries with a legal and regulatory framework for traditional and complementary medicine increased from 79 in 2012 to 109 in 2018 and continues to rise.

8. Research on traditional and complementary medicine has been conducted at the global level, including in relation to the COVID-19 pandemic. The WHO International Clinical Trials Registry Platform listed 4778 traditional medicine-related clinical trials, including 165 trials restricted to COVID-19,² while the WHO COVID-19 database of global literature on coronavirus disease lists 7516 research articles on traditional medicine.³

Strategic objective 2: To strengthen quality assurance, safety, proper use and effectiveness of traditional and complementary medicine by regulating products, practices and practitioners.

9. In the year 2018, 124 countries reported having in place laws or regulations on herbal medicines, 78 countries reported having laws and regulations on traditional and complementary medicine practitioners, and 45 countries reported that traditional and complementary medicine was covered by health insurance (both private and public). In addition, growth in national policies and regulations for traditional and complementary practitioners and services has outstripped that for herbal medicines, indicating that Member States have realized the importance of establishing a comprehensive policy and regulatory system covering traditional and complementary medicine practices, practitioners and products.

¹ WHO global report on traditional and complementary medicine 2019. Geneva: World Health Organization; 2019 (<https://www.who.int/publications/i/item/978924151536>, accessed 3 November 2022).

² Based on the total number of clinical trials on traditional medicine listed in the WHO International Clinical Trials Registry Platform and the number of clinical trials on traditional medicine restricted to COVID-19 as at 19 September 2022.

³ Based on the total number of research articles on traditional medicine cited in the WHO COVID-19 database of global literature on coronavirus disease as at 19 September 2022.

Strategic objective 3: To promote universal health coverage by integrating traditional and complementary medicine services into health care service delivery and self-health care.

10. In United Nations General Assembly resolution 74/2 (2019) on universal health coverage, Heads of State and Government, in recommitting to achieve universal health coverage by 2030, committed to, inter alia, exploring “ways to integrate, as appropriate, safe and evidence-based traditional and complementary medicine services within national and/or subnational health systems, particularly at the level of primary health care, according to national context and priorities”. The number of Member States with a national programme for traditional and complementary medicine increased from 58 in the year 2012 to 79 in the year 2018.

11. The 2018 Declaration of Astana on primary health care acknowledges the need to include traditional and complementary medicine knowledge and technologies in the delivery of primary health care. The importance of traditional practices in self-health care is highlighted in United Nations General Assembly resolution 69/131 (2014), which acknowledges the contribution of yoga to best practices aimed at building better individual lifestyles. All of these steps have created better conditions for Member States to continuously make efforts to integrate traditional and complementary medicine services into all levels of health service delivery.

SUPPORT PROVIDED BY THE SECRETARIAT

12. The Secretariat has been working continuously to provide strategic and technical support to Member States to harness the potential contribution of traditional and complementary medicine to health and well-being. Traditional medicine has been included in many WHO resolutions and action plans,¹ such as those on strengthening integrated, people-centred health services and on primary health care, encouraging Member States to integrate traditional and complementary medicine into their national health services, as appropriate, while ensuring its quality, safety and efficacy.

13. Over the past decade, the Secretariat has developed a series of technical products on traditional and complementary medicine² to provide Member States with guidance on minimum reference standards for the delivery of safe, quality and effective traditional and complementary medicine services. Technical publications have included guidelines for herbal medicine,³ eight benchmarks for training in and practice of acupuncture, tuina, Ayurveda and Unani medicine, a technical document on the interaction of herbal medicines with other medicines, a document on international standard terminologies on traditional Chinese medicine, a technical document on traditional and complementary medicine in primary health care and an mYoga mobile application. Data also showed that WHO traditional and complementary medicine products were among the top five most downloaded products from the WHO website in the year 2020.

¹ Relevant resolutions of the Health Assembly include WHA62.13 (2009), WHA67.18 (2014), WHA69.24 (2016), WHA72.6 (2019) and WHA72.7 (2019).

² To find WHO publications on traditional and complementary medicine:
<https://www.who.int/publications/i?healthtopics=7b989a66-ebf4-4d1a-9bde-59f12b3d3590&publishingoffices=0f916edd-9993-4b7c-b809-55dbaf2df95e,4d13f310-9986-4ed2-9fae-56a8a65c3f9a&healthtopics-hidden=true&publishingoffices-hidden=true> (accessed 3 November 2022).

³ Such technical documents include the WHO guidelines for selecting marker substances of herbal origin for quality control of herbal medicines, the WHO guidelines on good herbal processing practices for herbal medicines and the WHO guidelines on good manufacturing practices for the manufacture of herbal medicines.

14. Technical products on traditional and complementary medicine currently at different stages of development include the WHO International Herbal Pharmacopoeia; the classification and qualification of traditional, complementary and integrative medicine practitioners; international standard terminologies on, for instance, Ayurveda, Siddha and Unani medicine; and benchmarks for training in and practice of different modalities, such as chiropractic, anthroposophical medicine, Tibetan medicine, traditional Chinese medicine, Yoga, cupping and Nuad Thai, with others also under discussion. A WHO guidance document on clinical research in traditional medicine, a project on models for the appropriate integration of traditional and complementary medicine into health systems, and a package of tools and guidance for ensuring the safety and improving the quality of acupuncture are also under development.

15. One highly significant achievement is the inclusion of a chapter on traditional medicine in the eleventh revision of the International Statistical Classification of Diseases and Related Health Problems. Furthermore, two traditional and complementary medicine indicators were listed in the WHO 2018 Global reference list of 100 core health indicators (plus the health-related Sustainable Development Goals). The regional framework for harnessing traditional and complementary medicine for achieving health and well-being in the Western Pacific¹ was also approved.

16. The first comprehensive WHO global report on traditional and complementary medicine was published in the year 2019.² The report was developed with inputs from 179 Member States and provides information not only on policy and regulation but also on traditional and complementary medicine products, practices and practitioners for monitoring health trends, thereby providing a better understanding of the traditional and complementary medicine landscape at the global and national levels.

17. On 19 April 2022, the WHO Global Centre for Traditional Medicine was launched in India. The Centre has a strategic focus on evidence and learning, data and analytics, sustainability and equity, and innovation and technology, with the aim of harnessing the contribution of traditional medicine to global health and sustainable development.

COLLABORATION WITH MEMBER STATES AND PARTNERS

18. The Secretariat, Member States and non-State actors are collaborating to develop national, regional and global knowledge platforms providing evidence-based information on traditional and complementary medicine. Such platforms include the Brazilian Academic Consortium for Integrative Health³ and the Acupuncture-Moxibustion Clinical Trial Registry.⁴

19. The WHO International Regulatory Cooperation for Herbal Medicines network of members increased from 35 when WHO became its secretariat in 2017 to 47 in the 2021. WHO has entered into

¹ See resolution WPR/RC72.R2 of the Regional Committee for the Western Pacific.

² A survey was conducted during the period 2016–2018 to update the second WHO global survey on traditional medicine conducted in 2010–2012 in order to analyse global trends and obtain an overview of the current situation. The WHO global report on traditional and complementary medicine 2019 reflects the findings of both these surveys.

³ Launched with support from the Brazilian Ministry of Health through the Latin American and Caribbean Center on Health Sciences (BIREME), the project aspires to form the basis of a regional network of collaboration for research on traditional and complementary medicine.

⁴ The Acupuncture-Moxibustion Clinical Trial Registry, a secondary platform under the WHO International Clinical Trials Registry Platform, was officially approved by WHO in March 2018. It is a collaborative initiative between the World Federation of Acupuncture and Moxibustion Societies, the China Academy of Chinese Medical Sciences and the China Association of Acupuncture-Moxibustion.

official relations with six non-State actors¹ in traditional and complementary medicine and has continuously collaborated with partners, for instance on the Self-Care Readiness Index² and the Global Review of Osteopathic Medicine and Osteopathy.³

20. The network of WHO Collaborating Centres for Traditional, Complementary and Integrative Medicine has expanded from nine to 26 institutions since the adoption of the WHO traditional medicine strategy: 2014–2023. Each WHO Collaborating Centre serves as a major technical resource covering subject areas spanning from herbal medicines to non-medicine interventions, and with collaborative activities ranging from research, capacity-building and technical advice to policy implementation.

21. Eleven interregional training workshops on traditional and complementary medicine have been organized, with more than 350 government-nominated officers taking part. The Regional Expert Advisory Committee on Traditional Medicine for COVID-19 for the Africa Region was established in the year 2020. A series of regional workshops on product safety and clinical research methodologies for traditional medicine has been conducted in the South-East Asia and Western Pacific regions.

CHALLENGES REPORTED BY MEMBER STATES

22. Member states have reported that the key challenges they face in implementing the WHO traditional medicine strategy: 2014–2023 include the lack of research data and financial support for research; the lack of mechanisms to regulate, control and monitor the safety, quality and efficacy of traditional and complementary medicine practices, practitioners and products; the lack of expertise, cooperation channels and information-sharing mechanisms; and the lack of policy guidance on the integration of traditional medicine into health systems and services.

23. Member States have requested technical and policy guidance from the Secretariat, including on conducting research, regulating practices, practitioners and products, evaluating the safety, quality and efficacy of traditional and complementary medicine, and integrating traditional and complementary medicine into health systems and services, particularly into primary health care. They have also requested support for national capacity-building, and information and data sharing, as well as in relation to global cooperation mechanisms.

RECOMMENDATIONS AND WAY FORWARD

24. Over the past decade, the global situation and challenges in the field of traditional and complementary medicine have changed considerably. The contribution of traditional and complementary medicine to primary health care, universal health coverage and the Sustainable Development Goals continues to gain political recognition. A growing number of Member States are calling on the Secretariat to provide technical support on integrating traditional and complementary medicine into health systems and services and to develop a mechanism for sharing information and research data to support countries in generating evidence-based policies and strategic plans.

¹ World Federation of Acupuncture-Moxibustion Societies (WFAS), World Federation of Chinese Medicine Societies (WFCMS), World Federation of Chiropractic (WFC), World Federation of Hydrotherapy and Climatotherapy (FEMTEC), Global Self-Care Federation (GSCF) and Osteopathic International Alliance (OIA).

² For further information, see the Self-Care Promise website (<https://selfcarepromise.org/self-care-readiness-index>, accessed 3 November 2022).

³ Available at: <https://oialliance.org/the-oia-global-report-global-review-of-osteopathic-medicine-and-osteopathy-2020> (accessed 3 November 2022).

25. The expansion of the global landscape of traditional medicine also demonstrates its impact on broader determinants of health, such as interculturalism, nature and even trade. Consequently, a need is emerging for comprehensive policy and technical support from the Secretariat for establishing relevant platforms and enhancing cross-sectoral coordination and collaboration for sustainable development.

26. The Secretariat will continue to learn from and build on the progress achieved in the development of traditional and complementary medicine to provide comprehensive technical support to Member States, to harness the full potential of traditional and complementary medicine for better health and well-being, and to integrate traditional and complementary medicine into health systems and services while ensuring its safety, quality and efficacy in order to achieve universal health coverage and the Sustainable Development Goals.

27. On the basis of these considerations, the Executive Board may wish to consider the development of a new or updated traditional and complementary medicine strategy.

ACTION BY THE EXECUTIVE BOARD

28. The Board is invited to note this report; in its discussions, it is further invited to provide guidance on what the Secretariat's next steps should be as the current strategy is expiring in 2023, in particular:

- does the Board consider that there are gaps that need to be dealt with in respect of the current strategy?
- in the Board's view, are there new developments in this area that the Secretariat should take into account in its future work?

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