Traditional Medicine Action Plan for the South-East Asia Region 2016-2020

At the regional workshop to share experience and evidence on appropriate integration of traditional medicine into national health-care systems held in Pyongyang, DPR Korea, 20-22 October 2015, participants discussed and agreed the following actions to implement the current WHO Traditional Medicine Strategy 2014-2023 in the South East Asia region over the next 2 to 5 years. The actions are consistent with the strategic objectives of the WHO Traditional Medicine Strategy which are:

- to build the knowledge base for active management of T&CM through appropriate national policies;
- to strengthen quality assurance, safety, proper use and effectiveness of T&CM by regulating products, practices and practitioners;
- to promote universal health coverage by integrating T&CM appropriately into health service delivery and self-health care.

Traditional Medicine Action Plan

1. Monitoring traditional medicine (TRM) systems

   **WHO Member States to:**
   - Improve performance monitoring of TRM systems at all levels.

   **WHO to:**
   - Convene a task group to develop a minimum set of indicators and associated definition.

2. Traditional medicine research

   **WHO Member States to:**
   - Encourage research on new developments in traditional medicine, with a special focus on:
     - non-communicable disease management and the effectiveness and cost-effectiveness of combined modern and traditional therapy;
     - the impact of the modernization of TRM product processing, formulation and use; and
     - combining modern diagnostics with TRM.
   - Improve communication between policy makers and researchers on the evidence base needed and available for TRM policy development.

   **WHO to:**
   - Support documentation of new developments in traditional medicine, with a special focus on non-communicable disease management, and on the impact of the modernization of TRM.
   - Facilitate identification and dissemination of emerging research issues.
   - Advocate for better communication between policy makers and researchers.
   - Develop policy briefs on emerging TRM issues.
3. TRM practitioners / TRM workforce

**WHO Member States to:**

- Foster greater understanding and mutual respect between traditional and modern practitioners through actions including: teaching on TRM during the basic training of modern medicine practitioners, and vice versa; joint training facilities; and creating opportunities for joint policy discussion.
- Support the professional development of TRM practitioners by introducing mechanisms for career development and continuing professional development.
- Develop approaches to better identify the scale and practices of informal TRM practitioners, and use this information to develop policy.

**WHO to:**

- Encourage the documentation and exchange of country experience with addressing TRM practitioner / health workforce issues, through country case studies, inter-country exchanges and meetings.

4. Adverse events reporting

**WHO Member States to:**

- Share their experience in developing adverse event reporting systems, and share best practice within the region.

**WHO to:**

- Support case studies that document how Member States developed their adverse events reporting systems.
- Prepare a briefing note on the WHO global adverse event reporting system based in the Uppsala Monitoring Centre, Sweden and share with Member States.

5. Communication

**WHO Member States to:**

- Develop ways to better communicate the strengths and limitations of TRM to the general population, including to the younger generation.
- Develop ways to improve communication between allopathic and traditional practitioners through joint activities.

**WHO to:**

- Facilitate the development of a regional TRM network, in order to exchange information and experience.