# Global traditional medicine strategy 2025–2034



World Health Organization



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# Foreword

I am very pleased to introduce the Global traditional medicine strategy 2025–2034. This new strategy will serve as a valuable guiding document for the health systems around the world serving the millions of people for whom traditional medicine remains the first port of call to treat many diseases.

Globally, there is a growing use of traditional, complementary and integrative medicine services and products, particularly at the primary health care level. The practice of integrative medicine that combines traditional and complementary medicine and biomedicine is gaining popularity.

Ensuring that all people have access to safe and effective health care is an essential part of the mission of the World Health Organization (WHO). To support the safe and effective use of traditional medicine, which is an integral part of the Declarations of Alma Ata (1978) and Astana (2018) on primary health care, as well as the United Nations General Assembly's High Level Meeting Declarations on universal health coverage in 2019 and 2023, two traditional medicine strategies have been launched previously by WHO covering 2002–2005 and 2014–2023.

Building on this foundation, the Global traditional medicine strategy 2025–2034 was recently adopted by the Seventy-eighth World Health Assembly *(1)*. This strategy emphasizes the importance of evidence-based traditional medicine, while recognizing the rights of Indigenous Peoples and the importance of the protection of and access to traditional medical knowledge.

A notable feature of this strategy is the formal inclusion of integrative medicine within the broader scope of traditional medicine, including a definition of integrative medicine for the first time. With this inclusion, this new strategy provides a clear vision, goals, guiding principles and four strategic objectives with eight directions. Each direction contains proposed actions for Member States, partners, stakeholders and WHO.

The strategy outlines a clear path forward: strengthening the evidence base and research supporting policies and regulations; integrating traditional, complementary and integrative medicine into health systems and services; encouraging multi-sectoral collaboration and empowering communities.

It is designed to support and facilitate the achievement of the Fourteenth General Programme of Work 2025–2028, which emphasizes the reorientation of health systems towards primary health care tailored to the local context and ensuring the integrated delivery of health service packages that include evidence-based traditional, complementary and integrative medicine.

This strategy aims to support Member States in designing and implementing national strategic plans and actions in accordance with their national capacities, priorities, relevant legislation, culture and circumstances and to integrate, as appropriate, safe and evidence-based, traditional, complementary and integrative medicine within national and local health systems.



**Dr Tedros Adhanom Ghebreyesus**
Director-General
World Health Organization

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The World Health Organization (WHO) gratefully acknowledges the many individuals and organizations who contributed to the support and development of this new global traditional medicine strategy.

WHO also expresses its deep gratitude to all Member States that supported the development of this new strategy and subsequently supported its adoption by the Seventy-eighth World Health Assembly.

This strategy was developed through a highly consultative and participatory process, with WHO greatly benefiting from the guidance and support of Member States and a broad range of stakeholders. These included individual experts, institutions, organizations, WHO Collaborating Centres on traditional medicine, and Indigenous Peoples' representatives. Their invaluable contributions were gathered through one expert consultation, one online public consultation, seven regional Member State consultations, and four global Member State consultations, all of which played a crucial role in shaping the direction of the strategy. WHO extends its sincere gratitude for their collaboration and support.

Following the decision of EB152(18), Sungchol Kim (Head, Traditional Medicine Norms, Standards, and Systems Integration Unit, TSI, WHO headquarters) initiated and led the development work under the guidance and supervision of Shyama Kuruvilla (Director, WHO Global Traditional Medicine Centre, GTMC) and Rudi Eggers (former Director, Department of Integrated Health Services). Yachan Li (Senior technical officer, TSI Unit) coordinated the overall development and consultation process of the strategy.

Zhang Qi (Former Head, Traditional, Complementary and Integrative Medicine Unit), Neil Travis Gower (University of Johannesburg, South Africa) and Tido von Schoen-Angerer (International Federation of Anthroposophic Medical Associations, Switzerland) contributed to the initial draft developed between July and September 2023.

The expert consultation held in November 2023 was attended by: Pravit Akarasereenont (Mahidol University, Thailand), Danbo Dou (Shanghai Shuguang Hospital, China), Ricardo Ghelman (Academic Consortium for Integrative Health, Brazil), Sumeet Goel (Ministry of Ayush, India), Cheng Soon Goh (Ministry of Health, Malaysia), John Hughes (University College London Hospitals, United Kingdom of Great Britain and Northern Ireland), Nadine Ijaz (Carleton University, Canada), Miek Jong (The Arctic University, Norway), Yong-Suk Kim (Kyung Hee University, Republic of Korea), Candong Li (Fujian University of Traditional Chinese Medicine, China), Michael Smith (University of Mississippi, United States of America), Jonathan Lee Wardle (Southern Cross University, Australia), Chunyu Wei (National Administration of Traditional Chinese Medicine, China), Charlie Xue (RMIT University, Australia), Anastasia Michaelina Yirenkyi (Ministry of Health, Ghana), and Arman Zargaran (Ministry of Health and Medical Education, Islamic Republic of Iran).

From the preparation of the online public consultation in February 2024 until the final submission to the Seventy-eighth World Health Assembly, the members of the TSI Unit, WHO headquarters, reviewed and integrated all valuable inputs. This process was coordinated by Sangyoung Ahn, with contributions from Aditi Bana, Pradeep Kumar Dua, Liu Qin, Shen Yunhui and Yuk Ming Alice Wong.

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# Abbreviations

| | |
|---|---|
| **AI** | artificial intelligence |
| **CM** | complementary medicine |
| **ICD-11** | International Classification of Diseases, 11th revision |
| **ICTRP** | International Clinical Trials Registry Platform |
| **IM** | integrative medicine |
| **ILO** | International Labour Organization |
| **IRCH** | International Regulatory Cooperation for Herbal Medicines |
| **PHC** | primary health care |
| **SDG** | Sustainable Development Goal(s) |
| **TCIM** | traditional, complementary and integrative medicine |
| **TM** | traditional medicine |
| **TMK** | traditional medical knowledge |
| **T&CM** | traditional and complementary medicine |
| **UHC** | universal health coverage |
| **UNDRIP** | United Nations Declaration on the Rights of Indigenous Peoples |
| **WHA** | World Health Assembly |
| **WHO** | World Health Organization |
| **WIPO** | World Intellectual Property Organization |
| **WTO** | World Trade Organization |

# Glossary

| | |
|---|---|
| **Codified and non-codified** | Traditional medicine systems can be categorized into 1) codified systems that have been disclosed in writing in ancient scriptures and are fully in the public domain, and 2) non-codified traditional medicinal knowledge that has not been fixed in writing, often remains undisclosed by traditional knowledge holders, and is passed on in oral traditions from generation to generation *(2, 3)*. |
| **Complementary medicine** | Refers to additional health care practices that are not part of a country's mainstream medicine. Evidence-based complementary medicine has the potential to support mainstream medicine and more comprehensively support people's health and well-being needs. |
| **Integrative medicine** | An interdisciplinary and evidence-based approach to health and well-being by using a combination of biomedical and traditional and/or complementary medical knowledge, skills and practices. |
| **One Health** | An integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes that the health of humans, domestic and wild animals, plants and the wider environment (including ecosystems) are closely linked and interdependent. The approach mobilizes multiple sectors, disciplines and communities at varying levels of society to work together to foster well-being and tackle threats to health and ecosystems, while addressing the collective need for clean water, energy and air, safe and nutritious food, taking action on climate change, and contributing to sustainable development *(4)*. |
| **People-centred care** | An approach to care that consciously adopts the perspectives of individuals, carers, families and communities, recognizing them as participants in, and beneficiaries of trusted health systems that respond to their needs and preferences in humane and holistic ways. People-centred care also requires that people have the education and support they need to make decisions and participate in their own care. It is organized around the health needs and expectations of people rather than diseases *(5)*. |
| **Primary health care** | A whole-of-society approach to health that aims to maximize the level and distribution of health and well-being through three components: (a) primary care and essential public health functions as the core of integrated health services; (b) multi-sectoral policy and action; and (c) empowered people and communities *(6)*. |
| **Traditional medical knowledge** | Health-related knowledge, know-how, skills and practices that are developed, sustained and passed on from generation to generation within a community, often forming part of its cultural identity. |

| | |
|---|---|
| **Traditional medicine** | Refers to codified or non-codified systems for health care and well-being, comprising practices, skills, knowledge and philosophies originating in different historical and cultural contexts, which are distinct from and pre-date biomedicine, evolving with science for current use from an experience-based origin. Traditional medicine emphasizes nature-based remedies and holistic, personalized approaches to restore balance of mind, body and environment. |
| **Well-being** | A positive state experienced by individuals and societies. Similar to health, it is a resource for daily life and is determined by social, economic and environmental conditions. Well-being encompasses quality of life, as well as the ability of people and societies to contribute to the world with a sense of meaning and purpose. Focusing on well-being supports the tracking of the equitable distribution of resources, overall thriving and sustainability. A society's well-being can be observed by the extent to which they are resilient, build capacity for action, and are prepared to transcend challenges *(7)*. |

# Executive summary

Sustainable Development Goal (SDG) target 3.8 on universal health coverage aspires that all people should have access to the full range of quality health services they need, when and where they need them, and without financial hardship. This includes the full continuum of essential health services, ranging from health promotion to prevention, treatment, rehabilitation and palliative care across the life course.

The United Nations General Assembly Resolutions 74/2 (2019) and 78/4 (2023) entitled "*Political declaration of the high-level meeting on UHC*", reaffirmed and renewed Member States' commitment to achieve universal health coverage (UHC) by 2030 by, inter alia, exploring ways to integrate safe and evidence-based traditional and complementary medicine services within national and local health systems as appropriate, particularly at the level of primary health care, according to the national context and priorities.

The World Health Organization (WHO) recognizes the evolution of the global landscape of traditional medicine, the diversity of its practices, and the progress made and challenges faced by Member States, as described in the third WHO global survey on traditional, complementary and integrative medicine and presented in the WHO traditional, complementary and integrative medicine dashboards. An increasing number of Member States are seeking technical support for integrating evidence-based, traditional medicine into health systems and enhancing cross-sectoral coordination and global collaboration.

The World Health Assembly decision [WHA76(20)] on traditional medicine, adopted in 2023, requested the WHO Director-General to extend the WHO traditional medicine strategy 2014–2023 to 2025. It also requested the development of a new global traditional medicine strategy for the period 2025–2034, guided by the current version and in consultation with Member States and relevant stakeholders, with the aim to submit a draft strategy for consideration by the Seventy-eighth World Health Assembly in 2025 through the Executive Board at its 156th session.

In response to this decision, the WHO Secretariat initiated the process of developing the Global traditional medicine strategy 2025–2034, with a vision of universal access to safe, effective and people-centred traditional, complementary and integrative medicine (TCIM) for the health and well-being of all. The aims of the strategy are to address existing challenges across multiple domains, integrate safe and effective TCIM as appropriate into health systems and advance the contribution of TCIM to the highest attainable standard of health.

The strategy was developed through an extensive consultative process including four global and seven regional Member States' consultations, an online consultation, and consultations with a broad range of partners, including Indigenous Peoples' representatives, international experts, and across all three levels of WHO. Each iteration incorporated inputs from Member States and different stakeholders.

For the first time, the strategy presented a WHO definition of integrative medicine as "an interdisciplinary and evidence-based approach to health and well-being by using a combination of biomedical and traditional and/or complementary medical knowledge, skills and practices". The strategy also emphasizes the need for robust scientific evidence and appropriate regulation to support the safe and effective integration of TCIM into health systems and services.

Furthermore, this strategy responds to concerns raised by Indigenous Peoples' groups and holders of traditional knowledge by ensuring the protection of and access to traditional medical knowledge. Notably, it aligns with the World Health Assembly resolution (WHA76.16) regarding the health of Indigenous Peoples, reaffirming their right to their traditional medicines and to maintain their health practices, including the conservation of their vital medicinal plants.

The strategy is underpinned by nine guiding principles, which guide the actions of Member States, partners and stakeholders, and WHO during its implementation. TCIM products and services must be evidence-based, while embracing a holistic perspective, ensuring that they contribute to the highest attainable standards of health and well-being. TCIM respects the rights of Indigenous Peoples and promotes culturally appropriate, people-centred care that is delivered sustainably, with due regard for biodiversity. These services should be integrated within health systems and provided equitably to all, without discrimination.

It presents four strategic objectives aimed at advancing the contribution of TCIM to achieving the highest attainable standard of health and well-being: strengthening the evidence base; supporting the provision of safe and effective TCIM through appropriate regulatory mechanisms; integrating safe and effective TCIM into health systems; and optimizing the cross-sector value of TCIM and empowering communities.

Each strategic objective is supported by two directions, including high-quality research; optimization of the use of technological advancements; appropriate regulatory mechanisms for products, practices and practitioners; integration into health systems and across the care continuum and life course; and cross-sector policies and action plans for the protection, access and benefit-sharing of traditional medical knowledge. Each direction contains proposed actions for Member States, partners and stakeholders, and WHO (Table 1).

The strategy was developed in consideration of TCIM's diversity, unique positioning, challenges and opportunities and aims to support Member States in designing and implementing national strategic plans and actions on TCIM in accordance with their national capacities, priorities, relevant legislation, culture and circumstances. It also encourages Member States to monitor and evaluate progress in implementing their national action plans and provide information for global reporting through WHO.

WHO reaffirms its commitment to this important agenda, especially through the rigorous application of science to strengthen the evidence base, and to leveraging its work across the three levels of the Organization to support Member States in integrating evidence-based TCIM into health systems, as appropriate, especially at the level of primary health care, in order to catalyse the attainment of universal health coverage and the SDGs.

**Table 1.** Strategy summary at a glance

## Vision

**A world in which there is universal access to safe, effective and people-centred TCIM for the health and well-being of all.**

## Goal

**To advance the contribution of evidence-based TCIM to the highest attainable standard of health and well-being.**

## Guiding principles

- **Evidence-based**
- **Holism and health**
- **Sustainability and biodiversity**
- **The right to health and autonomy**
- **Indigenous Peoples' rights**
- **Culture and health**
- **People-centred care and community engagement**
- **Integrated health services**
- **Health equity**

### Strategic objective 1
**Strengthen the evidence base for TCIM**

Direction 1.1
Facilitate high-quality TCIM research through increased resource allocation

Direction 1.2
Explore relevant research approaches and optimize the utilization of technological advancements

### Strategic objective 2
**Support the provision of safe and effective TCIM through appropriate regulatory mechanisms**

Direction 2.1
Provide appropriate regulatory mechanisms for TCIM products that are sustainably produced and supplied

Direction 2.2
Provide appropriate regulatory mechanisms for TCIM practice and practitioners

### Strategic objective 3
**Integrate safe and effective TCIM into health systems**

Direction 3.1
Incorporate safe and effective TCIM services into national and local health-related frameworks and policies for the integration of safe and effective TCIM into health systems

Direction 3.2
Facilitate the integration of safe and effective TCIM services across the care continuum and life course

### Strategic objective 4
**Optimize the cross-sector value of TCIM and empower communities**

Direction 4.1
Include TCIM in cross-sector policies and action plans for health, well-being societies, One Health and Sustainable Development Goals

Direction 4.2
Develop inclusive approaches and models for the protection of and access to traditional medical knowledge, and for the fair and equitable sharing of the benefits arising from the utilization of such knowledge and/or associated genetic resources

# 1 Introduction

Traditional medicine is used by people across all six regions of the World Health Organization (WHO) *(8)*.

Traditional medicine refers to codified or non-codified systems for health care and well-being, comprising practices, skills, knowledge and philosophies originating in different historical and cultural contexts, which are distinct from and pre-date biomedicine, evolving with science for current use from an experience-based origin. Traditional medicine emphasizes nature-based remedies and holistic, personalized approaches to restore balance of mind, body and environment.

Complementary medicine refers to additional health care practices that are not part of a country's mainstream medicine. Evidence-based complementary medicine has the potential to support mainstream medicine and more comprehensively support people's health and well-being needs.

As people become more empowered to choose the appropriate health care for their needs, health services continually adapt to meet the challenge of delivering people-centred care. Whether government-led or people-led, the practice of integrative medicine that combines traditional and complementary medicine and biomedicine is gaining popularity.

In 2017, WHO began supporting the developing field of integrative medicine by introducing the concept of traditional, complementary and integrative medicine (TCIM). This strategy offers an expanded vision that includes traditional, complementary and integrative medicine, bringing together these three approaches to address individual health needs and expectations.

The strategy was developed through an extensive consultative process, including global and regional Member States consultations, a public hearing, and consultations with a broad range of stakeholders and partners, including representatives of Indigenous Peoples.

The strategy aims to support Member States in designing and implementing national strategic plans and actions in accordance with their national capacities, priorities, relevant legislation, culture and circumstances. The strategy does not imply a preference for TCIM practice over biomedical practice. It seeks to harness the potential contribution of TCIM to health and well-being based on evidence. The strategy is also designed to prevent misinformation, disinformation and malinformation while ensuring an evidence-based approach to TCIM. WHO emphasizes the principle of do no harm and consistently refutes any claims that are not supported by scientific evidence.

# 2 Vision

**A world in which there is universal access to safe, effective and people-centred TCIM for the health and well-being of all.**

# 3 Goal

**To advance the contribution of evidence-based TCIM to the highest attainable standard of health and well-being.**

# 4 Guiding principles

The strategy was developed based on the following principles, which may also guide the implementation of actions by Member States, partners and stakeholders, and WHO in achieving the strategy's vision and goal.

## 4.1 Evidence-based

Scientific or research evidence refers to knowledge that is explicit, systematic and replicable, and can be judged by its methodological standards. Decisions for the use of TCIM should be based on the best available evidence of safety and effectiveness from research and practices. Correspondingly, no health care practices or treatments, be they in biomedicine, public health or TCIM, will be supported or recommended by WHO unless they are evidence-based.

As with all health sciences, traditional medicine should incorporate the highest scientific standards by employing rigorous and robust research methods, integrating continuous methodological and technological advancements, adhering to ethical principles, and using a multidisciplinary approach to select the most stringent and relevant research methods for specific topics and applications to ensure validity, generalizability, reliability and positive impact for people's health and well-being.

Robust scientific validation includes ensuring the quality of the design of research and the quality of the evidence in the way that research is interpreted to ensure safe and effective interventions, and taking into account research ethics, conflicts of interest and issues such as scalability and sustainability for global health, including through health technology assessments. These principles are agnostic to the discipline from which the interventions come and focus on benefits to people's health and well-being based on the most stringent standards of science.

## 4.2 Holism and health

TCIM encompasses various medical systems rooted in holistic perspectives of health. It emphasizes the internal connections within the human body and its connection to the environment.

## 4.3 Sustainability and biodiversity

Health care should consciously support environmental sustainability and biodiversity. TCIM is rooted in natural resources, traditional medical knowledge, culture and history. It should contribute to safeguarding biodiversity by promoting sustainable TCIM practices and aligning with One Health principles.

## 4.4 The right to health and autonomy

The Constitution of the World Health Organization states that the "enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being". The right to health requires that health services and products be available, effective, accessible, acceptable and of good quality for all without discrimination *(9)*. Autonomy in health decisions necessitates support for informed choices.

## 4.5 Indigenous Peoples' rights

Indigenous Peoples have the right to their traditional medicines and to maintain their health practices, including the conservation of their vital medicinal plants, animals and minerals. Indigenous individuals also have the right to access, without any discrimination, all social and health services *(10)*. They also have the right to maintain, control, protect and develop their intellectual property over traditional knowledge, and to safeguard it against misappropriation and unauthorized use *(11)*. This strategy recognizes the role of Indigenous traditional medicine and the need to uphold the autonomy and rights of Indigenous Peoples through appropriate legislation, funding and fair engagement within their Member States' national context. It is informed by the United Nations Declaration on the Rights of Indigenous Peoples *(12)* and the commitment to achieving the ends set forth therein, considering Member States' national contexts and priorities and the limitations set out in Article 46.2.

## 4.6 Culture and health

Recognizing the importance of aligning health needs and the preferences, lifestyles and cultural beliefs of diverse populations helps to foster inclusive, equitable and culturally appropriate health services that maintain respect for traditional medical knowledge and encourage intercultural dialogue *(13)*.

## 4.7 People-centred care and community engagement *(14)*

These are key priorities in the delivery of quality health care. TCIM advocates for personalized care and respects cultural preferences by considering an inclusive and collaborative approach closely aligned with the concept of primary health care.

## 4.8 Integrated health services *(15)*

To achieve optimal outcomes, health services should be coordinated seamlessly across different medical disciplines and should prioritize individual well-being. Integrating safe, effective and sustainable TCIM can contribute to an approach that supports health and well-being. Evidence-based practices, continuous quality assurance and regulatory mechanisms are essential to support the effective integration of TCIM into health services.

## 4.9 Health equity

TCIM practice should be provided equitably, addressing potential barriers, such as those related to sex, age, ethnicity/race, income, education and development differentials, that impact uptake *(16)*.

# 5 Strategic objectives, directions and actions





# 5.1 Strategic objective 1
# Strengthen the evidence base for TCIM

## Rationale

WHO surveys have demonstrated the widespread use of TCIM but also a need for more data to advance its evidence base for safety and effectiveness as a basis for its use and integration. To fully leverage the potential of TCIM in improving health and well-being, further investment in and facilitation of TCIM research is needed.

Digital technologies and health innovations can potentially enhance TCIM research, health services and self-care, but they require active capacity-building and development.

Given TCIM's complexity and multidisciplinary nature rooted in diverse philosophies, relevant research methodologies and intellectual property rights modalities need to be employed, supported by a collaboration between methodological and practice experts, and between TCIM and other researchers.

## Direction 1.1
## Facilitate high-quality TCIM research through increased resource allocation

| | |
|---|---|
| **Rationale** | An international research agenda on traditional medicine focusing on scientifically rigorous and high impact research, with agreements on key outcome measures for TCIM, needs to be established. This should encompass all aspects of TCIM, such as healthy lifestyles, disease prevention and treatment, medicines and interventions, professions and practices, integrative services and systems, and the use of technology within TCIM.<br><br>Moreover, research should explore what traditional medical knowledge can inform and contribute to in terms of health and well-being outcomes, thus necessitating the involvement of TCIM practitioners in the co-design of research projects and supporting them with research capacity-building throughout the entire process. |
| **Actions for Member States** | • Establish a national research agenda on TCIM treatments and practices to stimulate innovation and allocate dedicated resources in alignment with objective criteria and national, regional or/and global priorities.<br>• Conduct appropriate scientific studies to support the evidence base regarding safe and effective TCIM.<br>• Establish a mechanism/system for collecting data from various sources, including real-world data related to TCIM.<br>• Support capacity-building for research and foster partnerships with research institutions and international organizations to facilitate innovation in TCIM.<br>• Promote participatory research approaches.<br>• Develop a comprehensive database of evidence-based TCIM to inform health care policies and practices. |
| **Actions for partners and stakeholders** | • Support the identification of priorities for a national TCIM research and innovation agenda.<br>• Support interdisciplinary research that includes TCIM.<br>• Conduct scientific research that facilitates evidence-informed decision-making for TCIM.<br>• Invest in research capacity-building and the involvement of TCIM practitioners in research design and conduct.<br>• Include TCIM research in broader health research initiatives and evidence summaries. |
| **Actions for the WHO Secretariat** | • Develop, update and disseminate WHO guidelines, technical documents and tools on TCIM research.<br>• Encourage Member States and partners to enhance TCIM research and develop a comprehensive research agenda, based on the research gaps and responding to health needs and priorities.<br>• Encourage TCIM research that is culturally appropriate, socially relevant, inclusive and participative.<br>• Encourage Member States to register TCIM clinical trials in WHO's International Traditional Medicine Clinical Trial Registry and other WHO-recognized clinical trial registries.<br>• Coordinate and promote bilateral and multilateral collaboration between Member States and partners on TCIM research. |

## Direction 1.2

## Explore relevant research approaches and optimize the utilization of technological advancements

| | |
|---|---|
| **Rationale** | There is a need to explore innovative approaches to TCIM research that are appropriate to the unique characteristics of TCIM knowledge and practices, including consideration of the use of complexity science, system biology, big data and real-world data approaches, as well as interdisciplinary collaboration. It is also important to explore relevant research approaches for non-codified traditional medicine.<br><br>Maximizing the rational use of advanced technologies is important for developing appropriate and innovative approaches to research on TCIM. The application of technological advancements can enhance and complement TCIM health services and access to care, including self-care. |
| **Actions for Member States** | • Explore innovative, scientifically valid approaches for research appropriate to TCIM.<br>• Enable the development and application of digital technologies in TCIM research.<br>• Facilitate digitization and the use of electronic health records inclusive of TCIM-related information to enable comprehensive health care in a responsible and ethical manner.<br>• Develop mobile health solutions and telehealth services and utilize advanced technologies such as those based on artificial intelligence for relevant TCIM.<br>• Explore relevant research approaches for non-codified traditional medicine. |
| **Actions for partners and stakeholders** | • Contribute to developing research methods for the ethical and robust scientific validation of individualized TCIM approaches and knowledge in ways that are culturally appropriate, socially relevant and inclusive.<br>• Develop digital health applications together with TCIM end-user communities and beneficiaries in support of delivering people-centred care.<br>• Contribute to developing/implementing electronic patient record systems accessible by TCIM practitioners and promote interoperability. |
| **Actions for the WHO Secretariat** | • Support the development of research methodologies appropriate to complex, holistic and individualized approaches of TCIM.<br>• Strengthen capacity-building on TCIM research methodologies and evidence-collection strategies.<br>• Encourage the development and use of TCIM-specific responsible artificial intelligence tools *(17)*.<br>• Contribute to the bridging of digital and technological innovations across the TCIM continuum of care, translate collected information into actionable knowledge tailored to Member States, and propose interventions maximizing TCIM contributions. |



# 5.2 Strategic objective 2

# Support the provision of safe and effective TCIM through appropriate regulatory mechanisms

## Rationale

Appropriate regulatory mechanisms are crucial for TCIM to safeguard the public from unsafe or substandard TCIM products and services. A risk-based regulatory approach is well suited to TCIM, tailoring regulatory requirements to the specific type of TCIM products or services based on safety and efficacy. This involves establishing appropriate participatory mechanisms, quality control measures, standards and labelling requirements, as well as ensuring that the intended use is justified and rational. The highest standard of science and stringent regulatory provisions, as appropriate to national requirements, should apply for TCIM products and services used for medical purposes to ensure their safety, quality and effectiveness in clinical settings.

Regulatory mechanisms for TCIM practitioners must prioritize patient safety. TCIM practitioners cannot be considered as a single group due to the diverse nature of TCIM modalities, therapeutic approaches, training, practice and practitioners' division of labour. The identification and establishment of common norms and standards for qualifications, competencies and ethical conduct contribute to ensuring that practitioners have the necessary knowledge and skills to deliver safe and effective care.

## Direction 2.1

## Provide appropriate regulatory mechanisms for TCIM products that are sustainably produced and supplied

**Rationale**

Individuals choosing to use TCIM should have access to products with proven safety and efficacy. Appropriate regulatory mechanisms for TCIM products involve identifying and adopting norms and standards, developing rules, educating industry and ensuring mutual understanding from the supplier to the end-user.

Equitable access to TCIM products with safety, quality and efficacy is an essential outcome of balanced regulatory mechanisms and oversight. Close collaboration between stakeholders and regulators can address barriers related to affordability, availability and cultural appropriateness.

Expanding international regulatory collaboration and cooperation will advance the regulation of TCIM products, contributing to consistent standards across a broader range of products and geographical locations.

**Actions for Member States**

- Establish norms and standards for TCIM products to ensure the supply of products with safety, quality and efficacy through appropriate consultation and partnerships.
- Explore approaches supporting evidence-based regulatory decision-making for TCIM products that is inclusive of the principles of reliance and/or recognition *(18)*.
- Consider an evaluation of TCIM products utilizing a risk-based approach to ensure that they are indicated appropriately for use.
- Enforce relevant restrictions on the use of endangered species and wider biodiversity for medicinal products, subject to stringent regulatory oversight, in line with the Convention on International Trade in Endangered Species of Wild Fauna and Flora (CITES) and other applicable international conventions and national legislation, including, as appropriate, timebound plans to phase out current usage and to research and implement sustainable alternatives.
- Encourage sustainable practices in the production, supply, use and disposal of TCIM products that contribute to the preservation and repopulation of endangered species.
- Participate in international regulatory cooperative arrangements such as the WHO International Regulatory Cooperation on Herbal Medicines.

**Actions for partners and stakeholders**

- Encourage different stakeholders to be involved in devising regulatory mechanisms for TCIM products.
- Participate in and provide training on criteria, norms and standards for TCIM products.
- Support ethical advertising and promotion to avoid any misleading or unsubstantiated claims regarding TCIM.
- Industry and practitioners should cooperate and participate in monitoring and surveillance systems for the risk management of TCIM products.
- Stakeholders should comply with biodiversity and conservation requirements in the production and supply of TCIM products.

**Actions for the WHO Secretariat**

- Develop standards for herbal medicines in the form of the International Herbal Pharmacopoeia and other such documents.
- Develop, update and disseminate guidelines, technical documents and tools to support TCIM regulatory mechanisms, including pharmacovigilance.
- Develop standardized terminologies and an international classification of TCIM products.
- Enhance the WHO International Regulatory Cooperation on Herbal Medicines network.

## Direction 2.2

## Provide appropriate regulatory mechanisms for TCIM practices and practitioners

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| **Rationale** | Regulatory frameworks should be adapted to the different forms of TCIM practices and practitioners. They should also be aligned with TCIM policies to support the preservation and strengthening of TCIM knowledge and practices that are safe and effective, while preventing misappropriation.<br><br>Regulatory frameworks should consider – based on health system objectives, risk profiles and regulatory capacity in the local context – appropriate standards for educational programmes, certification and licensing requirements to ensure that TCIM practitioners have the knowledge and skills to deliver safe and effective care. Balanced frameworks contribute to interprofessional collaboration and the coordination of service delivery across the spectrum of health and social care systems, enabling a holistic and integrated approach to people-centred care. |
| **Actions for Member States** | • Establish or strengthen appropriate regulatory mechanisms to promote safe and effective TCIM practices, while recognizing their diversity.<br>• Develop appropriate quality standards of medicinal preparations made by TCIM practitioners.<br>• Develop standards, guidelines and codes of conduct to promote responsible and accountable TCIM practices.<br>• Adopt or refer to WHO technical documents in developing minimum training requirements, including ethics for TCIM practitioners.<br>• Set training requirements for TCIM practitioners, including ongoing professional development.<br>• Collect, analyse and use data on the TCIM health workforce for improved planning and accountability. |
| **Actions for partners and stakeholders** | • Promote a dialogue between TCIM professional associations with regulatory authorities for standards pertaining to education, practices and practitioners.<br>• Encourage regulators, training institutions and professional organizations to support national and local health workforce data collection, analysis and use for improved planning and accountability.<br>• Support research on the impact of regulatory systems in reference to patient safety and population health outcomes. |
| **Actions for the WHO Secretariat** | • Develop a WHO international classification and qualification framework for TCIM practitioners and provide technical guidance to countries.<br>• Develop and/or update WHO technical documents in TCIM.<br>• Improve health workforce data on TCIM practitioners through regular reporting in the WHO National Health Workforce Accounts Data Portal and complementary surveys and reports.<br>• Facilitate information sharing between Member States and partners regarding approaches to and experiences with the regulation of TCIM practices and practitioners in different settings. |



# 5.3 Strategic objective 3
# Integrate safe and effective TCIM into health systems

## Rationale

The integration of safe and effective TCIM into health systems will play a key role in the reorienting of health services *(19)*. TCIM can be integrated into all of the building blocks of a health system, covering all levels of health care across the care continuum and life course, in line with the political declaration of the high-level meeting on universal health coverage adopted by the United Nations General Assembly in 2023 *(20)*.

Primary health care *(21)* is a foundation of universal health coverage and a natural entry point for the integration of TCIM.

## Direction 3.1

## Incorporate safe and effective TCIM services into national and local health-related frameworks and policies for the integration of safe and effective TCIM into health systems

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| **Rationale** | Political commitments and policy frameworks are essential for the safe and effective integration of TCIM into health services that are safe, effective, efficient, coordinated and sufficiently resourced by governments.<br><br>Policy frameworks for professional education and communication are also essential for effective integration, especially at the level of educational institutions. Recognizing and educating practitioners of both TCIM and biomedicine promotes mutual understanding, respect, communication, collaboration and integration. |
| **Actions for Member States** | • Determine if and how the integration of safe and effective TCIM into national and local health systems can support the reorientation of health systems and services.<br>• Recognize the potential role of TCIM as an integral part of health services and include it in the building blocks of national health frameworks, policies and plans to permit integration at all levels of the health system.<br>• Establish mechanisms for quality assurance, safety monitoring and evaluations of outcomes of TCIM services and products.<br>• Facilitate the integration of education between traditional and complementary medicine and biomedicine. |
| **Actions for partners and stakeholders** | • Support the development of a national framework or policy that prioritizes health and well-being in which traditional and complementary medicine and biomedicine health practitioners collaborate and coordinate in the delivery of health services.<br>• Encourage traditional and complementary medicine and biomedicine educational institutions to integrate their curricula to promote interprofessional collaboration.<br>• Educational institutions should consider the establishment and maintenance of TCIM divisions. |
| **Actions for the WHO Secretariat** | • Develop WHO guidance on the integration of safe and effective TCIM into national health systems.<br>• Organize activities to support Member States in the integration of TCIM as well as its monitoring and evaluation.<br>• Support Member States in initiating and improving institutional education curricula on appropriate knowledge and skills of traditional and complementary medicine in biomedicine schools and vice versa in traditional and complementary medicine schools. |

## Direction 3.2

## Facilitate the integration of safe and effective TCIM services across the care continuum and life course

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| **Rationale** | An increasing research base demonstrates TCIM's promise across the care continuum, including in the areas of health promotion, disease prevention, treatment, rehabilitation and palliative care. In this respect, it is essential to conduct evidence reviews on the impact of safe and effective TCIM services.<br><br>Integrated health services occur when biomedicine and TCIM are proven safe and effective, and are aligned or complementary, including in the clinical pathway, thus providing users with the seamless care they need, including mutual respect and coordination between practitioners to achieve the common goal of people-centred care. |
| **Actions for Member States** | • Explore, identify, design and implement the most appropriate TCIM integration models, especially at the primary care level.<br>• Utilize applicable guidance from WHO on effective integration models and practices.<br>• Promote standardized TCIM documentation, including an expanded and accelerated use of the WHO Family of International Classifications to enable data collection and evidence generation on TCIM.<br>• Establish sustainable financing mechanisms to support initiatives of TCIM integration.<br>• Develop clinical guidelines and care pathways incorporating TCIM approaches, including timely cross-referrals, for specific health conditions and stages of life.<br>• Include safe and effective TCIM across the care continuum and life course in essential health services' packages and the national essential medicines list.<br>• Enhance the education and training of health care practitioners in TCIM practices, safety considerations and potential interactions with biomedical treatments.<br>• Promulgate educational materials and public information explaining TCIM modalities, benefits and risks, including for appropriate self-care options.<br>• Highlight the importance of evidence-based health literacy on TCIM interventions and on when to seek critical, life-saving biomedical care and to avoid delay. |
| **Actions for partners and stakeholders** | • Support the integration of safe and effective TCIM across the care continuum and life course.<br>• Support the conduct of regular evaluations of integration.<br>• Promote the research and inclusion of safe and effective TCIM interventions across the care continuum and life course. |
| **Actions for the WHO Secretariat** | • Conduct surveys and disseminate information on the identified integration models.<br>• Provide technical and policy support for integration based on the needs of Member States.<br>• Set up standardized indicators to enable monitoring of the access, coverage and utilization of TCIM practices and assessment of their safety and effectiveness.<br>• Continue to develop and promote the series of WHO technical documents on TCIM to support integration, including on self-care.<br>• Establish a global network of TCIM reference clinical centres for data collection and monitoring based on the WHO Family of International Classifications.<br>• Facilitate information exchange among Member States, partners and stakeholders, through activities and mechanisms that are accountable and transparent, to support collaboration on integration. |



# 5.4 Strategic objective 4

# Optimize the cross-sector value of TCIM and empower communities

## Rationale

The knowledge, attributes and unique value of TCIM serve to address challenges across multiple dimensions such as health, culture, environment, and social and economic factors, including a wide range of knowledge and practices. Policies and approaches for the appropriate use of TCIM include capitalizing on its potential in health services and self care.

Capitalizing on the attributes of TCIM, while engaging communities and stakeholders, may harness its potential across sectors and inform governance and societal approaches to maximizing its contribution to health, well-being societies, One Health and the achievement of the Sustainable Development Goals (SDGs).

## Direction 4.1

## Include TCIM in cross-sector policies and action plans for health, well-being societies, One Health and the Sustainable Development Goals

**Rationale**

The promotion of TCIM concepts, knowledge and practices will assist in integrating human, animal and environmental health. The rich cultural heritage and diversity of TCIM's healing traditions and principles promote a positive health vision that focuses on the whole person and reinforces the sources of health.

Recognizing its contribution to multiple SDGs would help to further engage TCIM in the achievement of related targets. This requires coordination and collaboration from multiple sectors related not only to health care but also to other areas such as culture, education, agriculture, the environment, intellectual property, trade, and economic and social protection.

**Actions for Member States**

- Establish cross-sector collaboration in health care for well-being societies and sustainable development.
- Collaborate with international organizations, regional bodies, neighbouring countries and relevant stakeholders to share TCIM best practices and experiences.
- Protect biodiversity and environment in accordance with international obligations, while facilitating a sustainable supply of raw materials for good quality TCIM products.
- Preserve traditional practices by organizing intercultural dialogue to facilitate knowledge exchange between diverse health systems.
- Advocate for a healthy lifestyle and environmental conservation through a holistic approach and traditional medical knowledge, and enhance understanding of TCIM concepts, knowledge and practices.
- Raise awareness on the importance of and need for the preservation of biodiversity.

**Actions for partners and stakeholders**

- Support cross-sector coordination by generating data and incorporating TCIM concepts, knowledge and practices.
- Contribute to the implementation of the One Health Joint Plan of Action.
- Raise awareness among stakeholders about TCIM's holistic concepts of health and well-being.

**Actions for the WHO Secretariat**

- Support Member States in building cross-sector collaborations to enhance the TCIM contribution to healthy societies.
- Facilitate intersectoral dialogue to contribute towards One Health by promoting synergy between TCIM and related stakeholders.
- Liaise across the United Nations system and promote cross-sectoral initiatives for TCIM-related information exchange and the promotion of collaborations.
- Provide a traditional medical knowledge perspective in the implementation of the One Health Joint Plan of Action.
- Establish a TCIM library by linking with existing information or creating new ones for knowledge-sharing.

## Direction 4.2

## Develop inclusive approaches and models for the protection of and access to traditional medical knowledge, and for the fair and equitable sharing of the benefits arising from the utilization of such knowledge and/or associated genetic resources

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| **Rationale** | All custodians of traditional medical knowledge can benefit from the appropriate protection of their knowledge. Inclusive approaches and models for access to traditional medical knowledge and for the fair and equitable sharing of the benefits arising from the utilization of such knowledge are needed.<br><br>These approaches and models should be informed, as applicable and appropriate, by the Convention on Biological Diversity, the Nagoya Protocol on Access and Benefit-sharing, the Kunming-Montreal Global Biodiversity Framework, and the World Intellectual Property Organization's Treaty on Intellectual Property, Genetic Resources and Associated Traditional Knowledge.[1] |
| **Actions for Member States** | • Develop policy frameworks for traditional medical knowledge that ensure appropriate access to this knowledge and associated genetic resources, and for the fair and equitable sharing of benefits arising from their use.<br>• Establish guidelines for the documentation and registration of traditional medical knowledge and associated practices.<br>• Foster intergenerational learning to preserve and pass traditional medical knowledge to future generations, support its documentation by traditional medicine practitioners and establish knowledge databases.<br>• Promote collaboration to share best practices, policies and experiences related to traditional medical knowledge.<br>• Facilitate the development of technology to strengthen the conservation of biodiversity for the sustainability of medicinal plants and germplasm banks. |
| **Actions for partners and stakeholders** | • Participate in the development of policy frameworks for traditional medical knowledge.<br>• Contribute to capacity-building for the protection of traditional medical knowledge and prevention of its possible misappropriation.<br>• Propose access and benefit-sharing models to incentivize and protect traditional medical knowledge. |
| **Actions for the WHO Secretariat** | • Strengthen coordination and collaboration with other United Nations entities and relevant organizations to address issues pertinent to traditional medical knowledge.<br>• Organize training programmes for building the capacity of Member States in traditional medical knowledge.<br>• Raise awareness among the scientific community about ethical aspects and the need to address rights regarding genetic resources in traditional medical knowledge.<br>• Facilitate information sharing regarding appropriate approaches and models for traditional medical knowledge. |

[1] At the date of publication of this report, the Treaty is still open for signature and has not yet entered into force.

# 6 Implementation of the strategy

## 6.1 General comments on implementation

The guiding principles of the strategy also guide its implementation. To help to achieve the objectives, it is necessary to regularly monitor and report on the implementation of the strategy. A mid-term review of the objectives and directions in terms of Member States' progress, for reporting in 2030, can help to identify whether there is a need to modify the strategy to better fit countries' needs.

## 6.2 Monitoring, measuring and reporting

The main purposes of monitoring, measuring and reporting are to ensure adequate implementation, measure success and adapt the strategy, if needed. The role of WHO in this regard is to:

- support Member States in the implementation and adaptation of the strategy at the country level, including the design and development of national indicators;
- organize workshops and on-site studies in Member States across the regions to identify and share experiences and lessons learned in the implementation; and
- report to the Eighty-third World Health Assembly in 2030 and the Eighty-seventh World Health Assembly in 2034 on the implementation of the strategy for follow-up actions and decisions based on updated WHO surveys.

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