

# The Australian Naturopathic Council



## 2021-22 Pre-Budget Submission

Contact for Australian Naturopathic Council  
[contact@naturopathiccouncil.org.au](mailto:contact@naturopathiccouncil.org.au) W: [www.naturopathiccouncil.org.au](http://www.naturopathiccouncil.org.au)



## Table of Contents

<b>Executive Summary</b>	3
<b>Australian Naturopathic Council (ANC)</b>	4
Australian Register of Naturopaths and Herbalists (ARONAH)	5
Naturopaths and Herbalists Association of Australia (NHAA)	5
Complementary Medicine Association (CMA)	5
<b>Background: Role of naturopathy in the Australian health system</b>	6
<b>ANC Pre-Budget Submission Recommendations</b>	7
Recommendation 1: Reinstate subsidy of private health insurance rebates for naturopathy	7
Recommendation 2: Dedicated Federal Government funding for naturopathic research	10
<b>References</b>	11



## Executive Summary

Naturopathy is a system of health care which is based on traditional philosophies and principles, and utilises a wide variety of tools and techniques to achieve health for a patient. It is estimated that naturopathic practitioners consult with approximately 6% of the Australian population, equating to some 1.5 million Australians, engaging in around four million consultations each year. Naturopaths in Australia are consulted for a diverse range of health issues, including diagnosed conditions of national and global significance. The preventative orientation of naturopaths contributes to alleviating the burden on public health care systems by promoting the health of consumers and preventing them from moving into the health care system.

## Recommendations

### Recommendation 1: Reinstate subsidy of private health insurance rebates for naturopathy

#### *Problem*

Despite strong evidence of the positive effect of naturopathic care in supporting chronic conditions, the federal Department of Health ruled that naturopathy be removed from PHI coverage in April 2019. This policy change has conferred additional costs to the Australian government and exposed the public to unnecessary risks by removing one of the few protections in place that allowed the public to identify appropriately trained naturopaths.

#### *Solution*

The ruling that prohibits rebates for consultations with a naturopath should be changed to permit PHI companies to provide rebates for health practices they deem to be of value to their customers. Furthermore, the government should act on previous recommendations from government reports examining the regulatory requirements of the naturopathic profession in Australia and initiate the process of including naturopathy in the National Registration and Accreditation Scheme.

### Recommendation 2: Dedicated Federal Government funding for naturopathic research

#### *Problem*

Research examining naturopathic care is critical to effective clinical decision-making, healthcare delivery, professional development and policy direction. In particular, research is urgently needed to extend the existing evidence-base regarding the clinical effectiveness, economic impact, and service delivery of naturopathic care with a focus on health conditions of national priority and commonly seen among individuals consulting with naturopaths.

#### *Solution*

The government should commit \$5 million of dedicated funding from the Medical Research Future Fund to examine naturopathic medicine and practice interventions to manage national health priority areas and conditions and supports pragmatic, practice-based and comparative effectiveness research and other designs that acknowledge and reflect real-world practice and use.



## Australian Naturopathic Council (ANC)

The Australian Naturopathic Council (ANC) represents the Australian members of the World Naturopathic Federation (WNF), and through lobbying and stakeholder engagement, promotes the profession of naturopathy. The WNF is part of the World Health Organisation (WHO) and represents over 50 naturopathic organizations from across the world with the aim to promote and advance the naturopathic profession globally.

Naturopathy is a system of health care which is based on traditional philosophies and principles and utilises a wide variety of tools and techniques to achieve health for a patient. There are many tools and techniques that a naturopath may use to treat a patient, but the four most common ones are nutritional supplements, herbal medicine, dietary advice and lifestyle change.<sup>1</sup> These principles can be found in more detail at the World Naturopathic Federation (WNF) Website.<sup>2</sup> Naturopaths in Australia are required to complete Bachelor level training.

The ANC is a coordinating body of organisations representing the naturopathic profession in Australia and provides a united voice on important issues affecting Australian naturopaths. The ANC membership is comprised of three professional organisations:

- Australian Register of Naturopaths and Herbalists (ARONAH)
- Complementary Medicine Association (CMA)
- Naturopaths and Herbalists Association of Australia (NHAA)

The ANC also includes the two educational institutions that deliver recognised naturopathic training in Australia:

- Endeavour College of Natural Health (ECNH), and
- Southern School of Natural Therapies (SSNT)

More information about the ANC can be found at <https://www.naturopathiccouncil.org.au/>. This submission represents a collaborative submission by the professional organisations members of the ANC.



### Australian Register of Naturopaths and Herbalists (ARONAH)



The Australian Register of Naturopaths and Herbalists (ARONAH) has been established to provide minimum standards of education and practice for professions of naturopathy and Western herbal medicine. The Board has developed this independent register which mirrors government requirements for the regulation of health practitioners; specifically, the statutorily regulated Boards administered by the Australian Health Practitioner Regulation Authority (AHPRA) of the National Registration and Accreditation Scheme which does not currently oversee Naturopathy and Western herbal medicine professions.

### Naturopaths and Herbalists Association of Australia (NHAA)



The Naturopaths and Herbalists Association of Australia (NHAA) is a peak professional association representing appropriately qualified naturopaths and Western herbalists. It is the oldest professional association of complementary therapists in Australia, founded in 1920, and over 80% of the membership of the NHAA are Naturopaths.

### Complementary Medicine Association (CMA)



The Complementary Medicine Association (CMA) is a national not-for-profit peer group practitioner membership association for natural therapists and students thereof, encompassing the profession of Naturopathy and various other modalities of complementary medicine. Founded in 1985, the vision and purpose is to represent health professionals to government bodies, private health insurance (PHI) funds and the general public.



## Background: Role of naturopathy in the Australian health system

Naturopathy is a distinct system of medicine based on holistic and vitalistic principles<sup>3,4</sup> which originated in Germany but is now practiced in 98 countries representing all world regions.<sup>5</sup> Practitioners of naturopathy occupy a prominent position in Australia's health care sector. It is estimated that they consult with approximately 6% of the Australian population,<sup>6</sup> equating to some 1.5 million Australians, engaging in around four million consultations each year.<sup>7</sup> Sixty percent of patients consider their naturopath to be their primary health provider, and 22% consult naturopaths as their sole health care provider.<sup>8</sup> The rate of use of naturopathic services appears to have remained consistent over the past 25 years<sup>6,9</sup> suggesting the persistent and enduring presence of naturopathy in Australia's health care landscape. Naturopaths are consulted for a diverse range of health issues, including diagnosed conditions of national,<sup>10</sup> and global,<sup>11</sup> significance, such as type 1 and 2 diabetes, cardiovascular disease, cancer, and respiratory conditions.<sup>7,8,12-14</sup> Among the dominant populations accessing naturopathic care are patients with digestive conditions, mental health conditions, and patients consulting for women's health.<sup>1</sup>

The preventative orientation of naturopaths contributes to alleviating the burden on public health care systems by promoting the health of consumers and preventing them from moving into the health care system. Core philosophies of naturopathy include the practice of preventive medicine and identification of the cause of illness in an individual. As well as alleviating acute conditions, naturopaths work with patients to identify underlying and maintaining causes of illness, and to prevent illnesses from occurring, through nutritional and lifestyle measures and encouraging positive, healthy behaviours.<sup>15</sup>

Educating the patient is another core pillar of Naturopathic practice which aims to improve health literacy and facilitate self-responsibility. Naturopathic patients report being given a sense of control over their health, and hope about their future health.<sup>16</sup> Patients with chronic conditions report being taught goal setting, problem solving and ways to relieve their symptoms by their naturopath, potentially reducing dependency on pharmaceutical medications.<sup>17</sup>

Services charged by naturopaths are out-of-pocket expenses for Australian consumers. Naturopathy is practiced outside of the established funding and regulatory models that define Australia's public health system, including the National Registration and Accreditation Scheme, Medicare, and government-supported private health insurance rebates.



## ANC Pre-Budget Submission Recommendations

### Recommendation 1: Reinstate subsidy of private health insurance rebates for naturopathy.

#### Problem

Despite strong evidence of the positive effect of naturopathic care in supporting chronic conditions,<sup>18</sup> the federal Department of Health ruled that naturopathy be removed from PHI coverage in April 2019.<sup>19</sup> This policy change has conferred additional costs to the Australian government and exposed the public to unnecessary risks by removing one of the few protections in place that allowed the public to identify appropriately trained naturopaths.

In the absence of statutory regulation under Australian Health Practitioner Regulation Authority (AHPRA), naturopathy currently operates in a self-regulated environment. Previous to the PHI ruling regarding natural therapies, PHI companies played a pseudo-regulatory role for the naturopathic profession, in that their members were only able to claim PHI rebates for consultations with naturopaths who were members of a professional association and maintained current first aid training. As professional association membership is voluntary but requires members to meet minimum education standards and continued professional development requirements, this expectation from PHI companies provided an indirect avenue to ensure patients were accessing naturopaths who were appropriately qualified and accountable. This mechanism also enabled professional associations to more effectively enforce standards of public safety.

The prohibition for PHI companies to rebate patient consultations with naturopathic practitioners eliminated this pseudo-regulatory function which had been protecting the public interest. In the absence of title protection through statutory registration, the public is now left exposed to underqualified and non-compliant persons claiming to practice naturopathy with limited accountability and oversight. While there is clinical evidence to support naturopathic care as an effective option for patients with a range of chronic conditions, patients who consult with individuals claiming naturopathic qualifications but without recognised training. These patients are at risk of, at best, missed opportunities to manage these conditions and, at worst, adverse outcomes and complications. Either risk results in the patient requiring care from government-funded health services and, therefore, an increased financial burden on the health care system.

Using the "Review of the Australian Government Rebate on Private Health Insurance for Natural Therapies"<sup>20</sup> as the basis for prohibiting PHI companies from providing rebates for naturopathic consultations was significantly problematic. Not only was the report limited to published systematic reviews,<sup>21</sup> but a more contemporary review of the evidence identified 31 randomised clinical trials comprising 9798 participants<sup>18</sup>). The review identified evidence to suggest that whole-system naturopathic practice is effective in improving patient health for a range of chronic health conditions, including anxiety, multiple sclerosis, cardiovascular disease and musculoskeletal



conditions. Even without these additional studies, the 2015 Review did identify existing research reporting clinical benefit from naturopathic care in select conditions, but these were dismissed as not relevant to the Australian context due to the research being conducted in regulated jurisdictions which was contrasted against the unregulated nature of the naturopathic profession in Australia.

In response to widespread public and sector feedback that the 2015 Review was not a true reflection of the current evidence-base for many of the natural therapies examined, naturopathy included, the Department of Health commissioned an updated review in 2019. The updated Review is being conducted in two Tranches with naturopathy included in Tranche 1. The Review is being led by the Commonwealth Chief Medical Officer, with support provided by departmental staff (operational) and an advisory panel of experts (strategic); the latter referred to as the Natural Therapies Review Expert Advisory Panel (NTREAP). The scientific review methodology and process is being overseen by the National Health and Medical Research Council but conducted by independent research groups.

The NTREAP was convened to assess additional available evidence for natural therapies, including a five-year update to its 2014–15 review of natural therapies, undertake public consultation and provide advice to Government on whether certain natural therapies should be eligible for subsidy through the private health insurance rebate. This decision will be informed by the outcomes of the Review once it is completed.

The Government committed \$2 million to support the Review which commenced mid 2019 with the final review report intended to be provided to Government in 2020. However, this timeline has been significantly extended resulting in substantial additional costs to the Department. The delay is also contributing to an exacerbation of some of the problems identified above specifically regarding professional oversight.

While we welcome the opportunity for an updated Review that includes all relevant original research examining the effectiveness of naturopathic care, rather than being limited only to published systematic reviews, we argue that the process of coordinating and managing the 2019 Review of naturopathy is unnecessarily burdensome for the Department of Health. This is particularly the case given evidence to support the effectiveness was already identified in the 2015 Review.

### Solution

The ANC proposes that the ruling that prohibits rebates for consultations with a naturopath be changed to permit PHI companies to provide rebates for health practices they deem to be of value to their customers. This change will immediately release the operational and strategic costs related to the naturopathy component of the Review incurred by the Department.



This change will also reinstate the pseudo-regulatory protection access to PHI rebates offered to individuals accessing naturopathic care in the currently unregulated environment in Australia, thereby minimising any direct and indirect costs associated with individuals accessing underqualified or non-compliant persons appropriating the title 'naturopath' and placing patients at risk. The Minister's ruling to prohibit PHI companies providing rebates for consultations with naturopaths has made the absence of regulation an increasingly concerning issue of public safety. For example, since the PHI ruling came to effect in April 2019 a non-government accredited college has begun offering a course titled 'Advanced Diploma in Naturopathic Practice' which is not delivered under the Australian Qualifications Framework (AQF), nor does it meet the educational standards set by the naturopathic profession.

While we acknowledge that access to PHI rebates is not intended to be, nor should be, used as a regulatory mechanism in the absence of statutory registration, it does serve this purpose in the current landscape. With this in mind, we also propose that the government act on previous recommendations from government reports examining the regulatory requirements of the naturopathic profession in Australia<sup>22</sup> and initiate the process of including naturopathy in the NRAS.

Registration focuses on providing several safeguards to ensure the public are accessing safe and effective health care from appropriately qualified health practitioners. Every evaluation under these criteria has recommended that naturopaths warrant registration.<sup>23</sup> Naturopathic practitioners have consistently identified regulation of the profession as the major challenge the profession faces and support the implementation of regulation to ensure practice standards and promote public safety.<sup>24</sup>

Our concerns are that untrained and unethical practitioners are also able to practice using the title of 'naturopath' – the professional naturopathic community in Australia and globally does not consider these practitioners as part of the profession. For the last 20 years the industry standard of naturopathic education has been a 4-year Bachelor degree in Australia. Since 2015, government legislation and accreditation have mandated requirements that naturopathic education must be delivered within a degree model.

By including the naturopathic profession in the NRAS, the cost and burden of regulating the profession would be covered by the profession itself rather than defrayed to other departments and organisations not intended to provide regulatory oversight, such as PHI rebate budget items.



## Recommendation 2: Dedicated Federal Government funding for naturopathic research

### Problem

The ANC applauds health initiatives such as the National Preventive Health Strategy, which recognises the need for a more holistic approach to a system wide, evidence-based approach in reducing poor health. The ANC also supports the goal of the Medical Research Future Fund (MRFF) and their recognition of the vital function of ongoing research as an integral part of improved health care delivery and sustainability.

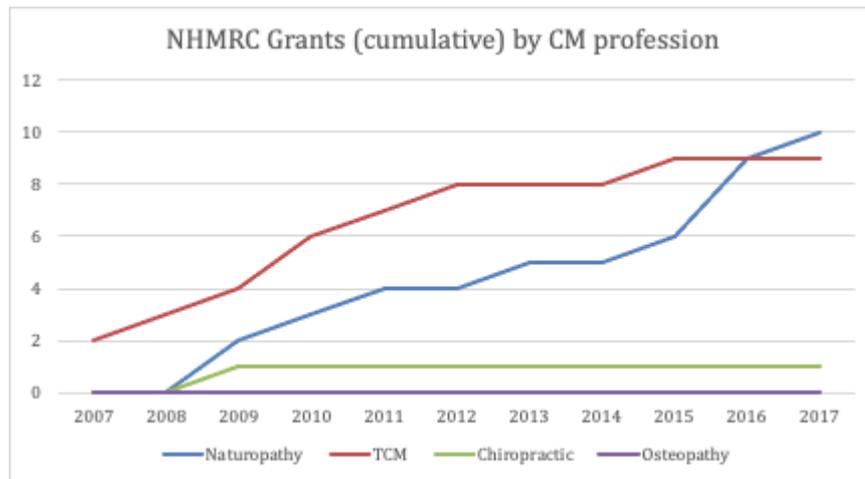
Naturopathy users are likely to have a diagnosed chronic illness - often with conditions falling into the category of national health priorities.<sup>7,8,12-14</sup> Additionally, naturopaths commonly treat other health issues of national significance. These include digestive disorders, key areas of mental health (anxiety and depression), and women's health conditions.<sup>1</sup> They also treat diverse populations across all life stages and inclusive of populations known to have unmet healthcare needs (ref). For example, women are high users of naturopathy and often consult naturopaths for menstrual disorders such as endometriosis<sup>1</sup> - an area identified by patients, clinicians and decision-makers as insufficiently managed by conventional medicine and in need of a multi-disciplinary approach.<sup>25</sup> Despite the significant level of naturopathic consultations in Australia<sup>7,8</sup> there has been no dedicated funding allocated to clinical research into naturopathic care from the MRFF or any other federal government research funding scheme.

Research examining naturopathic care is critical to effective clinical decision-making, healthcare delivery, professional development and policy direction.<sup>26</sup> In particular, research is urgently needed to extend the existing evidence-base regarding the clinical effectiveness, economic impact, and service delivery of naturopathic care with a focus on health conditions of national priority and commonly seen among individuals consulting with naturopaths.<sup>7</sup>

### Solution

It is in the public interest for the gaps in current research evidence associated with naturopathic care to be addressed. This requires Government funding for clinical trials examining whole-system, multi-modality naturopathic medicine. To date, the Australian naturopathic profession has been active in research, with naturopathic researchers attracting competitive funding through NHMRC grants. In 2013, research showed significant growth in the number of naturopaths receiving NHMRC grants, compared to other practitioners of complementary and alternative medicine (CAM) such as chiropractors and osteopaths,<sup>26</sup> portrayed in Figure 1. Further, Australian naturopaths have attracted more federal government funding than nurses, pharmacists, physiotherapists, psychologists, chiropractors, and osteopaths.<sup>26</sup> This trend has occurred despite naturopathic courses largely existing outside of publicly-funded universities, meaning the naturopathic researchers

undertaking this work are usually employed as health, medicine or public health researchers in mainstream university faculty environments.



**Figure 1: Cumulative NHMRC grants secured by CAM professional faculties within the university sector. TCM = traditional Chinese medicine. \*Naturopathy no longer has a university-based faculty, 2007-2017<sup>8</sup>**

Evidently, the naturopathic profession has capacity to design and conduct high-level clinical research. A significant amount of foundational research has been conducted by naturopathic researchers, despite a lack of dedicated research funding. However, federal government funding is required to explicitly support naturopathic research focused on the health conditions commonly experienced by Australian populations who consult with naturopaths, with preference given to conditions that align with Australian strategic and research priority areas - such as those with chronic illness, mental health conditions.<sup>7</sup>

Taking into consideration the evidence of population and consultation characteristics of Australian naturopathic practice, the ANC proposes the government commit \$5 million of dedicated funding from the Medical Research Future Fund to examine naturopathic medicine and practice interventions to manage national health priority areas and conditions including digestive disorders, mental health, and women’s health conditions. In light of the identified issues regarding the applicability of randomised-controlled trial designs within the context of complex interventions such as naturopathy,<sup>26-28</sup> this research funding should explicitly include support for diverse clinical research methodologies that answer clinical questions - such as pragmatic, practice-based and comparative effectiveness research and other designs that acknowledge and reflect real-world practice and use.

## References

1. Steel A, Schloss J, Leach M, Adams J. The naturopathic profession in Australia: A secondary analysis of the Practitioner Research and Collaboration Initiative (PRACI). *Complement Ther Clin Pract*. 2020 Aug;40:101220.
2. WNF About Naturopathy [Internet]. World Naturopathic Federation. Available from: <http://worldnaturopathicfederation.org/about-naturopathy/>
3. Baars EW, Hamre HJ. Whole Medical Systems versus the System of Conventional Biomedicine: A Critical, Narrative Review of Similarities, Differences, and Factors That Promote the Integration Process. *Evid Based Complement Alternat Med*. 2017;2017:1–13.
4. Fleming SA, Gutknecht NC. Naturopathy and the Primary Care Practice. *Prim Care Clin Off Pract*. 2010 Mar;37(1):119–36.
5. Steel A, Foley H, Bradley R, Van De Venter C, Lloyd I, Schloss J, et al. Overview of international naturopathic practice and patient characteristics: results from a cross-sectional study in 14 countries. *BMC Complement Med Ther*. 2020 Dec;20(1):59.
6. Steel A, McIntyre E, Harnett J, Foley H, Adams J, Sibbritt D, et al. Complementary medicine use in the Australian population: Results of a nationally-representative cross-sectional survey. *Sci Rep*. 2018 Dec;8(1):17325.
7. McIntyre E, Adams J, Foley H, Harnett J, Leach MJ, Reid R, et al. Consultations with Naturopaths and Western Herbalists: Prevalence of Use and Characteristics of Users in Australia. *J Altern Complement Med N Y N*. 2019 Feb;25(2):181–8.
8. Wardle J, Steel A, Casteleijn D. An evidence based overview of naturopathic practice in Australia. Bowman D, editor. *Aust J Herb Naturop Med*. 2019 Mar 15;31(1):9–13.
9. MacLennan AH, Myers SP, Taylor AW. The continuing use of complementary and alternative medicine in South Australia: costs and beliefs in 2004. *Med J Aust*. 2006 Jan 2;184(1):27–31.
10. Australian Burden of Disease Study: impact and causes of illness and death in Australia 2015 [Internet]. • Australian Institute of Health and Welfare; 2019. Available from: • Australian Institute of Health and Welfare
11. Global status report on noncommunicable diseases 2010 [Internet]. • World Health Organization; 2011. Available from: [https://www.who.int/nmh/publications/ncd\\_report\\_full\\_en.pdf](https://www.who.int/nmh/publications/ncd_report_full_en.pdf)
12. Adams J, Sibbritt D, Young AF. Naturopathy/herbalism consultations by mid-aged Australian women who have cancer. *Eur J Cancer Care (Engl)*. 2005 Dec;14(5):443–7.
13. Ng HS, Koczwara B, Roder D, Chan RJ, Vitry A. Patterns of health service utilisation among the Australian population with cancer compared with the general population. *Aust Health Rev*. 2020;44(3):470.
14. Tan AC, Mak JCS. Complementary and alternative medicine in diabetes (CALMIND) – a prospective study. *J Complement Integr Med [Internet]*. 2015 Jan 1 [cited 2021 Jan 19];12(1). Available from: <https://www.degruyter.com/doi/10.1515/jcim-2014-0038>
15. Steel A, Tiveron S, Reid R, Wardle J, Cramer H, Adams J, et al. Do women who consult with naturopaths or herbalists have a healthy lifestyle?: a secondary analysis of the Australian longitudinal study on women’s health. *BMC Complement Med Ther*. 2020 Dec;20(1):349.
16. Foley H, Steel A, Adams J. Consultation with complementary medicine practitioners by individuals with chronic conditions: Characteristics and reasons for consultation in Australian clinical settings. *Health Soc Care Community*. 2020 Jun 19;hsc.13072.
17. Foley H, Steel A, Adams J. Perceptions of person-centred care amongst individuals with chronic

- conditions who consult complementary medicine practitioners. *Complement Ther Med*. 2020 Aug;52:102518.
18. Myers SP, Vigar V. The State of the Evidence for Whole-System, Multi-Modality Naturopathic Medicine: A Systematic Scoping Review. *J Altern Complement Med N Y N*. 2019 Feb;25(2):141–68.
  19. Hunt G. Major reforms to make private health insurance simpler and more affordable [Internet]. 2017. Available from: <https://www.health.gov.au/ministers/the-hon-greg-hunt-mp/media/major-reforms-to-make-private-health-insurance-simpler-and-more-affordable>
  20. Baggoley C. Review of the Australian Government Rebate on Natural Therapies for Private Health Insurance [Internet]. Australian Government Department of Health; 2015. Available from: <https://search.informit.org/doi/10.3316/INFORMIT.037510727157632>
  21. Wardle J. The Australian government review of natural therapies for private health insurance rebates: What does it say and what does it mean? *Adv Integr Med*. 2016 Apr;3(1):3–10.
  22. Vivian Lin, Alan Bensoussan, Stephen P. Myers, Pauline McCabe, Marc Cohen, Sophie Hill, et al. *The Practice and Regulatory Requirements of Naturopathy and Western Herbal Medicine* [Internet]. Victoria: School of Public Health, La Trobe University; 2005. Available from: <http://www.aronah.org/wp-content/uploads/naturopathy-final1106.pdf>
  23. Report from the Osteopathy Chiropractic and Naturopathy Committee [Internet]. Victoria Government; 1975. Available from: <https://www.parliament.vic.gov.au/papers/govpub/VPARL1974-76NoD27.pdf>
  24. Wardle J, Adams J, Lui C, Steel A. Current challenges and future directions for naturopathic medicine in Australia: a qualitative examination of perceptions and experiences from grassroots practice. *BMC Complement Altern Med*. 2013 Jan 14;13:15.
  25. National action plan for endometriosis [Internet]. 2018. Available from: [https://www.health.gov.au/health-topics/chronic-conditions/what-were-doing-about-chronic-conditions/what-were-doing-about-endometriosis?utm\\_source=health.gov.au&utm\\_medium=callout-auto-custom&utm\\_campaign=digital\\_transformation#what-are-we-doing-about-endometriosis](https://www.health.gov.au/health-topics/chronic-conditions/what-were-doing-about-chronic-conditions/what-were-doing-about-endometriosis?utm_source=health.gov.au&utm_medium=callout-auto-custom&utm_campaign=digital_transformation#what-are-we-doing-about-endometriosis)
  26. Wardle J, Adams J. Are the CAM professions engaging in high-level health and medical research? Trends in publicly funded complementary medicine research grants in Australia. *Complement Ther Med*. 2013 Dec;21(6):746–9.
  27. Schloss J, McIntyre E, Steel A, Bradley R, Harnett J, Reid R, et al. Lessons from Outside and Within: Exploring Advancements in Methodology for Naturopathic Medicine Clinical Research. *J Altern Complement Med*. 2019 Feb;25(2):135–40.
  28. Wardle, J, Seely, D. Traditional, complementary and integrative medicine: an international reader. In: *Traditional, complementary and integrative medicine: an international reader*. London: Palgrave Macmillan; 2012. p. 266–74.