

PHILIPPINE INSTITUTE OF TRADITIONAL AND ALTERNATIVE HEALTH CARE (PITAHC)

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Toward Clearer Vision to the Filipino People

The importance of traditional medicine in providing essential health care to the people should be recognized. At present, its use has tremendously expanded and gained wide global acceptance and popularity. In the Philippines, the practice of traditional medicine which was passed on from generation to generation has gained a deep significance in health delivery considering the expensive western medical treatment which most Filipinos could not afford.

The Department of Health (DOH), through former Health Secretary and incumbent Senator Juan M. Flavies, first came out with the Traditional Medicine (trad med) Program by virtue of Administrative Order No. 12 in 1992. This special program was tasked to promote and advocate traditional medicine nationwide. In order to institutionalize the program, the drafting of a traditional medicine law started in 1994. In 1997, Pres. Fidel V. Ramos appreciating the potential of traditional medicine in our health and economy, included this as one of his administration's pole-vaulting strategies.

The timely approval of the law (R.A 8423) otherwise known as the Traditional and Alternative Medicine Act (TAMA) of 1997 gave rise to the creation of the Philippine Institute of Traditional and Alternative Health Care (PITAHC) a corporation attached to the DOH to answer the present needs of the people on health care through the provision and delivery of traditional and alternative health care (TAHC) products, services and technologies that have been proven safe, effective and affordable. Foremost among its objectives are:

- To encourage scientific research on and develop traditional and alternative health care systems that has a direct impact on public health care;
- To promote and advocate the use of traditional /alternative health care modalities that have been proven safe, effective, cost-effective and consistent with government standards on health care practice,
- To develop and coordinate skills training courses for various forms of traditional and alternative health care modalities,
- To formulate standards, guidelines and codes of ethical practice appropriate for the practice of traditional and alternative health care as well as in the manufacture, quality control and marketing of different traditional and alternative health care materials, natural and organic products, for approval and adoption by the appropriate government agencies,

- To formulate policies for the protection of indigenous and natural health resources and technology, natural products, by-products and derivatives from unwarranted exploitation, for approval and adoption by the appropriate government agencies,
- To formulate policies to strengthen the role of traditional and alternative health care delivery system; and,
- To promote traditional and alternative health care in international and national conventions, seminars and meetings.

For year 2000, PITAHC's strategic directions were geared towards the following:

- Nationwide TAHC promotion, advocacy and networking;
- TAHC policy, standards, guidelines formulation, implementation and recommendation;
- National research program implementation of TAHC;
- Financing scheme networking and facilitation;
- TAHC promotion and marketing;
- TAHC clinical service delivery.

PITAHC made the initial step in implementing its projects towards the achievement of its objectives. This year PITAHC proved its worthwhile beginning and commitment to pursue its directions. The biggest challenge however, is in the promotion and advocacy of TAHC. It is our ardent belief that we could achieve our goals through partnership with the community, government and the private sector.

Only then we can say that our vision of "Healthy and Productive Filipinos using traditional and alternative health care products, services, and technologies and still maintaining an enabling and caring environment" will be realized.

Vision

"Health for all Through Traditional and Alternative Health Care"

Mission

"PITAHC upholds the right of every Filipino for better health through the provision of safe, effective, and affordable traditional and alternative health care products, services and technologies."

Mandate

Republic of the Philippines
CONGRESS OF THE PHILIPPINES
Metro Manila

Tenth Congress
Third Regular Session

Begun and held in Metro Manila, on Monday the twenty-eight day of July, nineteen hundred and ninety-seven.

[REPUBLIC ACT NO.8423]

An Act creating the PHILIPPINE INSTITUTE OF TRADITIONAL AND ALTERNATIVE HEALTH CARE (PITAHC) to accelerate the development of traditional and alternative health care in the Philippines, providing for a TRADITIONAL AND ALTERNATIVE HEALTH CARE DEVELOPMENT FUND and for other purposes

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

Section I. Short Title. This Act shall be known as the "Traditional and Alternative Medicine Act (TAMA) of 1997".

Article I GUIDING PRINCIPLES

Section 2. Declaration of Policy. It is hereby declared the policy of the State to improve the quality and delivery of health care services to the Filipino people through the development of traditional and alternative health care and its integration into the national health care delivery system.

It shall also be the policy of the State to seek a legally workable basis by which indigenous societies would own their knowledge of traditional medicine. When such knowledge is used by outsiders, the indigenous societies can require the permitted Users to acknowledge its source and can demand a share of any financial return that may come from its authorized commercial use.

Section 3. Objectives. The objectives of this Act are as follows:

(a) To encourage scientific research on and develop traditional and alternative health care systems that have direct impact on public health care;

(b) To promote and advocate the use of traditional, alternative, preventive, and curative health care modalities that have been proven safe, effective, cost effective and consistent with government standards on medical practice;

(c) To develop and coordinate skills training courses for various forms of traditional and alternative health care modalities;

(d) To formulate standards, guidelines and codes of ethical practice appropriate for the practice of traditional and alternative health care as well as in the manufacture, quality control and marketing of different traditional and alternative health care materials, natural and organic products, for approval and adoption by the appropriate government agencies; .

(e) To formulate policies for the protection of indigenous and natural health resources and technology from unwarranted exploitation, for approval and adoption by the appropriate government agencies;

(f) To formulate policies to strengthen the role of traditional and alternative health care delivery system; and

(g) To promote traditional and alternative health care in international and national conventions, seminars and meetings in coordination with the Department of Tourism, Duty Free Philippines, Incorporated, Philippine Convention and Visitors Corporation and other tourism-related agencies as well as non-government organizations and local government units.

Article II

DEFINITION OF TERMS

Section 4. Definition of Terms. As used in this Act, the following terms shall mean:

(a) "Traditional and alternative health care" -the sum total of knowledge, skills and practices on health care, other than those embodied in biomedicine, used in the prevention, diagnosis and elimination of physical or mental disorder.

(b) "Traditional medicine" -the sum total of knowledge, skills and practice on health care, not necessarily explicable in the context of modern, scientific philosophical framework, but recognized by the people to help maintain and improve their health towards the wholeness of their being, the community and society, and their interrelations based on culture, history, heritage, and consciousness. I

(c) "Biomedicine" - that discipline of medical care advocating therapy with remedies that produce effects differing from those of the diseases treated. It is also called 'allopathy,' 'western medicine,' 'regular medicine,' 'conventional medicine,' 'mainstream medicine,' 'orthodox medicine,' or 'cosmopolitan medicine.'

(d) "Alternative health care modalities" - other forms of non-allopathic, occasionally non-indigenous or imported healing methods, though not necessarily practiced for centuries nor handed down from one generation to another. Some alternative health care modalities include reflexology, acupuncture, massage, acupressure, chiropractic, nutritional therapy, and other similar methods.

(e) "Herbal medicines" - finished, labeled medicinal products that contain as active ingredient/s aerial or underground part/s of plant or other materials or combination thereof, whether in the crude state or as plant preparations. Plant material includes 'juices, gums, fatty oils, essential oils, and other substances of this nature. Herbal medicines, however, may contain excipients in addition to the active ingredient(s). Medicines containing plant material(s) combined with chemically-defined active substances, including chemically-defined, isolated constituents of plants, are not considered to be herbal medicines.

(f) "Natural product" - those foods that grow spontaneously in nature whether or not they are tended by man. It also refers to foods that have been prepared from grains, vegetables, fruits, nuts, meats, fish, eggs, honey, raw milk, and the like, without the use or addition of additives, preservatives, artificial colors and flavors, or manufactured chemicals of any sort after harvest or slaughter.

(g) "Manufacture" - any and all operations involved in the production, including preparation, propagation, processing, formulating, filling, packing, repacking, altering, ornamenting, finishing, or otherwise changing the container, wrapper, or labeling of a consumer product in the furtherance of the distribution of the same from the original place of manufacture to the person who makes the final delivery or sale to the ultimate consumer.

(h) "Traditional healers" - the relatively old, highly" respected people with a profound knowledge of traditional remedies

(i) "Intellectual property rights" - is the legal basis by which the indigenous communities exercise their rights 'to have access to protect, control over their cultural knowledge and product, including but not limited to, traditional medicines, and includes the right to receive compensation for it.

Article III

THE PHILIPPINE INSTITUTE OF TRADITIONAL AND ALTERNATIVE HEALTH CARE

Section 5. Philippine Institute of Traditional and Alternative Health Care. There is hereby established a body corporate to be known as the Philippine Institute of Traditional and Alternative Health Care, hereinafter referred to as the Institute. The Institute shall be attached to the Department of Health. Its principal office shall be in Metro Manila, 'but it may establish other branches or offices elsewhere in the Philippines as, may be necessary or proper for the accomplishment of its purposes and objectives.

Section 6. Powers and Functions. In furtherance of its purposes and objectives, the Institute shall have the following powers and functions:

(a) To plan and carry out research and development activities in the areas of traditional and alternative health care and its ultimate integration into the national health care delivery system;

(b) To verify, package and transfer economically viable technologies in the field of traditional and alternative health care, giving emphasis on the social engineering aspects necessary for group endeavor;

(c) To provide the database for policy formulation that will stimulate and sustain production, marketing and consumption of traditional and alternative health care products;

(d) To organize and develop continuing training programs for physicians, nurses, pharmacists, physical therapists, and other professional health workers and students, as well as scientists, research managers and extension workers in the field of traditional and alternative health care;

(e) To formulate policies that would create public awareness through educational activities, conventions, seminars, conferences, and the like by focusing on the promotion of healthy living for preventing diseases, thereby uplifting the health care industry;

(f) To acquire or obtain from any governmental authority whether national or local, foreign or domestic, or from any person, corporation, partnership, association or other entity, such charters, franchises, licenses, rights, privileges, assistance, financial or otherwise, and concessions as are conducive to necessary proper for the attainment of its purposes and objectives;

(g) To receive and acquire from any person and/or government and private entities, whether foreign or domestic, grants, donations and contributions consisting of such properties, real or personal, including funds and valuable effects or things, as may be useful, necessary or proper to carry out its purposes and objectives and administer the same in accordance with the terms of such grants, donations and contributions, consistent with its purposes and objectives;

(h) To serve as the coordinating center of a national network of traditional and alternative health care stations located in the different regions of the country;

(i) To formulate a code of ethics and standards for the practice of traditional and alternative health care modalities for approval and adoption by the appropriate professional and government agencies;

(j) To formulate standards and guidelines for the manufacture, marketing and quality control of different traditional and alternative health care materials and products for approval and adoption by the Bureau of Food and Drugs;

(k) To coordinate with other institutions and agencies involved in the research on herbal medicines;

(l) To adopt and use a corporate seal;

(m) To sue and be sued in its corporate name;

(n) To succeed by its corporate name;

(o) To adopt its by laws and promulgate such rules and regulations as may be necessary or proper to implement this Act, and to amend or repeal the same from time to time;

(p) To enter into, make and execute contracts and agreements of any kind or nature;

(q) To borrow, raise or obtain funds, or to enter into any financial or credit arrangement in order to support or carry out its research programs, finance its capital and operating expenses, subject to pertinent laws governing public debts and expenditures;

(r) To invest, purchase or otherwise acquire, own, hold, use, mortgage, pledge, encumber, sell, assign, convey, exchange, or otherwise deal in real and/or personal properties of whatever kind and nature, or any interest therein, including shares of stock, bonds, notes, securities and other evidences of indebtedness of natural or juridical persons, whether domestic or foreign and whether government or private;

(s) To exercise all the powers of a corporation under the General Corporation Law, insofar as such powers are not in violation of the provisions of this Act; and

(t) To exercise such other powers and functions, and perform such other acts as may be necessary, proper or incidental to the attainment of its purposes and objectives.

Section 7. Board of Trustees. The corporate powers of the Institute shall be exercised, and all its business, activities and properties shall be controlled by a Board of Trustees, hereinafter referred to as the Board.

(a) Composition. The Board shall be composed of the following:

Secretary of Health -ex-officio chairman

Permanent representatives of the following government offices:

Department of Science and Technology;
Department of Environment and Natural Resources;
Department of Agriculture;
Department of Education, Culture and Sports; and
Commission on Higher Education.

Representatives of the following industries/ sectors:

One (1) physician who is engaged in the practice of traditional and alternative health care;

One (I) member from a duly recognized -academe/ research institution engaged in traditional and alternative health care research;

One (I) traditional and alternative health care practitioner who is not a physician;

One (I) biomedical/allopathic/western medical practitioner preferably from the Philippine Medical Association;

One { I) member from the natural food industry and/or organic food industry; and

One (I) member from the environmental sector organization.

The six (6) members representing the above-mentioned sectors/industry shall be appointed by the President of the Philippines upon recommendation of the Secretary of Health. Of the appointive members, two (2) members shall have a term of three (3) years; the second two (2) members appointed shall each have a term of two (2) years; and, the third two (2) members shall each have a term of one (1) year.

Any member appointed to a vacancy shall serve only for the unexpired term of the member whom he/she shall succeed.

(b) Meetings and quorum. The Board shall meet regularly at least once a month or as often as the exigencies of the service demand. The presence of at least six (6) members shall constitute a quorum, and the majority vote of the members present, there being a quorum, shall be necessary for the adoption of any resolution, decision or any other act of the Board.

(c) Allowances and per diems. The members of the Board shall receive a per diem for every meeting actually attended subject to the pertinent budgetary laws, rules and regulations on compensation, honoraria and allowances.

Section 8. Powers and Functions of the Board. The Board shall exercise the following powers and functions:

(a) To define and approve the programs, plans, policies, procedures and guidelines for the Institute in accordance with its purposes and objectives, and to control the management, operation and administration of the Institute;

(b) To approve the Institute's organizational structure, staffing pattern, operating and capital expenditure, and financial budgets prepared in accordance with the corporate plan of the Institute;

(c) To approve salary ranges, benefits, privileges, bonuses and other terms and conditions of service for all officers and employees of the Institute, upon recommendation of the Director General and consistent with the salary standardization and other laws;

(d) To appoint, transfer, promote, suspend, remove or otherwise discipline any subordinate officer or employee of the Institute, upon recommendation of the Director General;

(e) To create such committee or committees and appoint the members thereof, as may be necessary or proper for the management of the Institute or for the attainment of its purposes and objectives;

(f) To determine the research priorities of the Institute consistent with the framework of its purposes and objectives and in coordination with other government agencies; and

(g) To exercise such other powers and functions and perform such other acts as may be necessary or proper for the attainment of the purposes and objectives of the Institute, or as may be delegated by the Secretary of Health.

Section 9. Director General and Other Officers. The Institute shall be headed by a Director General who shall be appointed by the President of the Philippines upon recommendation of the Secretary of Health. The Director General shall have a term of six (6) years.

The Director General shall be assisted by such Deputy Director General(s) and program managers/coordinators as the Board may determine to carry out the purposes and objectives of this Act.

Section 10. Powers, Functions and Duties of the Director General.

The Director General shall have the following powers, functions and duties:

(a) To exercise overall supervision and direction over the implementation of all research and development programs of the Institute, and to supervise and direct the management, operation and administration of the Institute;

(b) To execute contracts, including deeds that may incur obligations, acquire and dispose of assets and deliver documents on behalf of the Institute, within the limits of authority delegated to him by the Board;

(c) To implement and enforce policies, decisions, orders, rules and regulations adopted by the Board;

(d) To submit to the Board an annual report of the Institute;

(e) To submit to the Board an annual budget and such supplemental budget as may be necessary for its consideration and approval; and

(f) To exercise such other powers and functions and perform such other duties as may be authorized or assigned by the Board.

Section 11. Government Agency Support and Coordination. The Institute may, for the purpose of its research and development activities, obtain and secure the services of scholars, scientists and technical personnel of any unit of the Department of Health and other agencies of the Philippine Government. Such personnel may be paid honoraria as may be fixed and authorized by the Board following the usual government rules and regulations governing honoraria and allowances. The Institute shall also assist, cooperate and coordinate with other government agencies, such as the Bureau of Food and Drugs of the Department of Health and the Philippine Council for Health Research and Development of the Department of Science and Technology for the implementation of the purposes and objectives of this Act.

Article IV PROMOTION OF TRADITIONAL AND ALTERNATIVE HEALTH CARE

Section 12. Traditional and Alternative Health Care Advocacy and Research Program. The Institute shall promulgate a nationwide campaign to boost support for the realization of the objectives of this Act. It shall encourage the participation of non-government organizations in traditional and alternative health care and health-related projects. The Institute shall also formulate and implement a research program on the indigenous Philippine traditional health care practices performed by "traditional healers" using scientific research methodologies.

Section 13. Standards for the Manufacture, Marketing and Quality Control of Traditional Medicine. The Institute, in collaboration with the Bureau of Food and Drugs, shall formulate standards and guidelines for the manufacture, quality control and marketing of different traditional and alternative health care materials and products.

Section 14. Incentives/or Manufacturers of Traditional and Alternative Health Care Products. Manufacturers of traditional and alternative health care products like herbal medicinal plants shall enjoy such exemptions, deductions and other tax incentives as may be provided for under the Omnibus Investment Code, as amended.

Section 15. Traditional and Alternative Health Care Development Fund. To implement the provisions of this Act, there is hereby created a Traditional and Alternative Health Care Development Fund which shall be used exclusively for the programs and projects of the Institute, in the amount of Fifty million pesos (P50,000,000.00) for the first year, Seventy-five million pesos (P75,000,000.00) for the second year, and One hundred million pesos (P100,000,000.00) for the third year from the earnings of the Duty Free Philippines: Provided, that not more than fifteen percent (15%) of said fund shall be used for administrative costs of the Institute.

Thereafter, such amount as may be necessary to fund the continued implementation of this Act shall be included in the annual General Appropriations Act.

Article V

TRANSITORY PROVISIONS

Section 16. Appointment of Board Members. Within thirty (30) days from the date of effectivity of this Act, the President of the Philippines shall appoint the members of the Board as well as the Director General and Deputy Director General(s) .

Section 17. Transfer of Functions of the Traditional Medicine Unit and Other Related Units. Upon the establishment of the Institute, the functions, personnel and assets of the Traditional Medicine Unit and all the pharmaceutical and herbal processing plants of the Department of Health shall be transferred to the Institute without need of conveyance, transfer or assignment.

For the year during which this Act was approved, the unexpended portion of the budget of the offices, agencies and units merged shall be utilized for establishing the Institute and initiating its operations, including the formulation of the rules and regulations necessary for the implementation of this Act.

Incumbent officials and employees of the affected offices shall continue to exercise their respective functions, duties and responsibilities with the corresponding benefits and privileges. To the greatest extent possible and in accordance with existing laws, all employees of the affected offices, agencies and units shall be absorbed by the Institute.

Article VI

MISCELLANEOUS PROVISIONS

Section 18. Oversight Functions. The Institute shall submit to Congress an annual accomplishment report which shall include the status of its priority researches and operation. In the exercise of its oversight functions, Congress may inquire into the programs of the Institute.

Section 19. Implementing Rules and Regulations. Within thirty (30) days from the completion of their appointments, the Board shall convene and, in collaboration with the Department of Health -Traditional Medicine Unit, formulate the rules and regulations necessary for the implementation of this Act. Said rules and regulations shall be issued within one hundred eight (180) days from the date of the Board's initial meeting and shall take effect upon publication in a newspaper of general circulation.

Section 20. Repealing Clause. All laws, decrees, executive orders, and other laws including their implementing rules and regulations inconsistent with the provisions of this Act are hereby amended, repealed or modified accordingly.

Section 21. Separability Clause. If any provision of this Act is declared unconstitutional or invalid, other provisions thereof which are not affected thereby shall continue in full force and effect.

Section 22. Effectivity. This Act shall take effect fifteen (15) days following its publication in the Official Gazette or in at least two (2) newspapers of general circulation.

Approved:

JOSE DE VENECIA, JR.
Speaker of the House
of Representatives

ERNESTO M. MACEDA
President of the Senate

This Act, which is a consolidation of Senate Bill No.1471 and House Bill No.10070 was finally passed by the Senate and the House of Representatives on December 8, 1997.

ROBERTO P. NAZARENO
Secretary General
House of Representatives

LORENZO E. LEYNES, JR.
Secretary of the Senate

Approved: December 09, 1997

FIDEL V. RAMOS
President of the Philippines

PROGRAMS AND PROJECTS

Herbal Medicine Community-Based Program

The program focuses on the promotion and advocacy of ten (10) scientifically-proven medicinal plants endorsed by the Department of Health, namely: Lagundi, Yerba Buena, Sambong, Tsaang Gubat, Niyug-niyugan, Bayabas, Akapulko, Ulasimang Bato, Bawang and Ampalaya. These medicinal plants include technology transfer on the preparation of herbal decoction, syrup, ointment and soap and lectures on Sampung (10) Halamang Gamot.

Acupuncture

A traditional Chinese Medicine that uses needles in the treatment of common illnesses like pain management, muskulo-skeletal disorders, stroke rehabilitation and bronchial asthma. Acupuncture is one of the forefront programs being promoted by the Institute. PITAHC also conducts comprehensive training on Basic Acupuncture for physicians.

Massage Therapy

A method of maintaining health, managing stress and alleviating pain by applying pressure or massaging acupressure points on the body surfaces. PITAHC also conducts regular Massage Therapy Appreciation seminar for the general public every Thursday morning, likewise, a National Certification training on Acupressure will be conducted and accreditation of Massage Therapy Clinics will be established nationwide.

Other Complementary Health Modalities

The integration of other complementary health modalities in the health care delivery system as a component of Primary Health Care that are proven to be safe, beneficial, affordable and culturally-acceptable is the main thrust of this program.

Philippine Indigenous Healing Traditions

PITAHC shall also document, research, develop, protect and promote safe, beneficial, affordable and culturally-acceptable indigenous healing traditions handed down by ancestors to the present generation.

Health Tourism

In partnership with government agencies particularly the Department of Tourism, the Department of Environment and Natural Resources, non-government organizations and the

private sector, PITAHC will promote, advocate and accredit traditional and alternative health care clinics that are proven to be safe, beneficial, affordable and culturally-acceptable. The program shall focus on the healing aspect of hot springs, beach and forest resorts.

Nutrition and Alternative Healthy Lifestyle

Older persons, 40 years and over are the most greatly affected by nutrition-related lifestyle diseases, this was revealed by the FNRI-DOST 1998 National Nutrition Survey. In its effort to address the situation, PITAHC will promote and advocate the adoption of an alternative healthy lifestyle through diet modification, regular physical, mental & spiritual exercise and stress management.

Environmental Protection and Preservation

The Philippine rainforest is the major source of indigenous medicinal plants, these plants are being threatened of extinction by continuous use and misuse. Thus, PITAHC will pursue the protection, preservation and propagation of medicinal plants, through the establishment of a gene bank; database for research activities on herbal medicine and by the development of a workable scheme on benefit-sharing on intellectual properties of indigenous communities.

PRODUCTS / SERVICES / TECHNOLOGY

Operations

PITAHC maintains four Herbal Processing Plants (HPP) namely: Cagayan Valley Herbal Processing and Pharmaceutical Plant; Tacloban Herbal Processing and Pharmaceutical Plant; Davao Herbal Processing and Pharmaceutical Plant and Cotabato Herbal Processing and Pharmaceutical Plant. These plants are strategically located in the three major islands of the country and produces herbal medicines in dosage form that are proven safe, effective, affordable and consistent with government standards like Lagundi (300 mg) as anti-asthma and anti-cough, Sambong (250 mg) as anti-urolithiasis and diuretic and Tsaang Gubat (250 mg) as anti-motility tablets.

Training

Enhancement of skills and capabilities of government, NGO and private health workers is one of the major thrusts of PITAHC. To provide continuous education among PITAHC staff, health workers and practitioners, the Institute offers training on traditional and alternative health care modalities specifically on Herbal Medicine, Massage Therapy and Acupuncture.

Technology Transfer

Through its Social Enterprise Development (SED) Unit, PITAHC conducts technology transfer activities in the different localities of the country as livelihood project particularly the

preparation of herbal decoction, syrup and ointment for Primary Health Care. Herbal soap-making is also taught.

STRATEGIC DIRECTIONS FOR YEAR 2002-2007

Policy, Standard Development and Accreditation

PITAHC will continue to pursue the development of policies and standards on Acupuncture, Massage Therapy, Herbal Products and Medicines, Lifestyle Modification and other TAHC modalities. The development of Code of Ethics and Standards of Practice for all TAHC modalities and Accreditation System will also be pursued. Review and recommendation of policies for the protection of indigenous and natural health resources and technologies will also be done.

Human Resource Development and Empowerment

To ensure the performance and efficiency of the Institute as a government-owned and controlled corporation, staff development will be a major priority. Competitive personnel compensation and benefit package will likewise be developed and ensured. As part of its continuous pursuit towards capability-building, a training framework and module on holistic health will be developed. In addition, nationwide training on Massage Therapy, basic and advance acupuncture and herbal medicine preparation and other TAHC modalities will be conducted regularly.

Promotion, Advocacy and Networking

In its effort to create awareness among the Filipinos on the benefits of traditional and alternative health care modalities that are considered safe, beneficial, affordable, culturally-acceptable and consistent with government standards on medical practice, the Institute will undertake national and international promotion and advocacy activities like tri-media advocacy on TAHC products, services and technologies; Information, Education & Communication (IEC) materials development, production and dissemination; periodic surveys and TAHC awareness, knowledge and practices and intra and intersectoral coordination/networking.

Research and Development

In partnership/collaboration with the academe and commercial institutions, PITAHC also plans and carry-out of contract-out research in the areas of traditional, alternative and complementary health care modalities to realize the Institute's ultimate dream of TAHC's integration into the national health care delivery system. A Quality Assurance System to include a quality testing center will also be developed. A research and resource coordinating system will likewise be establish, results of these researches will also be disseminated.

Herbal Production and Marketing

Herbal Processing and Pharmaceutical Plants' facilities and equipment will be upgraded to ensure continuous production and manufacture of quality herbal medicine. The production of other forms of herbal medicine products will also be pursued. An effective and efficient marketing plan will be developed and feasibility studies and nationwide implementation in rural areas of agri-business will be undertaken.

Information Technology Systems Development

The need for PITAHC programs and projects to be competitive also calls for the development and improvement of its information technology facilities and systems, in order to achieve the aforementioned goal, PITAHC will pursue systems, software, database and network development as well as information and document management.

Corporate Financial Management and Resource Generation

As a government owned and controlled corporation, PITAHC need not be dependent on government subsidy, hence, PITAHC shall undertake income generating activities, source out external funds and develop an effective and efficient system for its sustainability.