**DRAFT - COOPERATIVE WORK PLAN ON INDIGENOUS MEDICINE (2016-2020)**

**of the Collaborative Network of Indigenous Medicine in the Mekong Basin**

| **OBJECTIVES** | **ACTIVITIES** | **TIME FRAME**  **(Year)** | **LEAD COUNTRIES/**  **possible source of fund** | **EXPECTED OUTPUTS/INDICATORS** |
| --- | --- | --- | --- | --- |
| **Strategy 1: Indigenous medicine practice and service in the health care system**  **Conclusion: Combine Practice and Medicine Use Strategy 1 and 2 in one conference 2016** | | | | |
| 1.1 To compile and document IM knowledge sharing experience | 1. Training on management of TM/IM knowledge, traditional cultural expression involving health care for the protection of TK and experience sharing   * Managed by digital database * Training of Digital Database   2. Survey and study of IM practice based on  - ethnic groups / region  - practice methods (each country already done)  - selected diseases/symptoms   * Each country has already conduct study and survey * Update to be at an International level | 2016 | * China to lead * Activities in 2016 held in Kunming * Request WIPO or WHO to help in training | - Member countries learn more about traditional knowledge management and the preparation of information for the protection of GR/TK/ TCE  - Information about IM practice in every member countries is documented and systematized. |
| 1.2 To exchange and share IM knowledge among countries of the Mekong Basin | 1. Conference on IM practice in the Mekong Basin  - for the treatment of selected disease or symptom   * Metabolic syndrome treatments in China by folk healers | 2016 | * China * Metabolic Syndrome | - Bilateral, multi-lateral, or sub-regional researches on IM practices will be conducted.  - Research findings will be published in international journals.  - Conference on IM practices in the Mekong Basin is held and IM knowledge is shared. |
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| **Strategy 2: Medicinal plants and herbal medicines (Product) (combined with Strategy 1)** | | | | |
| **Strategy 3: Indigenous medicine practitioners and researchers (Practice)** | | | | |
| 3.1 Develop database in the field of personnel in the field of IM | 1. Preparation of the List of all IM practitioners & folk healers  2. Preparation of the List of researchers in the field of IM   * Encourage in each country to have a more complete data base of practitioners & folk healers |  |  | - List of IM practitioners & folk healers is made in every member country.  - List of researchers in the field of IM is made in every member country.  - Mapping of IM personnel & resource persons in the Mekong Basin can be made. |
| 3.2 To carry out human resource development program | 1. Training of folk healers on safe practice for consumer protection and also practice safety according to laws and regulations  2. Study visit of folk healers to learn more about IM of other countries at the biannual meeting  3. Training the researchers on how to conduct good quality indigenous medicine research (Thailand lead international conference)  Development of Guidelines for ethical consideration on conducting research with folk healers  4.Development of Network of Researchers | 2017 | Thailand | - Patients receiving treatments from folk healers will be better protected from possible harm or injury.  - Folk healers perspectives, ideas and knowledge about patient care will be broaden. |
| 3.3 To develop and carry out recognition system for qualified IM practitioners and folk healers | 1. Sharing information on the recognition system of folk healers among member countries.   * Activity of each country   2. Each country develops & carries out recognition system of qualified IM practitioners and folk healers. |  |  | IM practitioners and folk healers will be recognized as a part of health care personnel and can lawfully practice in their communities & in the health care system. |
| **Strategy 4: Protection of traditional & indigenous medicine knowledge, intellectual properties related to TM &IM, associated genetic resource (Protection)** | | | | |
| 4.1 To have better understanding about the significance of the protection of TK, GR & TCE & TK-derived IPR and their involvement in international law and trade | 1. Workshop on the protection of traditional medical knowledge (TK), associated genetic resources (GR) and traditional cultural expression (TCE) related to TM & IM  2. Sharing experience on the protection of TK & GR among member countries |  |  | Officials and personnel involved in IM & TM will have better understanding about the issues and be able to applied their knowledge to protect their TK & GR |
| 4.2 To develop digital database of TM, IM & associated GR in each member countries | 1. Develop digital database and record of IM knowledge and medicinal plants & herbal medicines information obtained as well as IM personnel information, etc. |  |  | ‘Traditional medical knowledge digital database’ of indigenous medicine will be developed in each member countries. |
| 4.3 To conserve and cultivate endangered species of medicinal plants used in IM | 1. Identify medicinal plants that are threatening or endangered species that need to increase propagation.  * Share the list of endangered medicinal plants to alert and pay close attention especially country which shares the border * Mostly national activity   2. Develop plan and identify area to cultivate identified plants |  |  | Threatening & endangered species of medicinal plants used in IM will be conserved and the cultivated. |