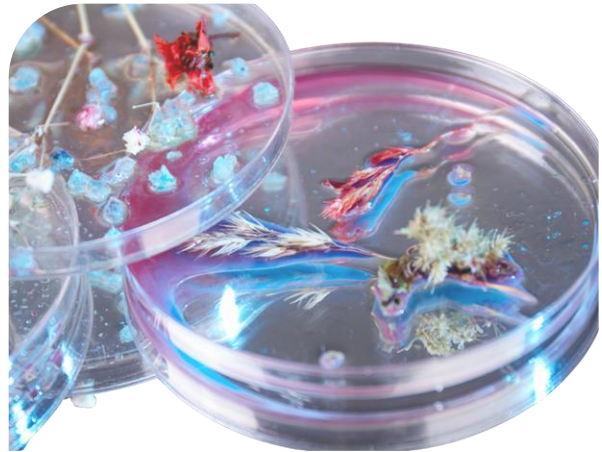

Integrating Traditional, Complementary and Integrative Healthcare Research into the Next EU Long-Term Budget



EUROCAM Policy Paper
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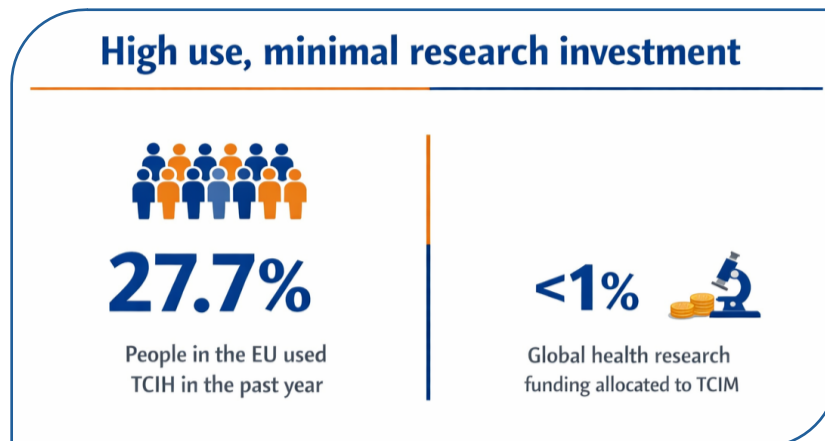
Integrating Traditional, Complementary and Integrative Healthcare (TCIH) Research into the Next EU Long-Term Budget

EUROCAM Policy Paper

Introduction

The 2028–2034 Multiannual Financial Framework (MFF) is being negotiated in a context of geopolitical instability, energy insecurity, accelerated digitalisation, and concerns about Europe’s global competitiveness. At the same time, ageing populations, the rising prevalence of chronic diseases, and increasing mental health challenges are placing growing pressure on health systems and public finances in the European Union (EU). These developments require a long-term budget that strengthens the resilience of the health system and populations, while supporting innovative and cost-effective approaches to health and wellbeing. In this context, a policy-driven and flexible MFF will provide an opportunity to better align EU investment with emerging global health and societal priorities.

At the global level, health systems are overstretched and resources are insufficient for addressing all these challenges. Therefore, EUROCAM calls on the EU to consider the untapped potential of traditional, complementary and integrative healthcare (TCIH) in shaping its future health and research policies. The World Health Organization (WHO) adopted its Global Traditional Medicine Strategy 2025–2034¹ in 2025 to maximise the contribution of traditional, complementary and integrative medicine² (TCIM) to strengthen health systems across the globe, reach universal health coverage and promote the right to the highest attainable standard of health. The use of TCIH in the EU is widespread: 27.7% of people reported using it in the past year. Despite this high uptake, less than 1% of global health research funding is allocated to TCIM^{3,4}.



This paper highlights the added value of TCIH in supporting EU objectives in public health, innovation and sustainability. Despite high use, growing demand and the promising evidence on its contribution to tackling many health-related challenges, TCIH has received little to no targeted EU research funding to date.

EUROCAM therefore calls for dedicated funding for evidence-informed TCIH research within the 2028–2034 EU programmes⁵.

Traditional Complementary and Integrative Healthcare Definition

Traditional, Complementary and Integrative Healthcare (TCIH) refers to the “respectful collaboration between various systems of healthcare and their health professionals, with the aim of offering a person-centred and holistic approach to health”.⁶ TCIH includes, among others:

- **Provider-based interventions**, such as acupuncture and naturopathy.
- **Self-care and mind-body practices**, such as yoga, tai chi, reiki, and meditation.
- **Whole medical systems and traditional medical frameworks**, including anthroposophic medicine, Traditional Chinese Medicine, Ayurveda, and homeopathy, as well as nutritional and other preventive approaches.

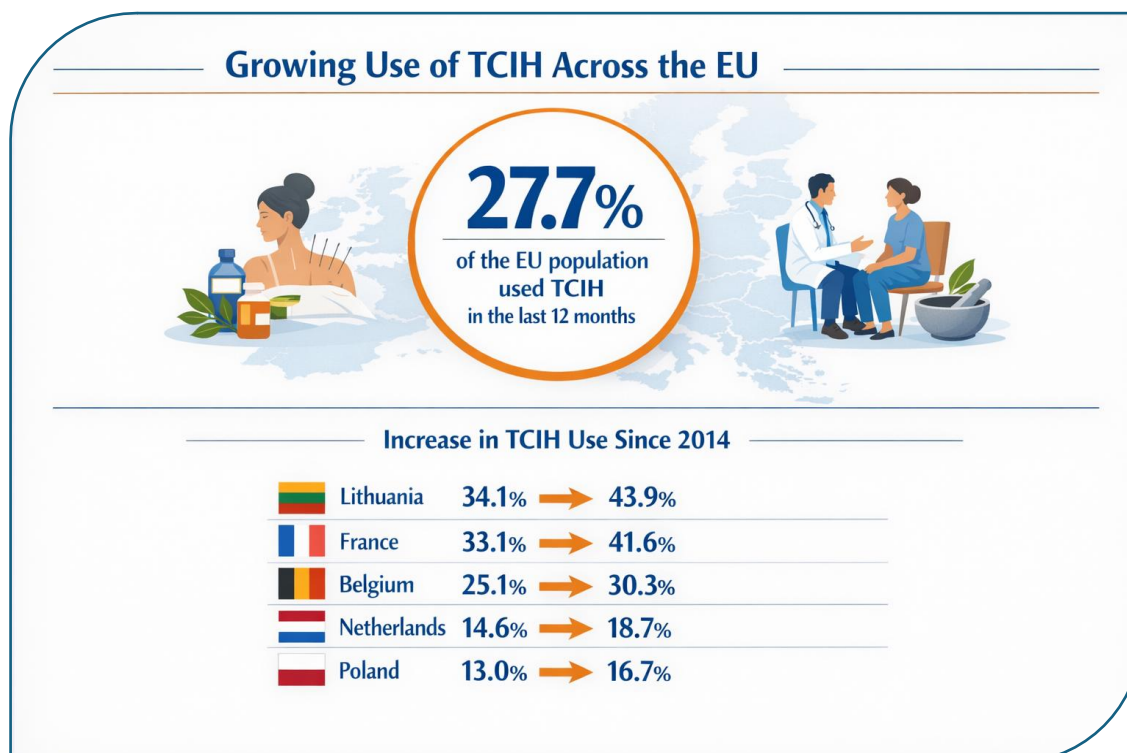
Across this diversity, TCIH modalities share core characteristics⁷:

- a holistic understanding of health that integrates physical, mental, social and environmental dimensions;
- an emphasis on prevention and healthy ageing;
- active patient participation;
- individualised assessment and care planning.

The scope of TCIH modalities in Europe was systematically mapped by the CAMbrella project⁸ (2010–2012), which identified substantial diversity in practices and regulatory approaches across EU Member States. As an umbrella concept, TCIH therefore refers to a broad field of health-care practices that may be delivered alongside conventional medicine, in a complementary and integrative way, and whose practices rely on national regulatory frameworks and professional standards.

Widespread population use but no investment in research

The use of TCIH in the European Union is very high: according to data from the European Social Survey, 27.7% of the European population used some form of TCIM in the last 12 months⁹. There was a notable increase in use since 2014 in Lithuania (from 34.1% to 43.9%), France (33.1% to 41.6%), and Belgium (25.1% to 30.3%), as well as some increase in the Netherlands (14.6% to 18.7%) and Poland (13.0% to 16.7%).



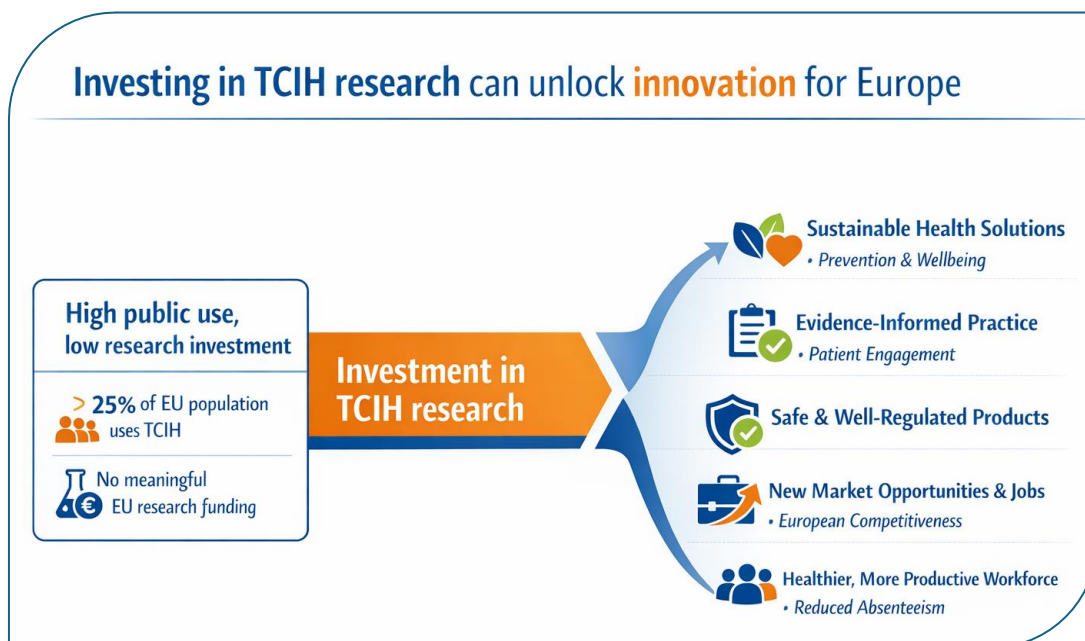
Despite the high use of TCIH in Europe and worldwide, less than 1.0% of global health research funding is devoted to TCIM^{10,11}.

A recent article in *The Lancet Regional Health – Europe* highlighted structural inequities in the research ecosystem and called for substantial TCIM-specific research investment that is ring-fenced, draws upon TCIM-specific expertise

for review, and establishes clear institutional pathways for TCIM scholarship, including dedicated TCIH departments or research centres to help develop relevant infrastructure and workforce for future research capacity^{12,13,14}.

TCIH and the 2028–2034 MFF

The 2028–2034 MFF offers an opportunity to strengthen health resilience and sustainability across the EU, via innovations in various fields. Despite increasing demand for person-centred and preventive care, the innovation potential of TCIH remains untapped due to its uneven integration into EU health systems and insufficient research funding. As it stands, the EU is not investing in TCIH research despite more than a quarter of its population using it. Investment in TCIH research could support sustainable health solutions, evidence-informed practices and the production of safe and well-regulated TCIH products, creating new market opportunities for TCIH products and jobs for TCIH healthcare practitioners in Europe and globally. By supporting prevention, wellbeing and patient engagement, TCIH may also contribute to a healthier and more productive workforce, reducing absenteeism and supporting Europe’s competitiveness within a wellbeing-oriented economy¹⁵.



TCIH approaches are generally compatible with existing healthcare systems and often show favourable cost–benefit profiles¹⁶. Moreover, TCIH is compatible with the digital transformation of health and care, with potential for data-driven and AI solutions to be developed to complement existing

patient and population data and enrich the European Health Data Space. Strengthening research in this field could therefore support several key EU priorities that are central to the 2028–2034 MFF.

Promising evidence base and increased global recognition of its potential

The scientific and clinical evidence base for TCIH is growing, increasing its recognition and integration into health systems globally. Across Europe¹⁷, the sector benefits from strong professional expertise and many patients view TCIH as a trustworthy option for their health and wellbeing needs¹⁸. This is



reinforced by the adoption of the WHO Global Traditional Medicine Strategy 2025–2034¹⁹, which promotes access to evidence-informed, safe, effective, and people-centred care, stronger evidence development, and appropriate regulation. In a context of multiple health system challenges, including workforce shortages, climate change, and budget pressures, TCIH can support health system strengthening by promoting a more evidence-informed holistic approach focused on patients, prevention and health promotion.

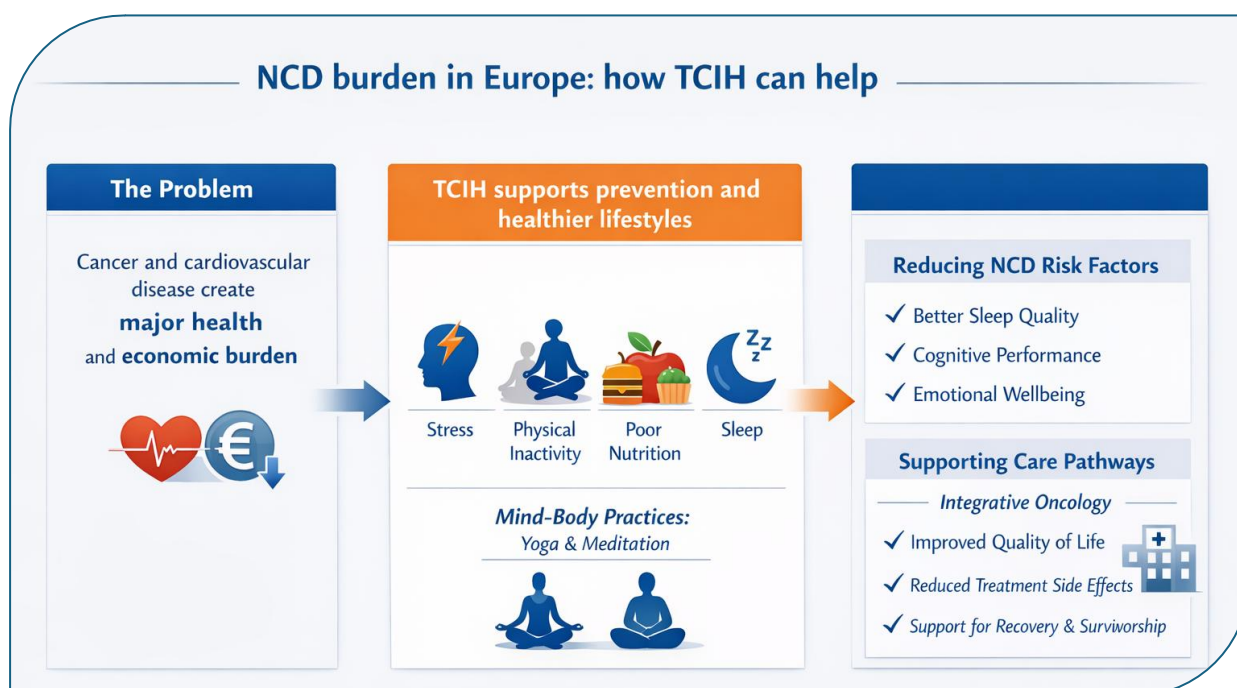
Public health and prevention

TCIH places strong emphasis on health promotion, disease prevention and lifestyle-related determinants of health²⁰. By encouraging self-care, patient education and active participation in managing health, TCIH approaches can complement conventional healthcare systems and help reduce long-term pressure on health services. This focus aligns with EU public health objectives, including those pursued through EU health programmes, which aim to strengthen prevention, health literacy and sustainable healthcare systems²¹.

Non-communicable diseases (NCDs)

Non-communicable diseases, including cancer and cardiovascular diseases, represent a major health and economic burden in Europe. TCIH approaches can support prevention and healthier lifestyles by addressing key risk factors such as stress, physical inactivity, poor nutrition and sleep. Evidence suggests that practices such as yoga and meditation may help reduce NCD risk factors while improving sleep quality, cognitive performance and emotional wellbeing²². Beyond prevention, TCIH approaches are increasingly explored within disease-specific care pathways. In areas such as integrative oncology, they may help improve quality of life, reduce treatment-related side effects and support patient recovery and survivorship^{23,24}.

Strengthening research on TCIH in this field could contribute to EU policy priorities, including the implementation of Europe's Beating Cancer Plan and related initiatives, as well as the broader objectives of the European Health Union, by supporting more comprehensive approaches to prevention, treatment and long-term care²⁵.



Healthy ageing

As Europe's population ages, maintaining functional ability and quality of life throughout the life course is becoming increasingly important. TCIH approaches can contribute to healthy ageing by promoting physical activity, stress management and preventive health practices²⁶.

For older adults, certain TCIH modalities, including acupuncture, massage therapy, yoga and tai chi, may help manage chronic pain, improve mobility and balance, and support overall wellbeing²⁷. These approaches can contribute to fall prevention, reduced reliance on pharmaceuticals and longer healthy life expectancy²⁸.

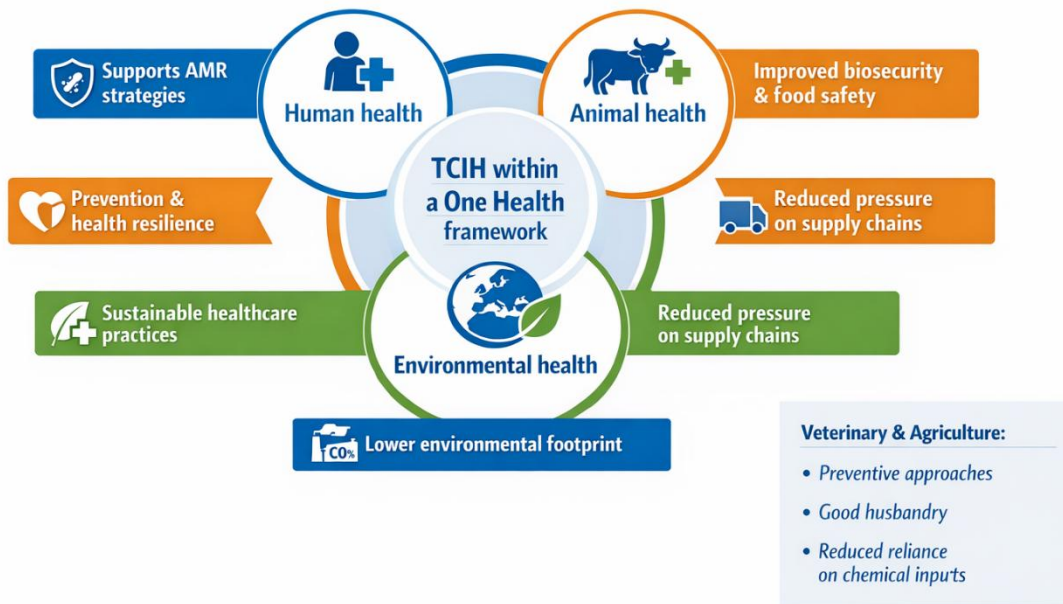
Mental health and wellbeing challenges

Mental health challenges across Europe have increased in recent years due to the COVID-19 pandemic, socioeconomic pressures, and geopolitical instability. TCIH approaches often integrate mental and physical health, supporting stress management, emotional resilience and overall wellbeing. Evidence indicates that practices such as meditation and mindfulness can help reduce stress and anxiety²⁹. Community-based TCIH practices may also support social connection and health literacy, complementing broader mental health prevention strategies³⁰.

One Health Approach

TCIH approaches are broadly aligned with One Health principles, which recognise the interconnection between human, animal and environmental health³¹. Within a One Health framework, TCIH contributes to efforts addressing antimicrobial resistance (AMR) in human health, animals and the environment. Crucially, prevention-oriented approaches that strengthen health resilience may help reduce unnecessary antibiotic use for some infections where scientifically appropriate, complementing broader multisectoral strategies to address AMR³². TCIM medicinal products and practices are generally associated with limited side effects when used appropriately³³. The production, use and disposal of some TCIH products may have lower levels of environmental impact compared to more industrialised processes.

TCIH and One Health: benefits for Europe



In veterinary contexts, certain TCIH-informed practices may complement responsible animal health management. TCIH promotes preventive approaches in agriculture and animal care, including good husbandry practices and reduced reliance on chemical inputs, which can contribute to improved biosecurity and food safety. Research initiatives, such as the Global Initiative for Traditional Solutions to Antimicrobial Resistance (GIFTS-AMR) project, have explored the potential role of TCIH within broader AMR research and policy discussions, highlighting its potential contribution to integrated AMR strategies and to more sustainable approaches to animal health management^{34,35}.

From a planetary health angle, non-pharmacological treatments generally have a lower environmental footprint compared to high-tech, resource-intensive healthcare interventions³⁶. TCIH supports more sustainable healthcare practices, including the careful use and disposal of medicines, and the use of reusable materials and energy-efficient solutions where possible. Its reliance on accessible, often low-carbon resources can also help reduce pressure on complex supply chains³⁷.

Call to action

With 27.7% of the European population using TCIH every year but less than 1% of global health research funding being spent on what people are widely using, EUROCAM calls on the EU to close this research gap.

Based on the considerations outlined above, EUROCAM calls on EU institutions:

To allocate dedicated, ring-fenced funding for research on TCIH within the relevant programmes of the 2028–2034 MFF, including Horizon Europe and its successor programmes, the European Competitiveness Fund, as well as relevant instruments supporting health, digitalisation and crisis preparedness.

To include TCIH practices, medicines and approaches within broader EU research agendas and collaborative projects.

Strengthening research in this field would help build a more robust evidence base and support the integration of safe and effective TCIH approaches within European healthcare systems.

The research potential for TCIH is particularly strong in areas such as health promotion, disease prevention, community-based care and primary care initiatives, where it may contribute to more patient-centred, sustainable and resilient health systems.

Health systems need to be responsive to the expectations of the populations they serve: the proposed actions would responsively address citizens' demand for TCIH by rigorously assessing and harnessing its potential. It would also allow the EU to contribute to the implementation of the WHO Global Traditional Medicine Strategy 2025–2034 and remain aligned with global developments in this area.

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