

# Second WHO Global Summit on Traditional Medicine

**Restoring balance:** The science and practice of health and well-being

17-19 December 2025 | New Delhi, India



2025, नई दिल्ली (और ऑनलाइन)

तान एवं व्यवहार

родной медицине

世界卫生组织传统医学全球峰会

ng Rétablir l'équilibre

December 2025, New Delhi and online

Health and well-being

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Rétablir l'équilibre : la santé et le bien-être

17-19 décembre 2025, à New Delhi et en ligne

Sommet mondial de l'OMS sur la médecine traditionnelle

tablir l'équilibre : la santé et le bien-être en théorie et en pratique

Рétablir l'équilibre

पारंपरिक चिकित्सा पर विश्व स्वास्थ्य संगठन (WHO) का वैश्विक शिखर सम्मेलन

Sommet mondial de l'OMS sur la médecine traditionnelle

Восстановление баланса. Наука и практика на страже здоровья и благополучия

2025年12月17-19日, 新德里及线上

WHO Global Summit on Traditional Medicine

Restaurer l'équilibre : la santé et le bien-être en théorie et en pratique

17-19 de décembre 2025, à New Delhi et en ligne

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Restablecer el equilibrio

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世界卫生组织传统医学全球峰会

Restablecer el equilibrio: la ciencia y la práctica de la salud y el bienestar

17-19 de diciembre de 2025, Nueva Delhi y en línea

Sommito mundial de l'OMS sobre Medicina Tradicional

Restablecer el equilibrio: la ciencia y la práctica de la salud y el bienestar

Jointly organized by WHO and the Government of India





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## WHO Global Traditional Medicine Centre

A World Health Organization (WHO) headquarters department and WHO Global Technical Centre  
c/o

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<https://tm-summit.org>

Photos: © WHO/CBAS Films unless otherwise stated

Design: Lopez Design

Editing and layout: Scriptoria

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# About the WHO Global Traditional Medicine Centre

The World Health Organization (WHO) Global Traditional Medicine Centre stewards a vision for people and planet to flourish through Traditional Medicine that is evidence-based, safe, effective, equitable and sustainable. The Centre provides strategic leadership, scales up research, data and innovation, and sets evidence-based norms and standards to enable quality integration of Traditional Medicine into health and multisectoral systems. The Centre also expands partnerships and mobilizes sustainable financing to increase investment, implementation and impact, supporting Member States and partners to realize the objectives of the *Global Traditional Medicine Strategy 2025–2034* and improve access to trusted traditional, complementary and integrative care worldwide.

**“As we pursue development of our health systems, it is imperative that we strengthen research and regulation of Traditional Medicines in ways that ensure safety, quality and respect for Indigenous knowledge systems.”**

H.E. Dr Aaron Motsoaledi  
Minister of Health,  
Republic of South Africa

## About the Summit

The second WHO Global Summit on Traditional Medicine advanced the growing global movement to restore balance for people and the planet, grounded in the science and practice of Traditional Medicine\*. Guided by the *Global Traditional Medicine Strategy 2025–2034*, the Summit highlighted the latest evidence and innovations, and addressed critical issues including health systems regulation and integration; respectful information exchange with Indigenous Peoples and across knowledge paradigms; biodiversity preservation and intellectual property rights; and the transformative potential of frontier technologies. New products, collaborations and initiatives were presented, alongside concrete pledges and commitments. The full agenda with session descriptions is available at [tm-summit.org/agenda](https://tm-summit.org/agenda), the full list of session speakers and their biographies is available at [tm-summit.org/speakers](https://tm-summit.org/speakers), and recordings of each session are available at: [tm-summit.org/#session-recordings](https://tm-summit.org/#session-recordings).

\* The term Traditional Medicine is used to encompass all of the following:

- **Traditional medicine:** codified or non-codified systems for healthcare 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:** additional healthcare 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.

# Highlights from the Summit

- Launch of the [WHO Traditional Medicine Global Library](#) – the world’s most comprehensive digital repository for Traditional Medicine, featuring 1.6 million scientific records to strengthen evidence and knowledge sharing on Traditional Medicine.
- Introduction of the Global Research Priorities Roadmap to guide research and close evidence gaps in Traditional Medicine.
- Announcement of 21 breakthrough [Traditional Medicine Health Heritage Innovations](#) from more than 1100 submissions.
- Declaration of [27 commitments from Member States](#) and 59 commitments from non-state actors to advance the goals of the *Global Traditional Medicine Strategy 2025–2034*.
- Launch of the first [WHO Strategic and Technical Advisory Group on Traditional, Complementary and Integrative Medicine](#).
- Announcement of the [Delhi Declaration on Traditional Medicine](#) – a landmark outcome document from the Summit. Member States set out a shared agreement on how to advance the implementation of the *Global Traditional Medicine Strategy 2025–2034*.
- Release of 10 [videos](#) exploring Traditional Medicine perspectives from 15 countries.
- Inclusion of 921 photos in the WHO Multimedia Library showcasing Traditional Medicine practices from around the world.
- Interactive chat and polling features in all Summit sessions, inviting live participation among more than 21 000 registered online viewers from more than 100 countries in all six WHO regions.

## In numbers



3 days



158 speakers



~5000 visitors to  
Discovery Experience



27 Member States  
making SMART  
commitments



193 599 minutes  
viewed online



77 000 web visits



769 delegates in Delhi  
from 107 countries



21 000+ online  
registrations



25 Ministers



1174 innovation  
submissions, resulting  
in 21 finalists



305 media  
articles



2.45m social media  
impressions

# Opening ceremony

The opening ceremony of the second WHO Global Summit on Traditional Medicine emphasized the urgent need to strengthen research and regulation of Traditional Medicine, respect Indigenous knowledge as a core component of global health, and build inclusive health systems through equity, trust and dialogue.

Recommendations for action given by speakers:

- Galvanize new investments in Traditional Medicine guided by science, ethics and equity;
- Reorient health systems towards the prevention of diseases;
- Leverage digital innovations;
- Empower communities as the foundation of universal health; and
- Develop a global framework for regulating Traditional Medicine practices and products.



A video message from WHO Director-General Dr Tedros Adhanom Ghebreyesus at the opening ceremony of the second WHO Global Summit on Traditional Medicine.  
© WHO/Chris Archer



**H.E. Prataprao Ganapatrao Jadhav**  
Minister of State for Ayush, Republic of India



**H.E. JP Nadda**  
Minister of Health and Family Welfare, Republic of India



“This opening session has been carefully designed to set the tone for the days ahead, anchored in the theme of “Restoring Balance”. A concept that lies at the very heart of Traditional Medicine and speaks powerfully to today’s global health and planetary challenges.”

H.E. Dr Rajesh Kotecha  
Vice Minister and Secretary, Ministry of Ayush, Republic of India



“Traditional Medicine plays an essential role in protecting public health, and China remains committed to its inheritance, innovation and high-quality development.”

H.E. Professor Huang Luqi  
Vice Commissioner, National Administration of Traditional Chinese Medicine, People’s Republic of China



“South Africa reaffirms its commitment to working with WHO and other nations to build inclusive, resilient and sustainable health systems that leave no one behind.”

H.E. Dr Aaron Motsoaledi  
Minister of Health, Republic of South Africa



“Indigenous knowledge is not a footnote in the history of medicine and healthcare, it is a living contribution to strong natural and global health systems, offering relational approaches to balance, prevention and care that complements biomedical sciences.”

Rodrigo Eduardo Paillalef Monnard  
Member, United Nations Permanent Forum on Indigenous Issues



“Advancing Traditional Medicine is an evidence-based, ethical and environmental imperative.”

Dr Shyama Kuruvilla  
Director a.i, WHO Global Traditional Medicine Centre



Session speakers (left to right):

- Dr Caterina Boehme**, Officer in Charge, WHO South-East Asia Region
- Monalisa Dash**, Joint Secretary, Ministry of Ayush, Republic of India
- Dr Goh Cheng Soon**, Director, Traditional and Complementary Medicine Division, Ministry of Health, Malaysia, and **Professor Motlalepula Matsabisa**, Professor of Pharmacology, Director of the Indigenous Knowledge Systems Health Lead Programme, University of the Free State, Republic of South Africa
- Moderator: **Rini Simon Khanna**

The WHO Traditional Medicine Global Library was launched during the Summit. The library is the world's most comprehensive digital repository for Traditional Medicine, featuring 1.6 million scientific records to strengthen evidence and knowledge sharing on Traditional Medicine.



H.E. Narendra Modi, Prime Minister of India and WHO Director-General Dr Tedros Adhanom Ghebreyesus launching the Traditional Medicine Global Library during the closing ceremony on 19 December 2025 © Government of India



**“The WHO Traditional Medicine Global Library has the potential to serve not only as a repository, but also as a platform for ethical stewardship.”**

Dr Gustavo Rosell de Almeida  
Pan American Health Organization, spoken during parallel session 4.B: Harnessing ancestral knowledge in the digital age – equity, ethics and preservation

## Plenary 1:

# Restoring balance: The science and practice of health and well-being

Plenary Session 1 explored how Traditional Medicine systems conceptualize health as balance, and how this perspective can inform contemporary health challenges. Presentations underscored that Traditional Medicine is a living, evolving system with growing global demand. The Republic of India's institutional approach – including regulation, education, research, digitalization and integration into health services – was presented as a model for large-scale implementation. It was further emphasized that traditional knowledge systems are not supplementary, but foundational to resilient health systems and biodiversity stewardship.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Institutionalize traditional health practitioners within national health systems;
- Develop structured, context-relevant education and training programmes;
- Establish WHO regional centres for Traditional Medicine research linked to the Global Traditional Medicine Centre;
- Mobilize political leadership, ministries and the private sector; and
- Develop an African Traditional Medicine *Materia Medica*, supported by monographs, pharmacopoeias, and ethical access and benefit-sharing frameworks.



“Restoring balance in the science and practice of well-being means addressing the physiological, temporal, linguistic, epistemic and planetary dimensions all together.”

**Rutendo Lerato Ngara**  
Elder



“We are invited to reflect on a central question: What would global health look like if our systems – scientific, economic and ecological – were truly in balance with knowledge, people and nature?”

**Dr Saia Ma'u Piukala**  
WHO Regional Director for the Western Pacific



“The need for just and reciprocal partnerships is absolutely critical. We need to move along this continuum from contractual, consultative, collaborative approaches to collegial and Indigenous-led approaches within this space.”

**Dr Nicole Redvers**  
Associate Professor, Western Research Chair and Director of Indigenous Planetary Health, University of Western Ontario, Canada



“Traditional Medicine systems share a common understanding: that health is not merely the absence of disease but a dynamic state of balance within the individual, within communities and between people and the natural world.”

**Sione Tu'itahi**  
Executive Director, Health Promotion Forum of New Zealand



Session speakers (from left to right):

**H.E. Dr Rajesh Kotecha**, Secretary, Ministry of Ayush, Republic of India

**H.E. Professor Huang Luqi**, Vice Commissioner, National Administration of Traditional Chinese Medicine, People's Republic of China

**Professor Motlalepula Matsabisa**, Professor of Pharmacology, Director of the Indigenous Knowledge Systems Health Lead Programme, University of the Free State, Republic of South Africa

## Parallel 1.A: Traditional Medicine and the continuum of knowledge in health

This session examined health knowledge as a continuum shaped by historical transmission, lived practice and scientific inquiry. Speakers emphasized that evidence for Traditional Medicine is plural and cannot be reduced to a single biomedical hierarchy. The WHO Traditional Medicine Global Library was presented as an important platform established to support ethical preservation and sharing of diverse knowledge systems, with respect for governance, consent and contextual integrity.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Integrate diverse knowledge systems into health frameworks;
- Recognize and preserve plural evidence systems;
- Protect and decolonize Indigenous and traditional knowledge, and address power asymmetries in knowledge preservation;
- Support the WHO Traditional Medicine Global Library and other global traditional knowledge digital platforms; and
- Promote holistic, inclusive health futures.

## Parallel 1.B: Traditional Medicine knowledge – balancing access and benefit-sharing

This session examined ethical and governance challenges surrounding access to Traditional Medicine knowledge, highlighting mistrust arising from extractive research and inadequate benefit sharing mechanisms. Speakers emphasized that communities are rights holders, not data providers, and that equitable innovation requires co creation, co ownership and strong community governance. Digitalization and AI were recognized as both opportunities and risks, underscoring the need for tiered, decentralized knowledge systems to protect sensitive and sacred knowledge.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Shift from compensation to co ownership;
- Institutionalize community-led governance and consent;
- Align legal frameworks across health, biodiversity and intellectual property;
- Design knowledge systems that ensure accountability, equity and trust.

## Parallel 1.C: Healthy ecosystems, healthy futures through Traditional Medicine

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Discussions in this session emphasized the inseparable relationship between human health and ecosystem health. Speakers introduced the concept of planetary *salutogenesis*, a health framework that shifts the focus from disease control to regenerative capacity. Indigenous perspectives framed “Mother Earth as a living responsibility” and Traditional Medicine as a bridge between people, ecosystems and generations. Biodiversity conservation was highlighted as a prerequisite for sustainable health systems.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Align strategy implementation efforts with existing global commitments to biodiversity and Indigenous rights, and integrate Indigenous health determinants as indicators of good health and well-being;
- Adopt ecosystem indicators alongside clinical ones and “Make Mother Earth a core health actor”;
- Promote multisectoral engagement and embed Indigenous governance mechanisms and processes in this process, moving beyond participation;
- Honour Indigenous evidence frameworks and research methodologies (e.g. “two-eyed seeing” and radical listening); and
- Protect ecosystems and knowledge and ensure just benefit-sharing.

## Parallel 1.D: Traditional Medicine – bringing balance to governance, equity and resources

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This session explored governance models for integrating Traditional Medicine into health systems, drawing on country experiences from Africa, Asia, the Middle East and Latin America. Presentations highlighted the importance of strong legal frameworks, regulatory oversight, workforce development and sustainable financing. Traditional Medicine was framed as a pillar of health sovereignty, particularly where it remains the primary source of care.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Allocate dedicated funding for Traditional Medicine research, data systems, and pharmacovigilance aligned with decision-making needs;
- Ensure equity and community voice through the representation of women, Indigenous knowledge holders, healers and patients in regulatory bodies, research governance and benefit-sharing mechanisms;
- Adopt risk-based, proportionate regulatory approaches tailored to diversity in Traditional Medicine, supported by capacity-building, digital tools and international convergence guided by WHO frameworks;
- Expand insurance, support local production and rebalance research funding for equitable financing of Traditional Medicine; and
- Include civil society representatives in governance structures to improve alignment with patient values and community priorities.

## Plenary 2:

# Investing in science to drive Traditional Medicine progress

Plenary Session 2 emphasized the critical role of science, sustained investment and innovation in advancing Traditional Medicine as a foundation of people- and planet-centred health. It highlighted how rigorous research, methodological harmonization, strategic financing and innovation ecosystems can elevate Traditional Medicine to an evidence-driven global health movement. By linking resource mobilization, scientific collaboration and resilient health systems, the session aimed to rally global commitment to investment in research priorities, and acceleration of Traditional Medicine's contribution to sustainable development and universal health coverage.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Align traditional knowledge paradigms with existing appropriate and validated research approaches;
- Advance and extend traditional and modern research methods to provide appropriate and credible evidence on the benefits of Traditional Medicine;
- Invest in Traditional Medicine at scale and strategically;
- Define clear research priorities; and
- Foster cross-disciplinary and multi-sector collaboration.



“Traditional Medicine research must meet modern scientific standards while staying true to its cultural roots.”

**Professor Lisa Askie**  
Scientist and Methods Lead,  
Science Division, WHO (online)



“By bridging health science paradigms, we can develop a new science for health.”

**Dr Sylvie Briand**  
Chief Scientist, WHO Science  
Division



“To modernize Traditional Medicine, scientific and technological advances alone are not enough.”

**Professor Terence Lau**  
Interim Chief Innovation Officer,  
Hong Kong Baptist University, China,  
Hong Kong SAR



“Investing in traditional, complementary and integrative medicine can itself drive advances in science.”

**Professor Bhushan Patwardhan**  
Savitri Bhai Pule University, Pune,  
Republic of India



Session speakers (from left to right):

**H.E. Dr Celso Vaz do Nascimento Matos**, Minister of Health, Democratic Republic of Sao Tome and Principe  
**Professor Dennis A. Ostwald**, CEO, WifOR Institute  
**Professor John Reeder**, Former Director, Tropical Diseases Research Programme, WHO

## Parallel 2.A: Translating the WHO Traditional Medicine Research Roadmap into global action

This session emphasized underinvestment in Traditional Medicine research, which has created systemic gaps in evidence, infrastructure and the careers of researchers. The speakers agreed that Traditional Medicine requires research frameworks that ensure safety and credibility without erasing cultural, contextual and holistic foundations. Discussions highlighted equity, power and legitimacy challenges, including marginalization of Traditional Medicine researchers, epistemic hierarchies within biomedicine and lack of mutual respect between systems.



[Session technical brief](#)

Recommendations for action given by speakers:

- Address power dynamics and legitimacy barriers, using diplomacy, coalition building and narrative change;
- Establish dedicated national and regional funding mechanisms for Traditional Medicine research;
- Develop Traditional Medicine-specific research methodologies, standards and reporting frameworks that explicitly accommodate complexity and contextual knowledge;
- Prioritize integration rather than competition with conventional medicine;
- Implement best-practice standard operating procedures for non-codified and verbal traditions, prioritizing safety while preserving ancestral knowledge; and
- Create clear career pathways and institutional homes for Traditional Medicine researchers, particularly in low- and middle-income countries, to retain talent and enable future planning.

## Parallel 2.B: Research methodologies and applications

This session introduced *paradigmatic alignment* – ensuring that research methods and practical applications are consistent and respectful of underlying knowledge systems. The speakers noted Traditional Medicine’s holistic, adaptive nature and stressed that capturing this complexity is essential for preserving scientific integrity and preventing misinformation. Bridging research and policy requires *epistemic justice*, recognizing culturally grounded knowledge, spirituality and human–environment relationships as integral to evidence-informed health systems and universal health coverage.



[Session technical brief](#)

Recommendations for action given by speakers:

- Adopt paradigmatic alignment as a foundational principle for Traditional Medicine research;
- Modernize evidence standards and methodologies to capture complexity, whole-system interventions and real-world practice;
- Embed epistemic justice, ethics and co-creation in research and policy;
- Strengthen guideline development and processes of evidence synthesis to be Traditional Medicine-sensitive; and
- Invest in capacity-building, collaboration and implementation science to translate evidence from Traditional Medicine into policy and practice.

## Parallel 2.C: The science of well-being – evidence from Traditional Medicine

Discussions in this session focused on how evidence-informed Traditional Medicine strengthens health system resilience, supports equity and addresses global challenges such as the chronic disease burden and antimicrobial resistance. Traditional and community-based systems play a central role, particularly where formal health services are limited, inaccessible or not culturally trusted. Speakers highlighted a growing body of high-quality evidence supporting Traditional Medicine interventions for priority areas such as mental health, chronic pain, self-care and integrative oncology.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Strengthen collaboration between traditional systems and biomedical care for mental health and well-being;
- Integrate Traditional Medicine into health systems using evidence-informed and culturally appropriate models;
- Leverage Traditional Medicine practices to support lifestyle and behavioural change; and
- Advance Traditional Medicine research through multiomics (e.g. ayurgenomics) and AI models.

## Parallel 2.D: From innovation to investment – building the Traditional Medicine pipeline for scale and equity

This session explored how Traditional Medicine could be scaled responsibly without eroding its diversity, cultural integrity or community roots. Traditional Medicine does not lack innovation or demand, but it does lack translation infrastructure. In addition, current financing models are misaligned with the realities of Traditional Medicine. Community and Indigenous leadership must sit at the forefront of innovation in Traditional Medicine, ensuring free, prior and informed consent for the use of traditional knowledge.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Establish translation pathways to move Traditional Medicine innovations from pilot success to scalable, sustainable impact;
- Invest strategically to support research infrastructure, capacity and equitable scaling;
- Develop adaptable, transparent and collaborative assessment frameworks for Traditional Medicine products, interventions and policies;
- Create public–private–community partnerships to de-risk early-stage innovations; and
- Decolonize Traditional Medicine innovation by centring on Indigenous epistemologies and practices.



## Parallel 2.E: Impact of meditation on health – restoring balance from individual to social and ecological well-being

This session explored meditation and mindfulness as evidence-informed approaches that can support health promotion and prevention. Speakers highlighted a growing body of neuroscience, clinical trials and health economics evidence, showing benefits for mental health, chronic pain, healthy ageing and immune-related regulation. The discussion also emphasized system-level relevance: supporting a resilient health and care workforce, improving clinician–patient communication, and contributing to sustainable, scalable public health approaches. Examples from policy and practice showed how mindfulness can be embedded in real-world settings.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Invest in rigorous, policy-relevant research, including on effectiveness, cost-effectiveness, mechanisms of action, immediate and long-term outcomes, what constitutes safe and appropriate approaches/training for different populations and settings;
- Embed mindfulness-based self-care and resilience practices into frontline healthcare delivery and workforce support to address burnout and strengthen quality of care;
- Leverage digital and hybrid delivery models to expand access and scalability, especially for low-resource contexts, ageing and underserved communities; and
- Establish evidence standards and evaluation frameworks that support recognition of mindfulness as essential healthcare, enabling uptake by policy-makers, medical education systems, insurers and employers.



Members of the in-person audience at Parallel Session 4.C. Sessions were also live-streamed for a global audience.

## Plenary 3:

# Re-imagining health systems for balance, safety and resilience

This plenary session introduced the *Global Traditional Medicine Strategy 2025–2034* and outlined its vision for advancing integration of Traditional Medicine into health systems. The speakers felt that re-imagining health systems is an urgent priority, particularly for countries facing climate vulnerability, fragility, conflict and resource constraints, where existing models are insufficient to meet the health needs of their inhabitants. Speakers agreed that context matters: countries are at very different stages of health system maturity, but all face shared challenges that call for people-centred, culturally relevant and resilient models of care.



[Session technical brief](#)

Recommendations for action given by speakers:

- Define context-specific national Traditional Medicine integration models using the WHO conceptual framework to clarify roles, pathways and system design;
- Strengthen risk-based regulation of Traditional Medicine products, practices and practitioners, aligned with WHO guidance and national health system frameworks;
- Align financing and industrial policy with Traditional Medicine integration, including incentives for credit provision, support and targeted investment in micro, small and medium-sized enterprises;
- Invest in standardization, validation, research and development, quality assurance and technology to ensure safety, effectiveness and credibility; and
- Integrate Traditional Medicine into national health information systems using WHO standards, supported by standardized documentation and data systems.



“There is not a single model of integration that is going to work in every country or every context. In fact, it’s not even clear there is a single best or ideal model that we should all be striving for.”

**Professor Heather Boon**  
Leslie Dan Faculty of Pharmacy,  
University of Toronto, Canada



“Integration is not about choosing between traditional and biomedical systems: it is about designing health systems that are people centred, evidence informed and culturally grounded.”

**Dr Adham Ismail**  
Director of Programme  
Management, WHO Eastern  
Mediterranean Regional Office



“As you can see from [WHO’s conceptual framework for integration of Traditional Medicine into health systems], integration is complex. It is not a simple process: Traditional Medicine is a complex issue connected with multiple factors.”

**Dr Sung Chol Kim**

Unit Head, Traditional Medicine Norms, Standards and Integration Unit, WHO Global Traditional Medicine Centre



“Sustained collaboration between WHO and Member States strengthens primary healthcare, builds resilient health systems and ensures that Traditional Medicine contributes meaningfully to people-centred universal health coverage.”

**Dr Goh Cheng Soon**

Director, Traditional and Complementary Medicine Division, Ministry of Health, Malaysia



Session speakers (from left to right):

**Professor Sachin Chaturvedi**, Vice Chancellor, Nalanda University, Republic of India

**Dr Anchalee Chuthaputti**, Former Director, Department of Thai Traditional and Alternative Medicine, Kingdom of Thailand

**Dr Neil Gower**, Senior Lecturer, Department of Complementary Medicine, University of Johannesburg, Republic of South Africa



Facilitators lead a “practising balance” break. © WHO/Chris Archer

## Parallel 3.A: Global frameworks and country implementation

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This session presented diverse country models for integrating Traditional Medicine into health systems. Speakers agreed that no single integration model fits all contexts, and that there is a range of effective approaches shaped by history, culture, governance and health system design. Patient-centred care is the unifying goal across models.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Design Traditional Medicine integration strategies based on current community practices;
- Adopt context-appropriate integration models reflecting national and cultural conditions;
- Move beyond evidence generation alone;
- Measure integration success by patient-centred outcomes, including satisfaction, safety, cultural competence, continuity of care and equity; and
- Use WHO integration frameworks and assessment tools to evaluate national readiness, identify gaps and guide deliberate, staged Traditional Medicine integration.

## Parallel 3.B: Quality, efficiency and patient safety

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Discussions in this session explored quality and patient safety in Traditional Medicine as a non-negotiable foundation for its safe and effective integration into health systems. Speakers stated that scaling Traditional Medicine requires systems, not isolated efforts, and that formal regulation and accreditation are essential. It was also agreed that patient and community engagement is central to safety. Education, training and workforce capacity are bottlenecks, and education alone is insufficient without leadership, infrastructure and supportive environments.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Provide access alongside quality standards, safety and system integration;
- Establish policies that call for patient representation in Traditional Medicine governance and safety committees;
- Practise principles of openness and transparency;
- Strive for excellence in Traditional Medicine, ensuring safety for all; and
- Learn from patient experience for safety improvements, and develop and train networks of patient and community advocates.

## Parallel 3.C: Regulation of Traditional Medicine products

This session examined the complexity and diversity of regulatory approaches for Traditional Medicine products, emphasizing that regulation must balance public health protection with innovation and system sustainability. Speakers highlighted that Traditional Medicine should be regulated as part of a broader health system. They emphasized that the quality and safety of TM products depends on end to end oversight, from raw material identification to post market surveillance, with regulatory models tailored commensurate to national contexts.

Recommendations for action given by speakers:

- Adopt risk based, proportionate regulatory approaches for Traditional Medicine products;
- Define evidence models and benchmarking tools for the regulation of such products;
- Avoid unnecessarily stringent pharmaceutical requirements;
- Strengthen quality assurance across the value chain; and
- Align national frameworks around shared core principles of safety, quality and evidence.

## Parallel 3.D: Practice, practitioners and the relevance of Traditional Medicine in health system resilience

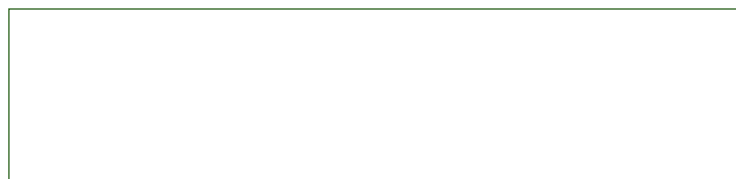
This session discussed how the regulation of Traditional Medicine practices and practitioners is foundational to health system resilience, shaping patient safety, practitioner competence, public trust and workforce credibility. Education, regulation and service delivery are tightly linked, and safe integration depends on competence-based training, clear licensing pathways and transparent regulatory oversight across all tiers of a health system. Speakers agreed that resilient health systems benefit from diversity and collaboration, with Traditional Medicine contributing adaptability and continuity of care when integrated across primary, referral and emergency services.

Recommendations for action given by speakers:

- Strengthen education and research systems to generate credible, context-relevant evidence;
- Adopt context-appropriate models of collaboration or integration, recognizing that approaches must reflect national governance arrangements, workforce structures and health system maturity;
- Establish robust quality assurance and regulatory frameworks, supported by practical implementation tools; and
- Ensure sustained government leadership and financing to support trust-based partnerships between conventional and traditional practitioners.



[Session technical brief](#)



## Plenary 4:

# Measuring progress and charting the way forward: Standards, data and responsible AI – from ancestral knowledge to action

This plenary session explored accountability within Traditional Medicine, and how Traditional Medicine contributes to evidence-based, transparent and equitable health systems. Speakers highlighted that a robust accountability system depends on reliable and complete data sets – it is not possible to plan and prioritize services, assess quality or allocate budgets if data is not being recorded, measured and analysed. Effective governance does not diminish Traditional Medicine; it strengthens it. Speakers also discussed the power of data and technology, and the responsibility we all have in ensuring its fair and equitable use.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Ensure practices are safe, evidence informed, ethically governed and accountable;
- Strengthen governance, align Traditional Medicine oversight with national regulatory authorities, and develop guidelines that respect Indigenous knowledge;
- Support the establishment of a WHO-aligned Traditional Medicine Global Consortium;
- Create ecosystems to support research, align agriculture and community health, and support catalytic financing;
- Build networks, capabilities and systems to improve health financing; and
- Harness the power of data and technology.



“In my work, our goal is not to collapse knowledge into a single standard, nor to make truth claims, but to represent knowledge as it is articulated by experts within those traditions.”

**Dr Michael Stanley Baker**  
Historian of Chinese Medicine,  
Nanyang Technological University,  
Republic of Singapore



“Accountability is not a constraint; it is a public good. It needs to be integrated into national plans, financing arrangements and service delivery models.”

**Dr Kalipso Chalkidou**  
Director of Performance, Financing  
and Delivery, WHO (online)



“Documentation, governance, and data and technology must come together to create the foundation that allows Traditional Medicine to stand confidently alongside other forms of care.”

**Dr Hans Kluge**  
WHO Regional Director for Europe



“Integration is not about choosing between Traditional Medicine and science, it is about building bridges between knowledge systems, community systems and institutions – and ultimately between people and the care they need.”

**H.E. Dr Rishad Secheran**  
Minister of Health, Republic of  
Trinidad and Tobago



Session speakers (from left to right):

**Dr Daniel Miele Amado**, Consultant, Ministry of Health, Federative Republic of Brazil

**H.E. Anil Kumar Bachoo**, Minister of Health and Wellness, Republic of Mauritius

**H.E. Madalitso Chidumu Baloyi**, Minister of Health and Sanitation, Republic of Malawi

**Professor Madhulika Banerjee**, Department of Political Science, Delhi University, Republic of India

**Dr Robert Jakob**, Head, Classifications and Terminologies, WHO

**Dr Bakhuti Shengelia**, Senior Consultant, Alira Health

## Parallel 4.A: Standards, data and information systems – the foundation for progress

This session explored how WHO tools enable the generation of standardized, inter-operable Traditional Medicine data that strengthens measurement, accountability and governance. The Traditional Medicine Data Network (TMDN) was introduced, which links global standards, including the International Classification of Diseases (ICD-11) and International Classification of Health Interventions coding systems with Minimum Data Set (MDS-TM-RHIS), alongside tools for population-based data (World Health Survey+) and financial transparency (health expenditure tracking via the System of Health Accounts 11). Speakers agreed that Traditional Medicine data should be integrated with mainstream health information systems. However, gaps must also be tackled, including data equity and access issues, the incorporation of cultural context, and lagging progress in expanding the use of Traditional Medicine data beyond classical health settings.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Begin Traditional Medicine data standardization, using the MDS-TM-RHIS as an entry point;
- Formally adopt the WHO data standards for Traditional Medicine;
- Embed ICD-11 Traditional Medicine coding into national health information systems, electronic medical records and national insurance claim systems;
- Expand data collection beyond hospitals; and
- Adapt ICD-11 Traditional Medicine data systems to track disease progression and treatment outcomes.

## Parallel 4.B: Harnessing ancestral knowledge in the digital age – equity, ethics and preservation

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This session reviewed ethical, equitable and community-driven frameworks for the documentation and digital preservation of ancestral and traditional knowledge. Speakers highlighted that Indigenous Peoples are rights-holders – not beneficiaries or data providers – with authority over documentation, access conditions and use, including the right for traditional knowledge not to be documented or shared. It was discussed that the existing legal and intellectual property frameworks for non-codified knowledge are inadequate and poorly suited to oral, sacred, community-held knowledge in digital and AI contexts, necessitating layered and decentralized governance solutions.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Institutionalize Indigenous governance by design across all traditional knowledge documentation, digitalization and AI initiatives;
- Integrate gender, caste, and ethnic and social equity considerations into frameworks;
- Explicitly recognize Indigenous women as decision-makers, and ensure that benefit-sharing and recognition mechanisms address internal inequities;
- Apply free, prior and informed consent (FPIC) as a continuous, collective and revocable process, including the right not to document or to withdraw or destroy records once objectives are met; and
- Advance and operationalize the Global Plan of Action for the Health of Indigenous Peoples, currently in development, through active Indigenous leadership and broad participation in open consultations.

## Parallel 4.C: From policy to practice – responsible AI and digital innovation in Traditional Medicine

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Discussions in this session examined how responsible, ethical and inclusive digital transformation can align technology in Traditional Medicine. Speakers stressed the need to establish policy frameworks, data governance and standards before AI deployment. High quality, inter-operable data and standard data were seen as essential, given the contextual nature of Traditional Medicine. The importance of “glass box” models that support interpretability and practitioner reasoning must be clearly defined to stakeholders like patients, practitioners and regulators. Current “black box” models are viewed as incompatible with traditional grounded in clinical judgement, patient trust and culturally embedded knowledge.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Establish robust governance and policy foundations for AI, by defining clear guidance on acceptable use, and developing global standards for Traditional Medicine-relevant datasets, including on ethical safeguards, data provenance and equitable benefit-sharing mechanisms;
- Invest in structured data-capture tools to document traditional diagnostic information;
- Launch training modules for practitioners, researchers, regulators and journal editors;
- Embed equity-by-design principles across AI development, deployment and procurement processes; and
- Strengthened and sustained international partnerships to enable scalable, culturally grounded and context-appropriate AI ecosystems.

## Parallel 4.D: Charting the way forward for progress with accountability

This parallel session aimed to advance the realization of the *Global Traditional Medicine Strategy 2025–2034*. Speakers discussed accountability as the missing engine of progress, and emphasized that strategies without monitoring, metrics or responsibility are at risk of remaining symbolic rather than catalysing action. Regulation and governance can enable accountability, but only when paired with inclusive design, ethical research frameworks and respect for living traditions. Discussions highlighted tension between “integration” and “collaboration”, with many stakeholders – especially Indigenous and community representatives – questioning who is integrating whom and on whose terms.

 [Session technical brief](#)

Recommendations for action given by speakers:

- Prioritize real-world, pragmatic generation of evidence, supported by coherent data systems, ethical knowledge repositories and use of WHO tools such as ICD-11 Traditional Medicine modules and the International Classification of Health Interventions;
- Increase research funding for Traditional Medicine;
- Redefine integration as collaboration and co-creation;
- Embed accountability into technology-enabled platforms for Traditional Medicine, with standards to prevent misinformation; and
- Measure success by patient-centred and equity outcomes, not just service availability – focusing on safety, dignity, access, cultural respect and social justice.



New Delhi's Crow – a multidisciplinary art and storytelling company whose work can be encountered through forms including performance, film, music and immersive experiences – was commissioned to perform creations that embodied the Summit's theme of restoring balance. Crow presented the dance *Aasmaniyat* during the opening ceremony and the dance *Bloom* during the closing ceremony.

# Ministerial Roundtable

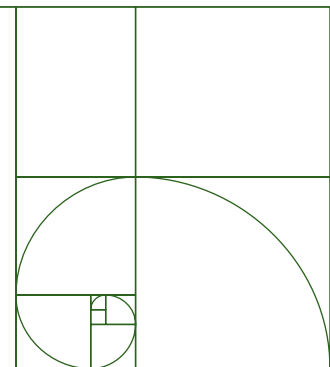


More than two dozen ministers participated in the Summit's Ministerial Roundtable on 19 December 2025.

The Summit convened a Ministerial Roundtable with participation from 25 Member States. The meeting provided a platform for the launch of 27 specific, measurable, achievable, relevant and time-bound (SMART) commitments towards the objectives of the *Global Traditional Medicine Strategy 2025–2034*, signalling a new era for Traditional Medicine.

The Roundtable was opened by H.E. Arindam Bagchi, Ambassador and Permanent Representative of India to the United Nations and other International Organizations in Geneva, with a welcome address from H.E. Prataprao Ganapatrao Jadhav, Minister of State for Ayush, Republic of India. Both highlighted India's leadership in strengthening healthcare through Traditional Medicine and advancing integrative healthcare models.

Dr Tedros Adhanom Ghebreyesus, WHO Director-General, emphasized that alongside commitments made by Member States, global investment will be required to support evidence-based Traditional Medicine within health systems, including through platforms such as the WHO Traditional Medicine Global Library.



WHO Member State representatives spoke in support of Traditional Medicine integration and the *Global Traditional Medicine Strategy 2025–2034*. H.E. Professor Huang Luqi, Vice Commissioner of the National Administration of Traditional Chinese Medicine, People's Republic of China, noted that China has established more than 100 000 Traditional Chinese Medicine centres and 40 000 community health centres, with strong integration into public health services. H.E. Dr Sudha Sharma Gautam, Minister of Health and Population, Nepal, highlighted that Nepal looked forward to implementing ICD-11 Traditional Medicine modules and aligning national strategies accordingly, with a clear roadmap for 2026. H.E. Mohamed Omary Mchengerwa, Minister of Health, United Republic of Tanzania, shared that the country has around 2000 Traditional Medicine

facilities with 2700 Traditional Medicine practitioners registered, and plans to integrate Traditional Medicine into the national health system by 2030.

All participating countries made SMART commitments for Traditional Medicine investment and implementation in line with the goals of the Global Strategy. These collective SMART commitments focus on integrating Traditional Medicine into primary healthcare, strengthening regulation and safety standards, investing in research, building inter-operable data systems to track outcomes, and advancing global cooperation. Commitments will be tracked and monitored, with progress shared at the next Global Summit in 2027. [View the commitments here.](#)

## Ministers in attendance

**H.E. Mawlawi Noor Jalal Jalali**, Minister of Public Health, Islamic Republic of Afghanistan

**H.E. Jerome Walcott**, Minister of Health and Wellness, Barbados

**H.E. Malachie Manouada**, Minister of Public Health, Republic of Cameroon

**H.E. Professor Huang Luqi**, Vice Commissioner, National Administration of Traditional Chinese Medicine, People's Republic of China

**H.E. Dr Vishwa Mahadeo**, Director General, Minister of Health, Co-operative Republic of Guyana

**H.E. Dr Atonio Lalabalavu**, Minister of Health and Medical Services, Republic of Fiji

**H.E. Jagat Prakash Nadda**, Union Minister of Health and Family Welfare, Republic of India

**H.E. Prataprao Ganapatrao Jadhav**, Minister of State for Ayush, Republic of India

**H.E. Dr Aden Duale**, Cabinet Secretary for Health, Republic of Kenya

**H.E. Dr Teyah Sackie Moore**, Assistant Minister of Health for Curative Services, Republic of Liberia

**H.E. Madalitso Chidumu Baloyi**, Minister of Health and Sanitation, Republic of Malawi

**H.E. Abdulla Nazim Ibrahim**, Minister of Health, Republic of Maldives

**H.E. Dr Anil Kumar Singh Bachoo**, Minister of Health and Wellness, Republic of Mauritius

**H.E. Marcus H. Samo**, Secretary of Health and Social Affairs, Federated States of Micronesia

**H.E. Dr Sudha Sharma Gautam**, Minister of Health and Population, Nepal

**H.E. Dr Ma. Teresa Co-Iñigo**, Director General, Institute of Traditional and Alternative Health Care, Republic of the Philippines

**H.E. Dr Celso Vaz do Nascimento Matos**, Minister of Health and Women's Rights, Democratic Republic of Sao Tome and Principe

**H.E. Dr Marvin Fanny**, Minister of Health, Republic of Seychelles

**H.E. Dr Aaron Motsoaledi**, Minister of Health, Republic of South Africa

**H.E. Sarah Cleto Hassan Rial**, Minister of Health, Republic of South Sudan

**H.E. Dr Nalinda Jayatissa**, Minister of Health and Mass Media, Democratic Socialist Republic of Sri Lanka

**H.E. Dr Jamoliddin Abdullo Abdullozoda**, Minister of Health and Social Protection of Population, Republic of Tajikistan

**H.E. Mohamed Omary Mchengerwa**, Minister of Health, United Republic of Tanzania

**H.E. Pattana Promphat**, Minister of Public Health, Kingdom of Thailand (video address)

**H.E. The Honourable Dr Rishad Seecheran**, Minister in the Ministry of Health, Republic of Trinidad and Tobago

# Closing ceremony



H.E. Narendra Modi, Prime Minister of India and WHO Director-General Dr Tedros Adhanom Ghebreyesus entering the closing ceremony together © Government of India

**WHO Director-General Dr Tedros Adhanom Ghebreyesus** and **H.E. Narendra Modi, Prime Minister of India** presided over the closing ceremony of the Summit, which culminated in the launch of the *Delhi Declaration on Traditional Medicine*.

**“Restoring balance is no longer just a global cause – it has become a global urgency and addressing it demands that we act with accelerated pace and resolute commitment”**

H.E. Narendra Modi  
Prime Minister of India

H.E. Narendra Modi, Prime Minister of India addressed participants and reaffirmed the significant steps taken during the Summit to promote global collaboration in Traditional Medicine. He emphasized the importance of integrating Traditional Medicine into global healthcare systems, which, alongside biomedicine, can help face the growing imbalances in health and well-being.

The Government of India also announced a new WHO Regional Office for South-East Asia building in Delhi, several new tools and the Ayush Mark, a global benchmark for quality Ayush products and services in India.

H.E. Prime Minister Modi acknowledged the launch of the Traditional Medicine Global Library as a single, global platform to preserve scientific data and policy documents. He emphasized that the initiative will make it easier for beneficial information to reach every country equally.

Dr Tedros Adhanom Ghebreyesus, WHO Director-General, also celebrated the launch of the Library, saying “It is a platform of trust. It will protect intellectual property and community rights, support equitable access and benefit-sharing”. Dr Tedros recalled the inaugural Global Summit on Traditional Medicine in 2023, where H.E. Prime Minister Modi called for global stewardship of traditional knowledge – “a call echoed across the G20, BRICS and beyond,” Dr Tedros added.

During his address, Dr Tedros Adhanom Ghebreyesus shared a sentiment that ran through the Summit: Traditional Medicine is not a relic of the past or an alternative at the margins but “a living science, a shared heritage and an important element of universal health coverage and sustainable development”.

“Through the Delhi Commitment, countries have agreed not only on why Traditional Medicine matters – but also on how to act”, said Dr Tedros. However, the real success, he concluded, will be measured by what happens next in countries and communities – translating commitments into national policies and regulatory frameworks; investing in research, education and workforce development; and integrating Traditional Medicine into health systems and ensuring equitable benefits for all.

Closing session speakers:

**Dr Tedros Adhanom Ghebreyesus,**

Director-General, WHO

**H.E. Prataprao Ganaprao Jadhav,**

Minister of State for Ayush, Republic of India

**H.E. Narendra Modi,** Prime Minister of India

**H.E. JP Nadda,** Minister of Health and Family Welfare,  
Republic of India

Moderator: **Rini Simon Khanna**

**“Traditional Medicine can help to address many of the threats to health of our modern world: the growing burden of noncommunicable diseases; inequitable access to health services; and climate change. It can help to support care that is person centred, culturally grounded and holistic”.**

Dr Tedros Adhanom Ghebreyesus  
Director-General, WHO

# Strategic and Technical Advisory Group



The closing ceremony included the launch of WHO's first Strategic and **Technical Advisory Group on Traditional, Complementary and Integrative Medicine (STAG-TM)**. Established through an open and transparent global process, STAG-TM, chaired by Dr Susan Wieland, Director of Cochrane Complementary Medicine, and Professor Martins Emeje, Director of the Nigeria Natural Medicine Development Agency, brings together 19 independent experts with diverse disciplinary, geographical and

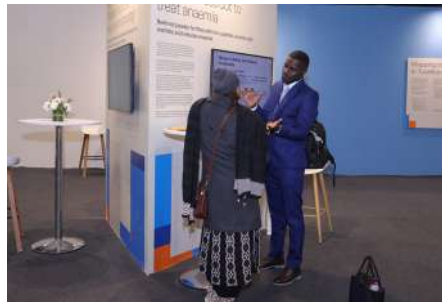
gender representation. The Group will provide WHO with high-level strategic, scientific and technical advice on Traditional Medicine, including research priorities, norms and standards, regulation and integration into health systems. The establishment of STAG-TM marked a milestone in institutionalizing evidence-informed governance for Traditional Medicine within WHO, strengthening credibility, coherence and accountability.

# Delhi Declaration on Traditional Medicine

The closing session of the Summit saw the launch of the *Delhi Declaration on Traditional Medicine*, a landmark agreement by stakeholders on how to advance implementation of the *Global Traditional Medicine Strategy 2025–2034*. This collective pledge focuses on integrating Traditional Medicine into primary healthcare, strengthening regulation and safety standards, investing in research, and building inter-operable data systems to track outcomes. It is a shift from recognition to results – ensuring Traditional Medicine is not a parallel system but a driver of universal health coverage.



# WHO Traditional Medicine Discovery Experience



© WHO/Chris Archer and © WHO/CBAS Films

On-site participants were invited to explore the 65 000 m<sup>2</sup> WHO Traditional Medicine Discovery Experience, which complemented the technical programme. Participants discovered how traditional knowledge systems and science come together to restore harmony between the body, mind and environment.

Through four immersive zones, participants could journey through ancient philosophies, participate in hands-on Traditional Medicine practices, and explore the scientific frontiers shaping the future of integrative health.

Through texts, maps and visual narratives, participants discovered how ideas have travelled and transformed, contributing to a collective global knowledge base.

A specially commissioned introductory film and the WHO Traditional Medicine Global Library extended this exploration, connecting historical foundations with contemporary research and evidence.

The on-site experience was complemented by an in-depth online programme with livestreamed sessions, talks and workshops.



H.E. Narendra Modi, Prime Minister of India, visits the WHO Traditional Medicine Discovery Experience with WHO Director-General, Dr Tedros Adhanom Ghebreyesus. © Office of the Prime Minister of India

## Zone 1: Understanding balance

**Health begins with understanding:** This zone explored how Traditional Medicine systems have taken shape across the world. It traced how knowledge systems evolved – across Asia, Africa, the Pacific Islands, Europe and the Mediterranean, and the Americas – through observation, cosmology, manuscripts and exchange to form structured approaches to health, diagnosis and treatment. A large-scale video wall introduced participants to the science and practice of Traditional Medicine. The WHO Traditional Medicine Global Library was introduced through hands-on digital kiosks, inviting participants to explore its content and navigation system.

## Zone 2: Restoring balance

**Understanding becomes practice:** Five interactive labs offered participants hands-on experiences – exploring sensory diagnostics, meditation techniques, botanical knowledge, digital health tools, data pathways and emerging innovations. Each lab offered a practical opportunity for self-learning, curiosity and practical discovery of how different approaches can help restore balance in ourselves and the world around us, bridging ancient principles and contemporary methods. A Healers' Voices video wall shared lived experiences and wisdom in the words of practitioners around the world.

## Zone 3: Sustaining balance

**Practice becomes action:** This zone was organized around the four main objectives of the *Global Traditional Medicine Strategy 2025–2034*: strengthening evidence and innovation, regulation, health system integration and cross-sector engagement. Twenty-one innovations were presented in detail, alongside other key features such as the Healthy Ecosystems pod. A key takeaway was that we all have a role to play in sustaining balance in the world around us.

## Convergence

**Knowledge becomes community:** At the heart of the Traditional Medicine Discovery Experience was a space to meet and reflect. Areas for innovation, art and dialogue – a cinema, photo gallery and herbal tea bar – encouraged connection and conversation. Participants were invited to slow down and share their journey towards restoring balance in their own life, work and community. An Innovation Stage showcased a dynamic series of 10-minute talks from the winners of the WHO Health Heritage Innovations Challenge, who described their Traditional Medicine solutions and future ambitions for scaling up progress. These are available to watch at [tm-summit.org/#session-recordings](https://tm-summit.org/#session-recordings).



## Restoring balance photo gallery

In 2025, WHO commissioned photography and video projects in 15 countries to show how patients, practitioners, health planners, researchers and policy-makers are bringing together centuries-old wisdom in Traditional Medicine with cutting-edge science. The stories told reflect a shared understanding: the science and practice of health must embrace diverse ways of knowing. Through this exhibition, delegates saw how communities are taking forward the objectives of the *Global Traditional Medicine Strategy 2025–2034*.



[View the gallery](#)

# Ayush Zone



A meditation experience in the centre of the Ayush Zone

The Ministry of Ayush, Government of India, had a dedicated zone in the Traditional Medicine Discovery Experience, with content coordinated by the Institute of Teaching and Research in Ayurveda. The Ayush Zone provided a structured overview of India's traditional systems of medicine, presenting their historical foundations, scientific development and contemporary relevance within global health. Curated as an evidence-aligned exhibition, this zone highlighted Ayurveda, Yoga, Naturopathy, Unani, Siddha, Sowa Rigpa and Homoeopathy (Ayush) as comprehensive systems that integrate preventive, promotive and therapeutic approaches to health.

In addition, the Ayush Zone showcased national initiatives that protect traditional knowledge, strengthen

research capacity and expand the integration of Ayush into public health and global collaborations. Start-up and innovation clusters demonstrated the emergence of technology-enabled solutions that apply traditional concepts to contemporary health challenges.

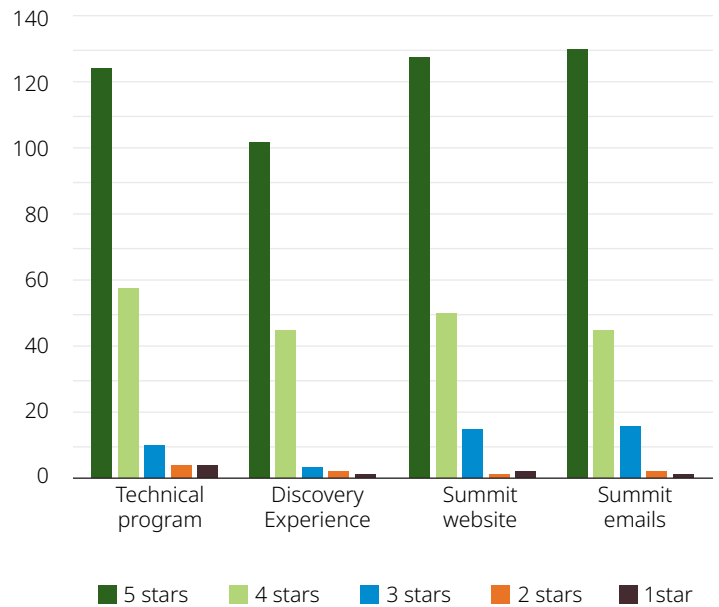
As part of its programme, the Ministry of Ayush organized a side event, "Ashwagandha: From Traditional Wisdom to Global Impact – Perspectives from Leading Global Experts", which aimed to foster an evidence-based, globally informed dialogue on Ashwagandha's traditional use, modern research, safety assessment and regulatory pathways. Speakers highlighted the plant's historical importance in Ayurveda and underscored the need for globally coherent, science-based engagement to address emerging safety and regulatory concerns.

# Summit evaluation

An online survey to gather feedback following the Summit was sent to participants. Of the 196 respondents, 80% participated in the Summit online. Two thirds of respondents were from the academic and research community.

Overall, participants indicated high satisfaction with the Summit, with more than 90% of respondents rating the Summit at least four on a scale of one to five. Participants consistently rated all Summit outputs favourably, including the quality of the webcast and recordings. Nearly half of the respondents indicated that they had accessed and watched recorded Summit content. This feedback indicates a sustained interest in the Summit and its objectives, reinforced by the 92% of respondents who expressed their intent for follow-up action as a result of the Summit.

**Ratings for Summit programming and communications**



“Overall, the Summit reflected a high level of coordination, credibility and institutional leadership. The overall structure was clear, and the programme effectively brought together diverse global stakeholders around a common agenda.”

Survey respondent on the Summit programme

“The most impressive aspect of the Summit programme was its integration of traditional wisdom with contemporary scientific perspectives. I liked the expert speakers and the practical, well-organized sessions. The programme was informative, engaging and inspiring.”

Survey respondent on the Summit programme

“I liked the hands-on workshops and live demonstrations the best. These sessions were genuinely inspiring and unforgettable for participants.”

Survey respondent on the Traditional Medicine Discovery Experience

“The practical experience of Traditional Medicine and interactive sessions with experts from various countries made theoretical knowledge truly accessible.”

Survey respondent on the Traditional Medicine Discovery Experience

# Media and communications

In the lead-up to the second Global Summit on Traditional Medicine, [tm-summit.org](https://tm-summit.org) was launched as the Summit's central platform. Before the event, this site served as a comprehensive resource hub, hosting the agenda, speaker biographies, technical briefs and other key materials. During the Summit, it evolved into the main centre for global engagement, offering livestreamed sessions and an online booking system for both in-person and virtual experiences as part of the WHO Traditional Medicine Discovery Experience. The website now functions as a dynamic repository for session recordings, photos, commitments and outcome documents. There are planned enhancements with further information on past and future WHO summits, allowing the website to function as a permanent information and convening space.

Throughout the Summit period, the Global Traditional Medicine Centre maintained a strong digital presence through frequent updates, newsletters and rich multimedia content.



**10** videos and interviews exploring Traditional Medicine perspectives from around the world



**3** Government of India and WHO pre-Summit press events



**2 450 000** social media impressions



**193 599** minutes viewed online



**921 Traditional** Medicine photos added to the WHO Multimedia Library



**77 000** web visits



**19 000** newsletter subscribers and 8 newsletter editions

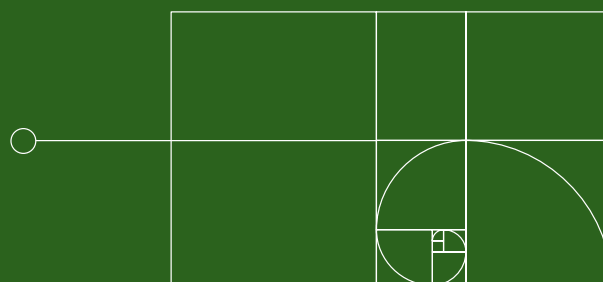


**305** media articles

## Looking ahead to 2027

The next biennial Global Summit on Traditional Medicine will be held as a hybrid event in late 2027; all WHO Member States are invited to express interest in hosting. An announcement on the Summit location and dates is expected in mid-2026. The Summit will return to India in 2029.

For updates and more information, please visit [tm-summit.org](https://tm-summit.org).



# Acknowledgements

The second WHO Global Summit on Traditional Medicine was organized jointly by the WHO Global Traditional Medicine Centre and the Ministry of Ayush, Government of India.

Our thanks go to:

## Summit Steering Committee

### Co-chairs

**Dr Goh Cheng Soon**, Director, Traditional and Complementary Medicine Division, Ministry of Health, Malaysia

**Professor Motlalepula Matsabisa**, Professor of Pharmacology, Director of the Indigenous Knowledge Systems Health Lead Programme, University of the Free State, Republic of South Africa

### Members

**Dr Abdullah Obaid Alanazi**, Supervisor General of Technical Affairs at the National Center for Complementary and Alternative Medicine, Saudi Arabia

**Dr Anastasia Michaelina Yirenkyi**, Director, Traditional and Alternative Medicine Directorate, Ministry of Health, Ghana

**Professor Bhushan Patwardhan**, National Research Professor, Ministry of Ayush, Government of India

**Dr Chunyu Wei**, Deputy Director-General, International Cooperation Department, National Administration of Traditional Chinese Medicine, People's Republic of China

**Dr Dorji Gyeltshen**, National Traditional Medicine Hospital, Ministry of Health, Bhutan

**Dr Holger Cramer**, Professor of Research in Complementary Medicine, University of Tübingen, Federal Republic of Germany

**Dr Mariana Cabral Schweitzer**, Professor of Preventive Medicine, Universidade Federal de São Paulo, Federative Republic of Brazil

**Dr Nessma El-sayed Mohamed Aly El-Nabawy**, General Manager, General Administration for Registration of Herbal Products, Central Administration for Pharmaceutical Products, Arab Republic of Egypt

**Sione Tu'itahi**, Executive Director, Health Promotion Forum of New Zealand

**Susan Sheridan**, CEO and Co-Founder, Patients for Patient Safety US, United States of America

**Tanushree Jain**, International Pharmaceutical Students Federation, Kingdom of the Netherlands

**Dr Tido von Schoen-Angerer**, President, Traditional, Complementary and Integrative Healthcare Coalition, Swiss Confederation

**Dr Vivian Tatiana Camacho Hinojosa**, National Director of Ancestral Traditional Medicine, Ministry of Health, Plurinational State of Bolivia

## Speakers

Thanks also go to the 185 speakers who dedicated their time and expertise to the Global Summit. Please find them listed, with biographies at [tm-summit.org/speakers](http://tm-summit.org/speakers).

## Government of India

Ministry of Ayush

Ministry of Health and Family Welfare

Ministry of External Affairs

Ministry of Information and Broadcasting

India Trade Promotion Organisation

Ministry of Home Affairs

## Partners

Artistic performances	Crow
Ayush Experience curation	Institute of Teaching and Research in Ayurveda
Broadcast production and online support	YOURGB
Communications	Bartley Robbs Communications Magnifico Works
Branding, concept, experience and interior design, graphic design, website and creative direction	Lopez Design
Editing and writing	Scriptoria
Event management	Pavilions and Interiors
Film	Daylight Creative
Graphic design	Annovi Design
Moderation (opening and closing events)	Rini Simon Khanna
Ministry of Ayush nodal agency	Central Council for Research in Ayurvedic Sciences
Technical support	<p>ÆRAS Development Group (research, writing, concept development)</p> <p>Eurocam/Traditional, Complementary, and Integrative Healthcare (TCIH) Coalition (non-state actor commitments, online applications)</p> <p>Global Health Insights (GLOHI) (session development and technical briefs, rapporteurs)</p> <p>Research councils/national institutes/Institutions of National Importance/commission/board under the Ministry of Ayush</p> <p>Primus Partners (Ministerial Roundtable and Member State commitments)</p>

## Discovery Experience demonstrators and collaborators

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### Zone 1

Latin American and Caribbean Center on Health Sciences Information (BIREME), a specialized centre of the Pan American Health Organization (PAHO)/WHO (WHO Traditional Medicine Global Library)

University of Transdisciplinary Health Sciences and Technology, Republic of India (Ayurveda panel)

Nanyang Technological University, Republic of Singapore; Healing Arts Pillar, MIT Institute for Global Humanities, United States of America (Neijing Tu panel)

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### Zone 2

#### Lab 1: Holistic healing

Aniruddha Joshi, Nadi Tarangini (pulse diagnostics)

National Administration for Traditional Chinese Medicine, People's Republic of China (acupuncture)

Shanghai University of Traditional Medicine, People's Republic of China (acupuncture)

Odgarig Altaisaikhan, Jose Martin Barros, Rosita Barboza Caniullán, Fatou Fall, Wanka Inti, Jose Alejandro Barros Lazano, Rutendo L. Ngara, The Earth Elders, United Nations Declaration on the Rights of Indigenous Peoples

#### Lab 2: Practical labs

Chingdug herbal compress: National Traditional Medicine Hospital, Kingdom of Bhutan

Meditation and brain experience: Social Innovation Park, Republic of Singapore; Unicorns for Good, Republic of Singapore; Inartis Foundation, Swiss Confederation; Emotiv, United States of America; mycoachingpartners, Swiss Confederation

Nuad Thai massage: Nuad Thai College, Ministry of Public Health, Kingdom of Thailand

Restoring balance with heart: HeartMath Institute, United States of America

Tai Chi and Qigong: Experimental Research Center, China Academy of Chinese Medical Sciences; Hong Kong Baptist University, Hong Kong SAR

Yoga: Morarji Desai National Institute of Yoga, India Universität der Bundeswehr Hamburg, Federal Republic of Germany

#### Lab 3: Nature's pharmacy

Sarawak Biodiversity Centre, Malaysia (Blockchain Biodiversity Tracker)

Forest Research Institute, Malaysia (10 Commonly Used Medicinal Plants by Orang Asli (Indigenous Peoples) in Peninsular Malaysia)

#### Lab 4: Journey of a code

WHO Department of Data, Digital Health, Analytics and AI

#### Lab 5: AI and future science

Council of Scientific & Industrial Research Institute of Genomics and Integrative Biology (genomics)

Dabur Research Foundation (lab on a chip)

WHO Department of Data, Digital Health, Analytics and AI (neural network dome)

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### Ayush Experience

Research councils/national institutes/Institutions of National Importance/commission/board under the Ministry of Ayush, Republic of India

### Zone 3

University of Technology Sydney, Australia (Building the next era of research: Priorities for investment and action)  
Carleton University, Canada (Research barriers and enablers; Paradigmatically aligned research methods)  
Hong Kong Baptist University, Hong Kong SAR (Ancient wisdom, today's cures)  
Charité – Universitätsmedizin, Berlin, Federal Republic of Germany (Don't forget the past)  
Global Consortium for Safe and Effective Traditional Medicine (Old remedies, new contexts; Safety assessment of medicinal plants, Regulation of herbal medicines; TM-INVENT)  
Dimakh Consultants Pvt. Ltd. (TM-INVENT)  
Prasanna School of Public Health, Manipal Academy of Higher Education; iTech Mission Private Limited, Delhi, Republic of India (Mapping innovations in Traditional Medicine)  
WHO Department of Noncommunicable Diseases and Mental Health (Mental health)

### Health Innovation Exchange (Health Heritage Innovations)

Alana Gall (Indigenous medicine R&D framework)  
Ana Paula A. Ferreira, with international team (Neonatal osteopathic care)  
Anke Weisheit (Traditional Medicine Innovation Hub)  
Anuroop K B (TechnoHeritage Ayurveda)  
Daniela Barretto Barbosa Trivella (Molecular Biodiversity Programme)  
Jettasic Popun, Department of Thai Traditional and Alternative Medicine, Ministry of Public Health, Kingdom of Thailand; and King Mongkut's University of Technology North Bangkok, Kingdom of Thailand (Panthai AI Doctor)  
Érica Dumont Pena, Maria Christina Almeida Barra, and Yanomami and Ye'kwana Associations (Temi Totihi)  
Hocheol Kim (HT042: Heritage-based growth science)  
Hong Chun Yin (Modern tongue diagnostics)  
Isabela Allende (InovafitoBrasil)  
Ye-Seul Lee, Jaseng Medical Foundation, (Transforming spine and joint health care)  
Juan Jesús Huaccho Rojas (Cost-effective intercultural platform)  
Kossi Brice Boris Legba (Plant-based medicine for salmonellosis)  
Loke Chui Fung (Herb-based cream for sun-damaged skin)  
Motlalepula Matsabisa, Joyce Phindela (Indigenous herbal teas)  
Pär Krutzén (Medical Yoga Standardized Intervention)  
Peter Ssonko (Fortified beetroot to treat anaemia)  
Ritu Verma, Anu T. Singh, Manu Jaggi (Paradise tree transforms cancer treatment)  
Soad Khalil Al Jaouni (Futuristic date palm extract for heart disease)  
Somit Kumar, Narendra Ahuja (AI assistant for Ayurveda)  
Vikram Gota (Bridging Traditional Medicine and oncology)

### Healthy Ecosystems

GLOHI, Dr Payal Kumar, Gayatri Nandra (concept development, research and writing, photo research)

### Engagement

Brazilian Academic Consortium for Integrative Health (CABSIN) (Rio World Congress on Traditional, Complementary and Integrative Medicine), Institute for Research and Teaching in Ayurveda in Jamnagar (WHO Global Traditional Medicine Centre, Jamnagar, Gujarat, Republic of India), National Administration for Traditional Chinese Medicine (Beijing Declaration), Permanent Mission of India in Geneva (Group of Friends of Traditional Medicine), TCIH Coalition and Eurocam (Global Advocacy Roadmap), GLOHI (Summit participant survey)

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### Convergence zone

Magnifico Works (Restoring balance photo gallery)

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## WHO regional and headquarters departments

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### WHO regional offices

Regional Office for Africa  
Regional Office for the Americas  
Regional Office for South-East Asia  
Regional Office for Europe  
Regional Office for the Eastern Mediterranean  
Regional Office for the Western Pacific

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### WHO headquarters divisions

Governance, Partnerships and Accountability  
Health Promotion, Disease Prevention and Care Division  
Health Systems, Access and Data Division  
Office of the Director-General  
Science Division

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