



## Special Editorial

## WHO Traditional Medicine Global Summit 2023 meeting report: Gujarat Declaration



The first WHO Traditional Medicine Global Summit “Towards health and well-being for all” was held in Gandhinagar, Gujarat, India, on 17–18 August 2023, to look anew at the application of rigorous scientific methods to unlock the vast potential of traditional, complementary and integrative medicine (TCIM) amidst important challenges and opportunities to realize universal health coverage and promote health and well-being for people and the planet.

The participants in the Summit, coming from all WHO regions, included a range of stakeholders: from health and TCIM practitioners, civil society representatives and Indigenous Peoples to health policy and decision-makers and government officials from the G20 and other countries.

Based on the research and evidence-informed discussions and initiatives presented in the Summit’s five plenaries and six parallel sessions, the participants endorsed the outcomes of the Summit in a meeting report: the Gujarat Declaration.

The meeting report sets out an action agenda towards the implementation of evidence-based TCIM interventions and approaches in support of the goal of universal health coverage and health-related Sustainable Development Goals, among others, and the application of science, technology, innovation and knowledge exchange to validate and unlock, as appropriate, the contribution of TCIM and Indigenous knowledge to advance planetary health and people’s health and well-being across the life course.

**Meeting report: Gujarat declaration**

1. We, the participants of the WHO Traditional Medicine Global Summit 2023 “Towards health and well-being for all”, held in Gandhinagar, Gujarat, India, on 17 and 18 August 2023, reaffirm global commitments related to indigenous knowledges, biodiversity and traditional, complementary and integrative medicine, including in the Declaration of Alma-Ata of 1978, the Convention on Biological Diversity 1992, the UN Declaration on the Rights of Indigenous Peoples 2007, the UN 2030 Agenda for Sustainable Development, the Astana Declaration on primary health care 2018, the UN General Assembly political declaration on universal health coverage in 2019, and World Health Assembly resolutions on traditional, complementary and integrative medicine (TCIM), and Indigenous People’s health and rights, among others.
2. We hereby ascribe to this Gujarat Declaration that summarizes the evidence-informed outcomes of the Summit.

**We recognize and respect that**

3. All members of our one human family live interdependently with our common home, planet Earth, whose health and well-being have a profound effect on the health and well-being of all people.
4. Billions of people use Indigenous knowledges, resources and methods, and TCIM, for their health and well-being, and that for many it is their only or preferred option for health care.
5. The role of the World Health Organization (WHO), as the lead United Nations (UN) technical agency on health, is to apply rigorous scientific methods to support Member States in ensuring effectiveness, safety, and equity in the use of Indigenous knowledges, resources and methods, and TCIM systems, and at the same time to be rigorous in evolving scientific methods to better understand, assess and, where appropriate, apply more holistic, context-specific, complex and personalized approaches for health and well-being.
6. Diverse Indigenous knowledges and TCIM systems of healing, well-being and sustainability are a valuable resource for humanity. They take into account holistic dimensions of health and well-being of people and the planet - individual, physical, mental, social and spiritual - that have been used for centuries. These should be considered alongside other scientific forms of knowledge, to exchange learning and evolve scientific validation of different approaches to improving health and well-being.
7. TCIM systems have evolved in all regions of the world, often with a specifically-trained workforce, with the knowledge, skills and practices based on the unique histories, values, theories, beliefs and experiences indigenous to different cultures that have been used in the maintenance of health and well-being, and in efforts to prevent, diagnose, improve or treat physical and mental illnesses.
8. Contributions of Indigenous knowledges and TCIM systems have included landmark scientific and medical advancements, that underpinned Nobel prize-winning discoveries in health and medicine, conventional pharmaceuticals, and other related innovations.
9. The first principle in medicine is to do no harm. Patient safety is a fundamental principle in the provision of health care and an essential component in the provision of TCIM products, practices and services.
10. The Government of India, as co-host of the first WHO Traditional Medicine Global Summit with the WHO and with the presidency of the G20 Summit 2023 themed “One Earth. One Family. One Future”, upholds the spirit of Vasudhaiva Kutumbakham - of the

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world as one family. It has extended generous hospitality to Summit participants from around the world; and hosts the WHO Global Traditional Medicine Centre that will scale up WHO capacities to support Member States and stakeholders in taking forward the Summit action agenda and other relevant priorities.

**Based on the evidence, discussions and outcomes presented at the Summit, we agree to support the following action agenda.**

**Health and well-being of people and the planet**

11. Scale up our efforts to further implement evidence-based TCIM interventions and approaches in support of the goal of universal health coverage (UHC) and all health-related Sustainable Development Goals (SDGs), and to promote health and well-being of all members of our human family at all ages, and that of the planet that sustains us all.
12. Apply science, technology, innovation and knowledge exchange to validate and unlock, as appropriate, the contribution of TCIM and Indigenous knowledges to advancing planetary health and people's health and well-being across the life course, including through contextual, equitable, and culturally appropriate methods, including for nutrition and lifestyles, in line with principles of sustainable development.
13. Prioritize well-being for societies and economies aligned with the time-tested wisdom and values of Indigenous knowledges and TCIM systems, and as also recommended in the [WHO global framework for achieving well-being](#) and by the [WHO Council on Economics of Health for All](#), shifting political and economic models beyond profits to promote health and well-being, equity of access, shared benefits, and financial protection, and incentivising adoption of evidence-informed TCIM approaches, making this a driving force in achieving the health-related SDGs towards health and well-being for all.

**Global health leadership on traditional, complementary and integrative medicine**

14. Contribute to the development, implementation, monitoring, and transformative impact of the WHO Global Traditional Medicine Strategy for the period 2025–2034, and advocate for increased political and financial commitments at global, regional, national and community levels to translate that strategy into policies and practices for people's health and well-being.
15. Scale up the multi-regional, multi-disciplinary and multi-stakeholder collaborations demonstrated at the Global Summit through the WHO Global Traditional Medicine Centre, that is aligned with and complementary to the work of WHO major offices, to maximize evidence-based benefits of TCIM in global health.
16. Respect and support Indigenous Peoples' stewardship of knowledges, practices and natural resources relevant to the health and well-being of people and the planet, and request WHO and other UN agencies to hold fora to respectfully listen to, exchange knowledge, and meaningfully engage with Indigenous Peoples on health and well-being.

**Research and evidence**

17. Advocate and mobilize research funding commensurate with TCIM demand and use and based on global, regional and national TCIM evidence mapping and research priority-setting, making appropriate use of existing and new research, evidence syntheses and knowledge translation principles and WHO initiatives, such as the Structured Operational Research and Training Initiative (SORT IT) and the Evidence-informed Policy Network (EVIPNet), including to validate proposed TCIM interventions and for

consideration in WHO guidelines and national health policies and systems.

18. Encourage all countries to strengthen capacities and capabilities to produce, translate and use TCIM research and Indigenous knowledges, including by considering the establishment of research chairs and programmes for TCIM at relevant universities and academic institutions, and by setting up and contributing to national, regional and global research repositories and advancements for scientifically validated, safe and effective TCIM interventions.
19. Evolve inclusive and multi-disciplinary research methods to capture research, not only on specific active ingredients for pharmaceutical applications, but also on complex, holistic and individualized TCIM and Indigenous knowledges and lifestyle approaches, thereby creating a multidimensional, multi-disciplinary, inclusive, and culturally appropriate evidence base, while maintaining the highest level of scientific rigour and ethical standards.
20. Support the evidence-based integration of TCIM in national health policies and systems based on highest quality research. Accelerate the production, regulation, and formal utilization of scientifically proven TCIM products and practices, including for consideration in WHO guidelines and national health policies and systems, and by supporting where appropriate their integration in the national list of essential medicines based on rigorous scientific criteria, and ensuring the involvement of TCIM experts in related decisions and implementation.

**Universal health coverage, primary health care and health systems**

21. Facilitate the evidence-informed, appropriate integration of TCIM into national health systems using a primary health care approach, and according to country contexts and priorities, to progressively realize UHC and all health-related SDGs.
22. Support countries to redefine, where appropriate, laws, policies and health services to enable people to make holistic, relevant, evidence-informed choices for their health and well-being, encompassing disease prevention, health maintenance and primary care and planetary health, and including support for the recognition and appropriate regulation of TCIM products, practices and practitioners to ensure safety, accessibility and efficacy of TCIM interventions.
23. Support and promote the development of curricula standards for the education of TCIM practitioners according to country contexts and priorities. Incorporate evidence-based TCIM components into health workforce education related to well-being and health promotion, disease prevention, food and nutrition, lifestyle and behaviour for better health outcomes, including in addressing the burden of noncommunicable diseases and mental health. Recognize the diversity of professions and practices in TCIM and consider expanding the term TCIM to traditional, complementary and integrative health (TCIH) to include broader health, well-being and lifestyle services and practices.

**Data, and routine information systems**

24. Advance policies that promote standardized TCIM documentation, including through expanded and accelerated use of the WHO International Classification of Diseases (ICD-11) to enable integration of evidence and data collection on TCIM in a standardized way within routine health information systems.
25. Set up standardized indicators for TCIM within national health information systems to enable monitoring of the utilization of TCIM practices, the further assessment of their safety and

effectiveness within countries, and the sharing and comparing of data across countries.

26. Establish a global network of TCIM reference clinical centres that can routinely undertake standardized data collection and monitoring based on WHO ICD-11 coding of the implementation
27. And impact of TCIM interventions, both for individual patients and for disease conditions, with standardized information on safety and effectiveness (clinical and economic), as well as community demand and utilization.

#### **Digital health frontiers, including artificial intelligence**

28. Enable the appropriate development and application of digital health technologies, and artificial intelligence (AI) in particular, to advance digital health resources on TCIM for people's health and well-being supported by the development of comprehensive governance models, policies, regulatory frameworks, normative guidance and science- and evidence-based knowledge sharing.
29. Ensure that evidence and equity underpin the development of AI models that otherwise could pose risks to inclusiveness and access, and to people's health and well-being.

#### **Biodiversity and sustainability**

30. Support and promote the implementation of the United Nations Convention on Biological Diversity, including the Kunming Montreal Global Biodiversity Framework, as the most ambitious global agreement on biodiversity conservation, management and sustainable use in the history of environmental governance. Actions should be promoted and taken at all levels to safeguard, restore and sustainably manage biodiversity, and to ensure the fair and equitable sharing of the benefits arising from the use of biodiversity resources, related genetic material and Indigenous knowledges. This includes, inter alia, the call to make available the necessary financial resources for related capacity development, technical and scientific cooperation and knowledge exchange.
31. Ensure full participation of, and consultation with, Indigenous Peoples, including through the establishment of a formal high-level consultation mechanism with Indigenous Peoples linked to the Kunming Montreal Global Biodiversity Framework, to develop, adopt and support the implementation of policies and actions related to the protection of traditional and Indigenous knowledges of health and medicine.

#### **Human rights, equity and ethics**

32. Fully recognize, respect and protect the rights of Indigenous Peoples, as provided in the UN Declaration on the Rights of Indigenous Peoples, including the right to self-determination; right to lands, territories, and resources; the right to maintain, control, protect and develop their lands, territories, and resources; and their right to consultation, to free, prior and informed consent, and for fair and equitable sharing of benefits and intellectual property rights arising from the use of Indigenous knowledges, biodiversity and related genetic resources, including through established mechanisms such as the Nagoya Protocol to the Convention on Biological Diversity.
33. Incorporate ethical methods and processes in TCIM research and practice through the development and implementation of ethical frameworks that are culturally appropriate and socially relevant and inclusive; and build capacities for ethical practices by incorporating these principles in health policy and workforce education.
34. Develop guiding principles for working with communities and Indigenous health practitioners that are founded on the values of free, prior informed consent, confidentiality, mutual respect, open communication, equity, empowerment, ownership and meaningful involvement in decision making, and on the principle of guardianship of Indigenous knowledges and resources.
35. Fully respect diversity of all kinds and commit to implementing gender equality, equity and rights-based approaches to health that enhance participation, build resilience, and empower communities.

#### **Editorial Note:**

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WHO TEAM (Traditional, Complementary and Integrative Medicine)