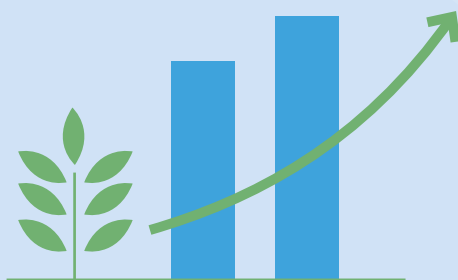




WHO GLOBAL REPORT ON TRADITIONAL AND COMPLEMENTARY MEDICINE 2019



World Health
Organization

EXECUTIVE SUMMARY

WHO's 13th General Programme of Work (GPW13) came into effect this year for 2019–2023. As a strategic priority, GPW13 sets an overarching goal of reaching 3 billion more people, to move towards Sustainable Development Goal 3 (SDG 3) – *ensuring healthy lives and promoting well-being for all at all ages* – by achieving universal health coverage (UHC), addressing health emergencies and promoting healthier populations. Traditional and complementary medicine (T&CM) can make a significant contribution to the goal of UHC by being included in the provision of essential health services.

Improving equitable access to safe, quality and effective T&CM services can potentially meet communities' needs and build sustainable and culturally sensitive primary health care. The Declaration of Astana, adopted at the Global Conference on Primary Health Care in October 2018, made clear that the success of primary health care will be driven by applying scientific as well as traditional knowledge, and extending access to a range of health care services, which include traditional medicines.

In 2005, WHO published a report on national policies on traditional medicine and regulation of herbal medicines, based on the first global survey on T&CM. To identify global trends and the current situation in the area of T&CM, WHO conducted a second global survey during 2010–2012 (second survey), and a further survey during 2016–2018 (update survey). This made it possible to compare the information and data in the two most recent surveys with those in the first global survey, and thus identify global trends.

Globally, the landscape for T&CM has been improving consistently. In line with the WHO Traditional Medicine Strategy 2002–2005 and the WHO Traditional Medicine Strategy 2014–2023, and relevant World Health Assembly resolutions, Member States took steps between 2005 and 2018 to promote the safety, quality and effectiveness of T&CM. They also took steps for the appropriate integration of T&CM into health systems (particularly health services) by developing national policies, regulatory frameworks and strategic plans for T&CM products, practices and practitioners.

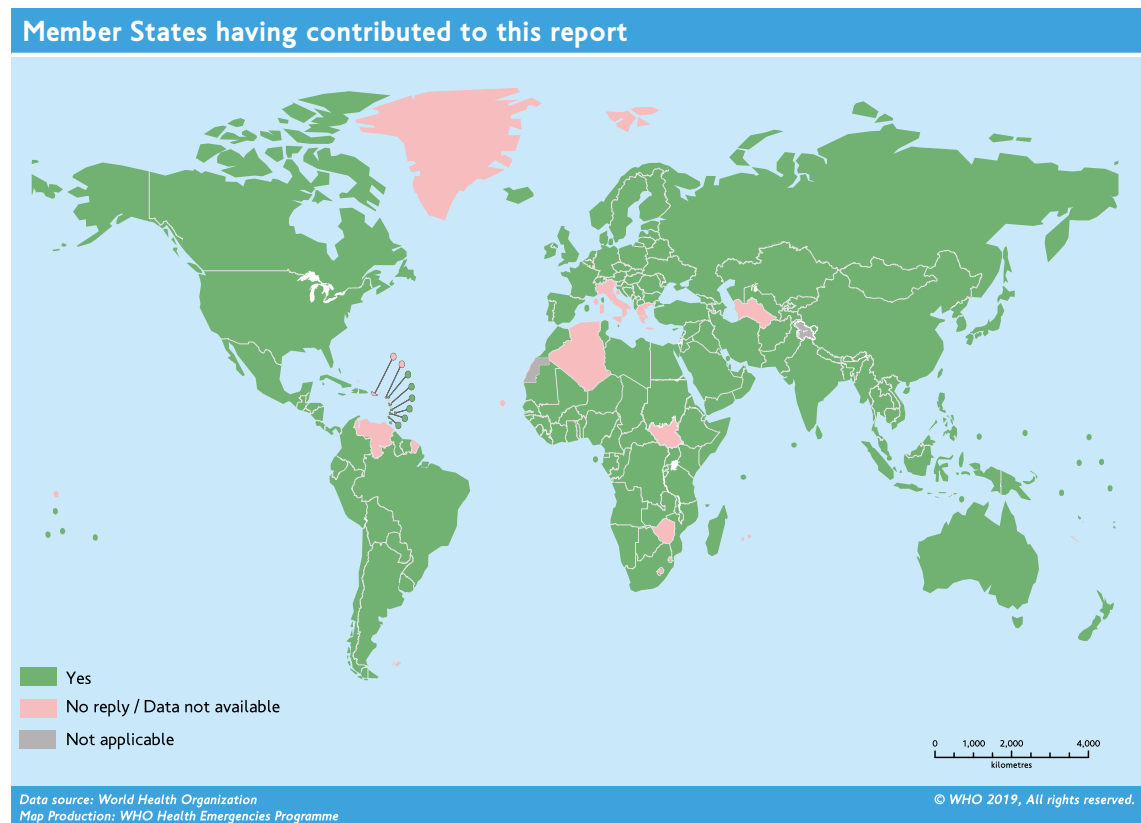
Based on current information, **88% Member States have acknowledged their use of T&CM which corresponds to 170 Member States**. These are the countries that have, for example, formally developed policies, laws, regulations, programmes and offices for T&CM, and the actual number of countries using T&CM is likely to be even higher.

This report represents a unique milestone.

- It is the most comprehensive report on T&CM, with 179¹ of the 194 Member States officially contributing information; thus, it addresses the challenge of lack of credible data and information in this field.
- It captures the three phases of progress made by Member States; that is, before and after the first WHO Traditional Medicine Strategy (1999–2005), from the first global survey to the second global survey (2005–2012) and from the second survey to the most recent update survey (2012–2018).
- It covers not only policy and regulation, but also products, practices and practitioners of T&CM.
- It is the most current and up-to-date report, based on information from most Member States across the six WHO regions.

¹ 179 represents the number of Member States for which WHO has information through an official response to at least one of the three WHO surveys. The 15 Member States that did not reply to any of the three surveys were Algeria, Cabo Verde, Eswatini, Greece, Italy, Lesotho, Luxembourg, Mauritius, Monaco, Saint Kitts and Nevis, San Marino, South Sudan, Turkmenistan, Venezuela (Bolivarian Republic of) and Zimbabwe.

The map below shows the 179 countries that have contributed to this report:



It is clear that the role of traditional medicine in meeting the health needs of populations has come to the fore, and this report is another call to harness its potential to contribute to UHC and the SDGs through primary health care.

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INTRODUCTION

Background and methodology

This report is structured in five parts: national framework for traditional and complementary medicine (T&CM); product regulation; practices and practitioners; the challenges faced by countries; and, finally, the country profiles. Apart from the section on practices and practitioners, the report is consistent with the format of the report of the first global survey in order to provide a useful comparison. The section on practices and practitioners, which covers providers, education and health insurance, is a new section incorporated to reflect the emerging trends in T&CM and to gather new information regarding these topics at a national level. All new information received has been incorporated into individual country profiles and data graphs.

The report captures the **three phases of progress** made by Member States; that is, before and after the first WHO Traditional Medicine Strategy (1999–2005), from the first global survey to the second global survey (2005–2012) and from the second survey to the most recent timeline (2012–2018).

Information sources

Information came from three main sources: the first and second WHO global surveys, the most recent update survey and additional sources, as outlined below.

First and second WHO global surveys on T&CM

A total of 141 countries replied to the first survey in 2005. Thanks to collaboration with the WHO regional offices, responses to the second global survey in 2012 were received from 133 countries, representing 69% of the 193 Member States of WHO at that time.¹ Of these 133 countries, 29 were responding for the first time. Hence, the data set (N) for the 2012 figure in most of the data graphs is 170 countries (i.e. the 141 responding to the first survey plus the 29 responding for the first time in the second survey). Where specified (e.g. in many of the graphs in Section 3), the data set is limited to respondents to the second survey, because these topics were not part of the first survey.

The response to the second survey was geographically uniform, with more than 50% of Member States across all six WHO regions participating. There was also a response of more than 90% from Member States in the WHO South-East Asia Region, and of more than 80% from Member States in the regions of the Eastern Mediterranean and the Western Pacific.

Update survey

During the compilation and verification of the second survey data, some of the Member States expressed a desire to update their information and showcase recent progress in their T&CM landscapes. Cognisant of the evolving global situation regarding T&CM, and to provide Member States an opportunity to share any significant updates, we designed a short and concise questionnaire comprising 13 key T&CM parameters that focused on the indicators for monitoring the WHO Traditional Medicine Strategy 2014–2023, to facilitate the mid-term review of the implementation of the strategy worldwide.² The questionnaire was shared with regional focal points for traditional medicine (TM), to further communicate with Member States and invite a response on a voluntary basis. Member States were asked to share their most up-to-date information.

Of the 194 Member States, 61 countries (across six WHO regions) provided a voluntary response to the update survey, and nine of these provided information for the first time (i.e. they had not replied to the first or second surveys). However, there may be Member States in which the T&CM situation has changed significantly, that did not respond to the update survey.

¹ The text of the second survey is given in Annex 1, and a regional breakdown of countries responding to that survey is given in Annex 2.

² See the text of the update survey in Annex 3.

Additional sources

In this report the data from the surveys were supplemented by information from WHO global and regional reports, WHO regional and country offices and WHO collaborating centres for traditional medicine. Additional information was also obtained during data verification through national health authorities, for example.

For five Member States¹ that did not officially respond to any of the three surveys, information on select data points was provided by the WHO regional offices and official records, and this information has been added to the figure and data set for 2018. In addition, the territories of Bermuda, Cayman Islands, and Turks and Caicos Islands, which are not WHO Member States, replied to the update survey; their information is shared under the country profiles section.

Some key findings

As at 2018, besides the national policies and regulations on T&CM that had been developed in more and more Member States, the infrastructure on governance of T&CM at national level had also been significantly improved (e.g. 107 Member States had a national office for TM and 75 Member States had a national research institute). A total of 34 Member States across the six WHO regions included traditional or herbal medicines in their national essential medicines lists (NEMLs), and many Member States, such as Ghana, had a separate list of essential herbal medicines. Also, the indicator figures for national policy and regulation on T&CM had quickly caught up with the figure for regulation on herbal medicines.

Progress as at 2018, was broadly based across all six WHO regions.

- **Within the WHO African Region**, between 2005 and 2018, significant progress was made in the development of national policies, laws and regulations and national programmes for T&CM. The region fares significantly better than the global scenario in most of the measurement indicators of T&CM, apart from regulation and registration of herbal medicines, which remain a challenge for the region.
- **In the WHO Region of the Americas**, there was an increase in the number of Member States developing national policies, programmes, laws and regulations, and offices for T&CM since 2005. The region lagged slightly behind the global scenario for all indicators, but it is anticipated that T&CM will be steadily recognized as a valuable contributor to health care.
- **In the WHO Eastern Mediterranean Region**, marked progress was seen in the area of regulation and registration of herbal medicines since 2005 (where the region fares better than the global scenario). Of the 21 countries in this region, nine reported having a national policy for T&CM, and 12 countries reported laws and regulations governing T&CM.
- **In the WHO European Region**, there was a marked increase in the number of Member States with a registration system and regulation for herbal medicines, with 45 of the 53 Member States reporting having both. However, indicators such as national policies, offices, programmes and research institutes for T&CM lag significantly behind the global averages.
- **The WHO South-East Asia Region**, which has several historical systems of traditional medicine in the region and a strong policy focus, fared better than the global averages on all indicators. Of the 11 Member States in the region, 10 reported national policies, programmes, office, expert committee, regulation and registration of herbal medicines.
- **The WHO Western Pacific Region** had a strong policy focus, with 17 of the 27 Member States reporting a national policy for T&CM. The region lags behind the global scenario in registration and regulation of herbal medicines but is comparable on all other indicators.

In the second survey, Member States were also asked about the major difficulties they faced regarding regulatory issues related to the practice of T&CM. Of the 133 respondent Member States, 99 quoted **lack of research data as their top challenge**. This was followed by lack of financial support for research on T&CM, lack of mechanisms to monitor safety of T&CM practices, and lack of education and training for T&CM providers (among other challenges).

¹ Cabo Verde, Italy, Lesotho, Mauritius and Zimbabwe.

To provide continuous support in the future, WHO also asked Member States to define their assistance needs. The responses included requests for support and general technical guidance for research and evaluation of T&CM, information sharing on regulatory issues, workshops on national capacity-building, and provision of research databases.

Points to be noted

In mid-2017, WHO's Traditional and Complementary Medicine unit was renamed to include the term "Integrative Medicine", to cover the integrative approaches of both T&CM and conventional medicine regarding policy, knowledge and practice. The unit is now officially referred to as **Traditional, Complementary and Integrative Medicine (TCI)**. However, the primary sources for this report are the second survey and the update survey, both of which focused primarily on T&CM; hence, this report is titled the *WHO global report on traditional and complementary medicine 2019*. Currently, a separate project is underway to define and understand "integration as well as integrative medicine", and to provide guidance to Member States on the criteria and elements of best practices for integrating T&CM into national health systems, if or when they decide to do so.

For a few indicators in the report, the figures for 2012 are not exactly the same with the numbers stated in the WHO Traditional Medicine Strategy 2014–2023. There are several reasons for this. During the verification of the data, some discrepancies were found in the replies to the second survey questionnaire; to resolve these issues, a detailed verification exercise was undertaken during 2015–2018 through respondents' national health authorities. Also, in some Member States, the situation with respect to certain T&CM indicators had changed since the first survey, where the response had previously been in the affirmative. Wherever a respondent has indicated such changes, the changes have been mentioned in that respondent's country profile. For the remaining respondents, it was assumed that a Member State's affirmative response to an indicator in the first survey had not changed by the time of the second survey. Taking all this into account, some data needed to be adjusted; the 2018 data shown in figures and tables are comprehensive, and include, as far as possible, all the Member States that replied affirmatively to an indicator.

Every effort was made to ensure the clarity and accuracy of the data used in the analysis and presented here. WHO welcomes any updates and clarifications and plans to continue to update and expand the information from Member States.

With this report, WHO has taken a further step towards an increased understanding of the T&CM landscape at global and national levels. WHO remains committed to supporting Member States in developing proactive policies and implementing action plans that will strengthen the role T&CM plays in keeping populations healthy.



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