



The International Council for Homeopathy
Representing Homeopaths around the World

ICH position statement on the Practice of Homeopathy and Homeopathic Education

This document has been produced and agreed by the Affiliated Member Associations of the International Council for Homeopathy ICH. ICH represents associations of professional homeopaths worldwide.

ICH's mission is

To represent and support national member associations of Homeopaths.

To further the growth and development of the Homeopathy Profession worldwide

ICH is a global body advocating for

An individual's freedom of choice to access their preferred healthcare approach, including Homeopathy.

International availability of homeopathic remedies within nations and across borders between nations.

High standards in homeopathic practice, education and training.

The freedom to practice as a homeopath.

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Position Statement on the practice of Homeopathy and Homeopathic Education

SUMMARY: The practice of homeopathic medicine varies considerably throughout the world, from being a specialty practice within regular medical practice, to having a specific homeopathic medical licensure in countries such as the Indian subcontinent and South Africa, and being a self-regulated profession practiced by professionally trained homeopaths outside of the medical system. How homeopathy is practiced has been partly a result of existing legal structures in various countries, which vary widely, and also historical factors that led homeopathy to prosper in some countries and not in others. However, homeopathy is the most widespread form of complementary and alternative medicine worldwide (today referred to as traditional, complementary, and integrative medicine) and it is currently practiced on every continent.

This document explores some of the factors that have influenced the evolution of homeopathy and suggests models of development for the future.

INTRODUCTION:

Homeopathic Medicine is practiced in many countries throughout the world, each one having its own framework for the inclusion of Homeopathy as a legitimate form of therapy. This position statement seeks to describe the differing regulatory mechanisms that have defined homeopathic practice historically and to advocate for the merits of a self-regulatory model of legitimacy if consistent with existing laws and regulations in different countries.

Since the inception of Homeopathic practice in the early 19th century it was seen as a system of medicine practiced predominantly by doctors although non medically trained professional homeopaths were always present. As medical schools in various countries, including the United States and Europe, evolved in the 19th and then the 20th century, homeopathy was a unique form of medicine that allowed graduates of homeopathic medical schools to practice in their country. This tradition continues to this day, especially in the Indian subcontinent, and in South and Central America.

In North America, homeopathy was a fully accepted medical practice in the 19th century, with homeopathic medical boards in most states and homeopathic medical schools and hospitals. Homeopathic remedies were fully recognized as unique medicines by the Food and Drug Administration in an act of Congress in 1937.

However, there are no longer homeopathic medical schools in the United States and homeopathy is not included in the curriculums of nearly all medical schools. Physicians wanting to practice homeopathy must now take specialized trainings organized by homeopathic organizations. The same applies in Europe. Homeopathy is still practiced widely but specific homeopathic medical schools no longer are on offer and homeopathy is rarely included in existing medical curricula. Therefore, in some European countries and North America, the growth of homeopathy has been as a distinct profession outside of current medical practice. In essence a new homeopathic professional has evolved, existing within the current legal frameworks to practice in various countries.

THE LAWS GOVERNING THE PRACTICE OF HOMEOPATHY

In some countries in Europe a person must be a medical doctor to practice homeopathy, even if homeopathy is not offered in medical schools. In other countries, one can practice homeopathy without being a medical doctor. There, people train in mostly private homeopathic training programs and the profession is mostly voluntary self-regulated and not licensed by the government that regulates conventional medicine. Other complementary/alternative medicines are in the same position.

Self-regulation in these countries can take various forms, either statutorily or voluntary self-regulation, which will involve professional registration and accreditation bodies which function within their profession and which take responsibility for establishing the structures of the profession, including providing indemnity insurance, continuing professional development, codes of ethics and practice, complaint and disciplinary procedures etc. The government is not involved in defining standards of education and practice.

In the United States, for example, each state has its own laws regulating the practice of medicine, including homeopathy. In some states, like Minnesota and California, health freedom laws exist that allow the practice of homeopathy freely with no government oversight. Some complementary medicine professions, for example, Naturopathic Medicine, Traditional Chinese Medicine, and Chiropractic Medicine have their own licensing boards and scope of practice laws, whereas many other professions do not function under licensing boards but exist within a self-regulatory non-license model.

THE SELF-REGULATORY MODEL

As homeopathy is not currently offered regularly within medical training or in having specific medical homeopathic medical schools in many countries, the growth of homeopathy has occurred outside of mainstream medical education and the homeopathic profession has developed over the last fifty years with its own standards of education, accreditation, and registration. This has worked well for the profession and the caliber of training and practice has increased considerably, with the profession flourishing.

The self-regulated model (statutorily or voluntary) has not led to the indiscriminate or irresponsible development of health practices. In fact, a self-regulated profession has led to most professions creating a highly responsible profession which has safeguarded the public from abusive or exploitative practices. Existing civil laws already provide consumer protection.

This issue was explored in the following document called The Safety of Homeopathy, produced by the European Council for Classical Homeopathy in 2009 (This is now called the European Central Council of Homeopathy) and an updated document called the ECCH professional portfolio was produced in 2017 (1). In this document, it explored the question of safety in the practice of homeopathy and how the various models of self-regulation can be used to develop the profession, and the obligations of the profession to establish standards of registration, education and accreditation, with necessary protections for the public and standards of competence. The document studied all available evidence for professional accountability and disciplinary procedures in Europe and concluded that there were few instances of professional misconduct and of danger to the consumer. It identified three types of homeopathic practitioners:

- Homeopaths who have undergone a full professional training.
- Medical doctors and other health care practitioners who have undertaken post graduate levels of training, from introductory to a full training in homeopathy.
- Other practitioners who include some aspects of homeopathy into their therapeutic options.

It is our position that regulation should be adequate to protect the consumer/public and that a self-regulatory model can be effective in developing a profession and in protecting the consumer. The role of government can therefore be supportive and not necessarily restrictive and legislative. We recognize that different countries have different laws in the regulation of various medical practices, including TCIM, but if more natural forms of medicine are intrinsically safer than conventional medicine, then any regulation should be done only to protect the consumer.

Some African countries, for example, as well as the World Health Organization, are looking at how to regulate and evaluate Traditional Medicines and other forms of Complementary and Alternative Medicines, under the umbrella of an integrated approach to healthcare. While this is laudable, we feel caution needs to be taken in not imposing an over-regulated government regulatory model that may limit the development of a profession. Governments can work hand in hand with various professions in establishing appropriate standards, which should evolve organically as a profession develops in a country. While licensing and scope of practice laws aim to protect public safety, they can also preserve the economic interests of established professions and, in some cases, create regulatory burdens that limit both professional development and consumer access to diverse, safe healthcare options.

CONCLUSION

It is our opinion that a well-developed self-regulated profession, in possible consultation with government bodies, whether a statutorily or voluntary self-regulation, is a legitimate and effective way for a profession to develop and grow and which can be the first step in developing a broader regulatory mechanism. In the evolving field of Traditional, Complementary and Integrative Medicines (TCIM), the knowledge from professionals representing various systems of health care is to be encouraged to form registration and accreditation bodies and standards of education for their profession. These bodies can then represent the profession with government and civil society organizations and help educate the public of the benefits of their profession. They can also work under the umbrella of bodies such as the World Health Organization that is seeking the integration of TCIM's as the goals of Universal Health Coverage are being sought.

This can mean that many systems of TCIM in the future can be practiced by both doctors and other health professionals if they are trained to a professional level but also that these professions can grow as unique practices which are recognized within society at large. It is our opinion that if homeopathy is limited to one group of professionals only, this can limit the profession and lessen the choices for consumers to make for their own educated choice in their healthcare.

(1) <https://homeopathy-ecch.org/documents/ecch-portfolio/>