

ORIGINAL PAPER

Undergraduate homeopathy education in Europe and the influence of accreditation

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Context: The safety of patients consulting with practitioners of complementary and alternative medicine (CAM) partially depends on practitioners' competence, and thus the standard of undergraduate education.

Objectives: Describe undergraduate homeopathy courses in Europe, student/graduate numbers and whether there were differences between recognised/accredited and non-recognised/non-accredited courses.

Methods: Cross sectional survey of current homeopathy undergraduate education in Europe in 2008. Data from 145 (94.8%) out of 153 identified courses were collected. Eighty-five (55.6%) responded to a questionnaire survey. For others some data was extracted from their websites. Only data from the questionnaire survey is used for the main analysis.

Findings: The average course in the questionnaire survey had 47 enrolled students and 142 graduates, and lasted 3.6 years part-time. An estimated 6500 students were enrolled and 21,000 had graduated from 153 identified European undergraduate homeopathy courses. Out of 85 courses most had entry requirements and provided medical education ($N = 48$) or required students to obtain this competence elsewhere ($N = 33$). The average number of teaching hours were 992 (95% confidence interval (CI) 814, 1170) overall, with 555 h (95%CI 496, 615) for homeopathy. Four out of five courses were recognised/accredited. Recognised/accredited part-time courses lasted significantly longer than non-recognised/non-accredited courses (difference 0.6 years, 95%CI 0.0–1.2, $P = 0.040$), and offered significantly larger numbers of teaching hours in homeopathy (difference 167 h, 95%CI 7–327, $P = 0.041$).

Conclusions: About 6500 currently enrolled students are doing undergraduate homeopathy education in Europe and 21,000 have graduated from such courses over a period of about 30 years. Undergraduate homeopathy education in Europe is heterogeneous. Recognised/accredited courses are more extensive with more teaching hours. *Homeopathy* (2011) 100, 253–258.

Keywords: Complementary and alternative medicine; Homeopathy; Undergraduate education; Recognition; Accreditation; Patient safety

Context

Public interest in and use of complementary and alternative medicine (CAM) including homeopathy has increased over the past decades,¹ with an increase in numbers of adults visiting CAM practitioners.^{2,3} Several countries have introduced CAM legislation and regulation to ensure citizens' freedom of right to make choices for their own healthcare, while at the same time ensuring safety.^{4–10} Even though homeopathy is one of the best

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established CAM therapies in Europe¹ and is practised both by statutorily regulated and unregulated practitioners, the legal situation varies considerably and the profession is in several countries self-regulated.¹¹ The safety of patients consulting with unregulated homeopaths and the quality of homeopathic treatment largely depend on the quality of undergraduate education.

Little pressure has been put on practitioners to harmonise education standards,¹² but there are demands from both consumers and authorities to ensure high quality harmonised training standards.¹³ Patients' trust in CAM practitioners is higher when they are certified than when they are not.¹⁴ There has been some disagreement about and reluctance to standardising education criteria in homeopathy,^{15,16} although systems of recognition and accreditation of courses have been recommended and introduced in some countries.¹⁷⁻¹⁹ Such systems aim at assessing and ensuring the quality of education.

So far no studies have described undergraduate homeopathy courses in Europe, student/graduate numbers and whether recognition/accreditation has any impact on courses.

Objectives

The objectives of this study were to determine numbers of homeopathy undergraduate students and graduates in Europe; describe undergraduate homeopathy courses; and determine whether there were differences between those courses which were recognised/accredited and those that were not.

Methods

Cross sectional survey of current homeopathy undergraduate education in Europe carried out from January to September 2008. The project was approved by the Faculty of Health Ethics Committee at the University of Central Lancashire (UK).

Sample

A search was carried out for courses that offered undergraduate homeopathy education, including schools that do and those that do not teach medical subjects. Courses were included if they had currently enrolled students or if they had previously had students (but currently did not have any new intakes). Courses at a planning stage and courses open to medical doctors only were excluded. Names of schools in 31 out of 47 countries in Europe were provided by the European Central Council of Homeopaths (www.homeopathy-ecch.eu). Europe was here defined as including all European Union member states, EU candidate countries, European Free Trade Association (EFTA) countries, and other countries which commonly are listed as belonging to Europe (www.wikipedia.org). An internet search only helped identify two additional courses. Sixteen countries where no courses were known to exist include either small states where it is unlikely that there are any courses, or countries where only medical doctors may practise.¹¹

Procedure

All course providers were first sent a questionnaire by e-mail, and in case of non-response also by post and contacted by telephone. All material was provided in English, and later also in German and Spanish. Up to three reminders were sent to non-respondents. An internet search was carried out to obtain non-respondents' publicly available website information to compare non-respondents with respondents.

Questions

A questionnaire was developed to describe entry requirements, numbers of currently enrolled students/graduates; whether they provide full time or part-time courses; duration of courses; subjects and numbers of teaching hours; and recommended self-study hours. It included questions to determine when courses had been established, and whether course providers aimed at enabling graduates to practise independently and/or to practise under supervision of a registered healthcare practitioner. To classify whether the courses were recognised or accredited, the course providers were asked the following questions:

"Has your course been recognised in any way?" (Y/N)

"If yes, in which way?"

- Recognised by an association representing homeopathy practitioners.
- Recognised by an independent accreditation board.
- Recognised by a state validating body.
- Other (please specify)."

More than one response could be given for recognised/accredited courses.

For non-respondents, data on duration of courses and numbers of teaching hours were collected from their websites as this was the data described for most of the courses.

Analysis

Unless otherwise stated, the analysis was restricted to those courses included in the questionnaire survey. Frequency distribution was used to describe the data. To compare courses, *t*-test and chi-square tests were used. Overall student number estimates were calculated by multiplying average numbers for questionnaire responders with the total course numbers and a factor to adjust for possible differences. Data was entered into an Excel spreadsheet and analysed using the statistical software SPSS for Windows version 17.0 (SPSS Inc., Chicago, IL, USA). A significance level of 5% was chosen, and 95% confidence intervals (CIs) are presented. Missing data account for the slightly differing numbers of responses to some questions in text and tables.

Findings

One-hundred-and-fifty-three courses were identified and providers of 85 courses (55.6%) responded to the questionnaire survey. These include 74 part-time and 10 full time courses (1 unspecified). Courses were run in (number of schools in brackets): Armenia (1), Belgium (1), Bulgaria

(1), Czech Republic (3), Denmark (1), Croatia (1), Estonia (1), Finland (2), Germany (32), Greece (1), Ireland (3), Israel (1), Italy (1), Netherlands (5), Norway (3), Serbia (2), Slovakia (2), Spain (1), Sweden (1), Switzerland (4) and the United Kingdom (18).

Three quarters of questionnaire responders had more than one role within the teaching institution. Most were teachers ($n:54$), owners ($n:51$) and principals ($n:44$). Respondents who had only one role were principals ($n:7$), owners ($n:5$), teachers ($n:4$), other ($n:4$) or administrators ($n:1$). No respondent solely worked as the institution's secretary. The questionnaire was found easy to complete by 79%, 17% not easy and not difficult, 3% difficult and 0% very difficult.

All courses, with the exception of three, were established in the time period from 1980, the majority from 1990 to 1999 (40.1%) or since 2000 (31.3%), although one quarter had been in existence for 19–28 years (Table 1).

Information about length of the courses and teaching hours for 60 (88.2%) of 68 non-responding courses was found on their websites. They included the following countries (number of schools in brackets): Czech Republic (1), Finland (2), Germany (32), Greece (1), Italy (1), Netherlands (1), Portugal (3), Spain (2), Sweden (2), Switzerland (4), and the United Kingdom (11). Thus, in total some data was obtained for 145 out of 153 courses (94.8%).

Numbers of students and graduates

The mean number of students enrolled in the 85 courses included in the questionnaire survey was 47 (95%CI 38–56) and the number of graduates was 142 (95%CI 106–178) (Table 1). Thus, a total of 3967 students were enrolled and 13,417 had graduated from these courses. Since it is likely that those answering the questionnaire were reporting on larger courses, a factor of 0.7 and 0.9

Table 1 Characteristics of courses and comparison of courses that are accredited or not. Values are number of courses (percent) unless otherwise stated

	All (n:85)	Recognised (n:69) ¹	Not recognised (n:14) ¹	P-value*
Students currently enrolled (mean, SD)	49 (42.6)	46 (41.3)	43 (35.1)	0.789
0–29 students	38 (44.7%)	32 (46.4%)	6 (42.9%)	0.912
30–59 students	26 (30.6%)	21 (30.4%)	4 (28.6%)	
60 and over students	21 (24.7%)	16 (23.2%)	4 (28.6%)	
Students graduated (mean, SD)	170 (219)	167 (207.9)	184 (277.0)	0.800
0–49 students	31 (39.2%)	26 (39.4%)	5 (38.5%)	0.987
50–299 students	35 (44.3%)	29 (43.9%)	6 (46.2%)	
300 and over students	13 (16.5%)	11 (16.7%)	2 (15.4%)	
Full and/or part-time courses				0.680
Part-time	74 (88.1%)	61 (88.4%)	12 (92.3%)	
Full time	10 (11.9%)	8 (11.6%)	1 (7.7%)	
Length of courses (in years)				0.040
Part-time courses (mean, SD)	3.6 (0.9)	3.7 (SD 1.0)	3.1 (SD 0.7)	0.295
Full time courses (mean, SD)	3.1 (0.8)	3.0 (SD 0.8)	4.0 (–)	0.209
Number of courses with entry requirements	70 (82.3%)	58 (85.3%)	10 (71.4%)	0.650
Number of courses aiming at graduates being in individual independent practice	84 (98.8%)	68 (98.6%)	14 (100.0%)	0.000
Number of courses with providing medical education	48 (60.0%)	43 (66.1%)	3 (23.1%)	0.038
Total teaching hours (mean, SD)	992 (794)	1062 (843)	560 (274)	0.041
Teaching hours in homeopathy subjects (mean, SD)	555 (257)	581 (268)	414 (157)	0.120
0–499 h	30 (40.0%)	22 (36.1%)	8 (66.7%)	
500–999 h	40 (53.3%)	34 (55.7%)	4 (33.3%)	
1000 h and over	5 (6.7%)	5 (8.2%)	0 (0.0%)	
Recommended home study hours				0.105
Homeopathy subjects (mean, SD)	1311 (979)	1394 (1004)	749 (698)	0.078
Medical subjects (mean, SD)	679 (446)	669 (409)	139 (40)	0.981
Clinical training (mean, SD)	588 (446)	595 (545)	603 (933)	
Recognised/accredited				
Any type of recognition/accreditation (one or more types)	69 (83.1%)	65 (100%)	–	
By professional association	56 (67.5%)	56 (86.2%)	–	
By external accrediting body	27 (32.5%)	27 (41.5%)	–	
By state validating body	8 (9.6%)	8 (12.3%)	–	
By state other institution/body	5 (6.0%)	5 (7.7%)	–	
Established				0.594
1970–1979	3 (3.6%)	2 (2.9%)	0 (0.0%)	
1980–1989	20 (24.1%)	18 (26.5%)	2 (15.4%)	
1990–1999	34 (40.1%)	28 (41.2%)	5 (38.5%)	
2000 and later	26 (31.3%)	20 (29.4%)	6 (46.2%)	

* P-values are either *t*-tests (continuous variables) or Chi-Square (categorical variables) tests between courses that were recognised/accredited or not.

¹ Two courses did not provide information on whether they are recognised/accredited or not.

was used to estimate the numbers of students and graduates from those not responding (68 (153–85) courses multiplied by average number of students enrolled/graduated multiplied by 0.7 and 0.9). This gave 2237–2876 enrolled and 6759–8690 graduated students from the non-responding courses.

This indicates that some 6500 (6200–6800) students were enrolled at undergraduate homeopathy courses in Europe and some 21,000 (20,000–22,000) had graduated.

Description of courses

The majority of courses ($N = 70$, 82.4%) had entry requirements. Eighty-one (95.3%) course providers either offered medical education as part of the curriculum ($N = 48$) (Table 1) or students were required to obtain this competence elsewhere ($N = 33$) (not a requirement for 1 course, unknown for 3 courses). All courses except one aimed at students being able to take individual responsibility of their patients.

Seventy-four were part-time courses, ten were full time courses and one was not specified. The 74 part-time courses lasted an average of 3.6 years (95%CI 3.4–3.8) and offered a total of 871 teaching hours (45 min), including 531 h for homeopathy subjects, in addition to clinical training (Table 1). There were however considerable variations in teaching hours from the least to the most extensive part-time courses in the questionnaire survey, ranging from 444 to 6257 h for courses offering medical education, and 200 to 1440 h for courses not teaching medical subjects. The 10 full time courses, which all taught medical subjects, lasted for 3.1 years (95%CI 2.5–3.8) and had 2004 teaching hours (range 661–3347).

The average length of part-time courses for which information was obtained through the website search was 3.1 years (95%CI 2.9–3.4), statistically significant less than the part-time courses in the questionnaire survey (difference 0.4 years, 95%CI 0.1–0.8, $P = 0.005$). When part-time courses in the questionnaire survey and website search were considered together, the length of part-time undergraduate homeopathy education in Europe can be estimated to be 3.4 years (95%CI 3.2–3.6).

However, when comparing the number of teaching hours for homeopathy subjects, there were not statistically signif-

icant differences between courses in the questionnaire survey (555 h) and courses found through the internet search (541 h, $P = 0.82$). Thus the average course in Europe had approximately 550 teaching hours in homeopathy subjects.

The questionnaire survey showed that courses which offered education in medical subjects had significantly higher numbers of teaching hours (1292 h) compared to those that did not (574 h, Table 2), a difference of 718 h (95%CI 389–1048, $P < 0.001$). This difference was partially due to an average of 332 h of medical subjects being part of these courses (95%CI 243–420), but they also provided significantly higher number of teaching hours for homeopathy subjects (difference 115 h, 95%CI 6–234, $P = 0.039$).

Recognition and accreditation

Four out of five courses (83%) had been recognised and/or accredited by one or more institutions (Table 1). The majority (56 courses) had been recognised by an association representing homeopaths, and 27 courses had been accredited by an external accrediting body.

There were no differences in numbers of enrolled students and graduates when comparing those courses that were recognised/accredited and those that were not (difference in enrolled students 3, 95%CI –27 to 20, $P = 0.79$; and difference in graduates 17, 95%CI –116 to 150, $P = 0.80$) (Table 1).

Recognised/accredited part-time courses lasted significantly longer than non-recognised/non-accredited courses (difference 0.6 years, 95%CI 0.03–1.18, $P = 0.040$), and offered a significantly larger number of teaching hours in homeopathy subjects (581 h, SD 268) compared to non-recognised/non-accredited courses (414 h, SD 157) (difference 167 h, 95%CI 7–327, $P = 0.041$) (Table 1). The more types of recognition/accreditation courses had achieved, the larger the number of teaching hours overall ($P < 0.001$, data not shown). This was also true for homeopathy subjects ($P = 0.021$) with 541 h (SD 249) for courses which had one form of recognition/accreditation; 620 h (SD 288) for courses with two; 700 h (SD 255) for courses with three; and 1003 h (SD 286) for courses with four forms of recognition/accreditation.

Almost all (43 out of 48) courses that taught medical subjects had been recognised or accredited. Recognised/

Table 2 Characteristics of courses and comparison of courses that are recognised/accredited or not, divided into courses that offer both medical and homeopathic subjects and courses that do not provide teaching in medical subjects. Numbers are mean (SD) teaching hours

	All	Recognised	Not recognised	P-value*
Courses that provide both medical and homeopathic subjects	(n:48)	(n:43)	(n:3)	
All subjects	1292 (918)	1312 (959)	846 (358)	0.411
Homeopathy subjects	600 (289)	606 (301)	482 (193)	0.487
Medical subjects	332 (298)	319 (294)	239 (166)	0.647
Clinical training	260 (237)	269 (248)	192 (122)	0.600
Courses that do not provide medical subjects	(n:32)	(n:22)	(n:10)	
All subjects	574 (208)	619 (204)	475 (191)	0.070
Homeopathy subjects	485 (181)	528 (181)	391 (150)	0.057
Clinical training	151 (78)	153 (93)	148 (42)	0.931

* P-values are t-tests between courses that were recognised/accredited or not.

accredited courses which taught medical subjects had higher overall and homeopathy teaching hours than non-recognised/non-accredited courses, but these differences were not statistically significant (Table 2). There was a trend for a difference in overall and homeopathy subject teaching hours when comparing recognised/accredited and non-recognised/non-accredited courses that did not teach medical subjects (Table 2).

Differences between countries

No statistically significant differences were found when comparing results for individual countries (data not shown).

Discussion

Some 6500 students were enrolled in undergraduate homeopathy education in Europe in 2008, and 21,000 had graduated over a period about 30 years. The average course offered part-time education lasting 3.4 years, and close to 900 teaching hours with more than half the time spent on homeopathy subjects. Full time courses lasted 3.1 years and had twice as many teaching hours. Recognised/accredited courses lasted longer and had more teaching hours.

The response rate (55%) is reasonable for this type of survey, and together with the internet search, data was obtained for nearly all existing homeopathy undergraduate courses in Europe. It cannot be excluded that additional courses exist, but it is unlikely that there are many such courses or that any major courses have been left out.

This is the first time reliable figures for homeopathy students and graduates have been determined. Although numbers must be considered with some caution, some 6500 students are enrolled in undergraduate homeopathy education in Europe, and some 21,000 have graduated from these courses over the years. The estimated number of graduates is probably somewhat on the lower side, as it is likely that some former courses no longer exist. Nevertheless, only 5000–6000 (20–25%) of graduates seem to be registered with homeopathy organisations.²⁰ To our knowledge, no data exists to determine whether the remaining graduates are practising, but not registered with homeopathy associations; or whether they are not practising at all.

A main finding in this survey is that the length and number of teaching hours is higher for courses that have been recognised/accredited. Moreover, courses recognised/accredited by several recognition/accreditation bodies had higher numbers of teaching hours. This could either indicate that systems of recognition/accreditation encourage course providers to expand the courses they offer or that only more extensive courses have been recognised. Nevertheless, as it is likely that there is a link between numbers of teaching hours and the competence of graduates, systems of recognition/accreditation should be encouraged to ensure the quality of homeopathic care. Furthermore, systems of recognition/accreditation provide potential future homeopathy students with means to evaluate the quality of courses; and patients with means to evaluate the quality of practitioners' education.

This survey gives no direct information about the quality of homeopathy education, although it provides some indications in terms of numbers of students, length of courses and numbers of teaching hours. If course providers want to enable graduates to practise with the independent responsibility for their patients, then they must ensure sufficiently high quality of education. This raises the question: what is a sufficiently high quality of homeopathy education? Such a question should be better addressed by considering the specific competences practising homeopaths should possess. This has been described e.g. in national occupational standards for homeopathy.¹⁷ Guidelines providing recommendations for the content of homeopathy education have been put forward by international organisations such as the European Central Council of Homeopaths.²¹ These guidelines do however not recommend extent of education. A report published by the Norwegian Directorate for Health recommended that in order for homeopaths to work as independent practitioners, with all the responsibilities this implies to ensure patient safety, such education should last 4 years full time.²²

Although reports of unethical practice and malpractice are rare in homeopathy²³ and guidelines for the bounds of competence of homeopaths have been established,²⁴ future research should contribute by providing data which can further the development of the quality of undergraduate homeopathy education and to ensure that practitioners provide high quality homeopathic treatment within their bounds of competence.

Conclusions

The results of this survey indicate that there are 6500 currently enrolled students doing an undergraduate homeopathy education in Europe and more than 21,000 have graduated from such courses over the years. Undergraduate homeopathy education in Europe is heterogeneous. Courses that have been recognised or accredited provide more extensive education with more teaching hours. Future research should focus on the quality of undergraduate homeopathy education to ensure safe and high quality homeopathic treatment for patients.

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