

## **Towards a strong public health research program in traditional and complementary and alternative medicine**

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Traditional, complementary and alternative medicine (TCAM) includes a wide range of both indigenous and imported health practices, technologies, medicines and systems of care that exist predominantly beyond the public health care system, clinical practices of conventional doctors and the medical curriculum. While there is increasing interest in TCAM within the public health research community worldwide, there remains much room for further investigation and understanding of these prevalent practices and health care systems. Also how they currently relate and contribute to attempts to foster healthy communities and ensure safe, effective health care provision and planning. In response, there is a need for a 'strong' program of public health research in TCAM - characterised by the guiding principles of multi-disciplinarity and scientific rigour - in order to provide a broad evidence-base and guide practice and policy directives around this significant area of health care activity.

TCAM are popular the world over and in many communities often constitute the only health care available, and it are practices intimately woven within local (indigenous and in some cases non-indigenous) cultures. In many (but not all) cases, TCAM use can be highly 'covert' – with little or no input or guidance from conventional health care providers and a lack of interaction or engagement with the sanctioned health system. This raises a number of potential risks around safety, efficiency, and coordination of care – all core issues for a broad public health research agenda.

Nevertheless, some within public health may bemoan the lack of clinical evidence for TCAM and potentially perceive this as an inadequacy that renders these medicines and practices beyond the serious concern of public health science. Admittedly, the clinical evidence-base for many TCAM practices is still ad hoc, often absent or emerging at best and there is much room for further clinical investigations. However, these circumstances also help highlight the benefit of also strengthening our public health scholarship around TCAM – a development that, I believe, would not only help us to scientifically understand TCAM but also have rich benefits for public health itself. To be clear, the argument here is not to uncritically support TCAM but simply to subject the topic to the breadth and depth of investigation appropriate for advancing the wider public health mission of better health and quality of life for all in the community.

The very prevalence of TCAM (which is not likely to disappear) within the wider community highlights the need for a public health research agenda around this significant topic. These

medicines and practices are a major feature of community health-seeking and as such they need to fall squarely within the 'core' scientific gaze of public health. TCAM is often approached as a 'specialism' of public health; mainly embraced as a somewhat fringe substantive topic to be treated as divorced or separate to more mainstream public health concerns. Much public health scholarship around TCAM has also evolved in an ad-hoc or organic fashion following the interests of either individuals who have championed enquiry in the topic or of small pockets of scholars who have often found themselves siloed in terms of national or international engagement. In contrast, we need an international coordinated, strong program of public health in TCAM which is guided by a number of core principles: a critical, scientific approach to conceptualisation and empirically investigation; a multi-disciplinary freedom drawn upon a broad range of methods and perspectives; and a strong and well-developed sense of translation (whereby research endeavours directly feed into practical insights for policy, patient care and community health). There is much to be gained from advancing this strong program of scholarship and national public health associations such as the Public Health Association of South Africa and the Public Health Association of Australia have important roles to play in ensuring due attention and resources are applied to better informing our efforts in public health and health services investigation about this significant area of health-seeking and care on both a national and international level.