

# Research on the Current Status, Challenges, and Innovative Pathways of Traditional Chinese Medicine Culture Dissemination in Brazil

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**Abstract:** With the increasing global focus on integrated healthcare options and the growing influence of Chinese culture, Traditional Chinese Medicine (TCM), as a unique medical system and cultural carrier, is receiving heightened attention for its international dissemination. Brazil, as a major BRICS partner of China, provides a typical research field for the cross-cultural dissemination of TCM. Based on literature review and empirical analysis, this paper systematically examines the evolution and current status of TCM culture in Brazil, deeply analyzes the effectiveness and limitations of its existing dissemination pathways, and proposes innovative dissemination strategies integrating digital media from the perspectives of cross-cultural communication and digital dissemination theory. The study finds that TCM has gained a certain level of social recognition and policy inclusivity in Brazil, achieving preliminary institutional embedding, with some therapies incorporated into the public healthcare system. However, it still faces challenges such as language barriers, logistical issues in herb supply, and traditional dissemination models during the dissemination process. This paper suggests that future efforts should promote the digital, youth-oriented, and localized transformation of TCM in Brazil to enhance its cultural adaptability and dissemination effectiveness. To this end, the study proposes constructing a digital, youth-oriented, and localized dissemination paradigm centered on a "dedicated APP + TikTok short videos + localized forums," aiming to provide theoretical insights and practical references for the international dissemination of TCM culture.

**Keywords:** Traditional Chinese Medicine Culture; Brazil; Cross-cultural Communication; Localization; Digital Dissemination.

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## 1. Introduction

Traditional Chinese Medicine (TCM) is a crucial carrier of Chinese civilization. Its internationalization is not only related to industrial competition but also serves as a strategic fulcrum for sharing national cultural soft power and global health governance solutions. [1] With the increasing strength of China, TCM, imbued with profound Eastern philosophical wisdom, is gaining more attention and recognition internationally as a comprehensive treatment method and herbal therapy. Brazil has a population of 215 million, with healthcare expenditure accounting for 9.2% of its GDP. As the largest economy in Latin America and a BRICS member, Brazil faces strained public hospital resources and a heavy burden of chronic diseases, leading to a strong demand for Complementary and Alternative Medicine (CAM) [2]. Furthermore, Brazil's unique natural resources of flora, fauna, and minerals provide inherent advantages for the localized cultivation and application of Chinese herbal medicines. This socio-natural environment and medical regional-country profile make it a natural important field for TCM internationalization. In 2006, the Brazilian Ministry of Health issued the SUS acupuncture regulation (Portaria 971/2006)[3]. In 2018, the Brazilian Phytotherapy Law came into effect, providing a "fast track" for the registration of TCM preparations. The convening of the 19th World Congress of Chinese Medicine in São Paulo in 2022 greatly stimulated the Brazilian public's strong interest in TCM culture and further promoted the recognition and acceptance of TCM in Latin America. This landmark event was not only a platform for

academic exchange but also a cultural touchpoint, signaling that the dissemination of TCM in Brazil has entered a "new cycle driven by the triple engines of government, academia, and market." [4] However, despite some progress, TCM culture in Brazil still faces the dilemma of "fragmented cognition, marginalized experience, and closed dissemination," urgently requiring systematic assessment and pathway innovation. Therefore, systematically researching the current status and dissemination pathways of TCM culture in Brazil holds strategic significance for promoting the "going global" of TCM culture and carries important value for deepening cultural exchanges between China and Brazil and practicing the concept of a global community of health for all.

## 2. The Evolution and Current Status of TCM Culture Dissemination in Brazil

Since its introduction to Brazil in the 19th century, TCM has undergone four evolutionary stages: "immigrant self-use - elite trial - institutional access - public recognition." The introduction of TCM to Brazil can be traced back to the early 19th century, initially taking root with the arrival of Chinese immigrants. In the latter half of the 20th century (1970s), with the influx of immigrants from Japan, Korea, Portugal, and others, TCM therapies such as acupuncture gradually gained a certain scale in Brazil. In the 1980s, Brazil began standardized management of acupuncture. In 1995, the Federal Council of Medicine classified acupuncture as a medical specialty; in 1998, the Brazilian Ministry of Health incorporated acupuncture into the Unified Health System

(SUS). In 2006, Brazil enacted Law No. 971, formally incorporating TCM therapies such as acupuncture, Chinese herbal medicine, and Tai Chi into the SUS system, marking the legalization and institutionalization of TCM and its therapies in Brazil [5].

As of December 2023, data from the Brazilian National Health Information System (Datusus) shows that 29 TCM therapies have been incorporated into SUS in Brazil. Nationally, there are 412 institutions with SUS qualifications to provide acupuncture/TCM services, distributed across 19 states and 32 cities, mainly concentrated in the southeastern states of São Paulo (31.4%), Rio de Janeiro (16.7%), and Minas Gerais (10.5%) [6]. From 2011 to 2016, the number of acupuncture treatment sessions in SUS increased from 680,000 to 1.2 million, with an average annual growth rate of 12.1%, demonstrating the important role of TCM in Brazil's public health system [7]. However, from 2017 to 2022, the growth rate dropped to 4.3%, showing marginal decline. Portaria 971/2006 stipulates that only individuals with a biomedical or nursing degree who have completed a 1,200-hour acupuncture course can apply for practice qualifications, leading to restricted "entry" for TCM professionals. There are approximately 2,900 registered TCM practitioners nationwide, far below the estimated actual demand of 8,000-10,000[8].

The above data indicates that some TCM cultures and therapies have gained official recognition and the trust of some citizens in Brazil, but the comprehensive promotion and general credibility of TCM culture still need further improvement.

### 3. Existing Dissemination Pathways

Based on literature, official data review, and field visits, the study finds that the dissemination of TCM culture in Brazil mainly follows the following four pathways:

1. Academic Exchange Pathway: This pathway primarily relies on international conferences such as the World Congress of Chinese Medicine, Sino-Brazilian Traditional Medicine Forums, cooperative research between Chinese and Brazilian universities, and scholar exchanges. The annual participation scale is approximately 300-500 people. Its advantage lies in strong professionalism and high authority, capable of promoting in-depth dissemination of TCM theory. However, the dissemination chain stops at the academic community. Its drawback is a narrow audience, with influence limited to academic circles, making it difficult to "break through" and reach the general public.

2. Master-Apprentice Inheritance Pathway: Research by Gontijo Ramos ML (2019) et al. points out that in Brazil, TCM knowledge is mainly transmitted through doctors in TCM clinics teaching apprentices[9]. This method is typically clinic-based, involving oral instruction and personal guidance. This model ensures the purity of skills and stability of transmission, but its dissemination scope and effectiveness are extremely limited, forming "information silos" and exhibiting characteristics of "small circles" and "closedness," making it difficult to meet the needs of large-scale dissemination.

3. Commercial Promotion Pathway: This pathway includes the import and sale of Chinese herbal products, the operation of private TCM clinics, etc., primarily relying on word-of-mouth and offline experiences, lacking brand narrative and digital operation. Research by Silva JA et al. points out that bottlenecks in herb import logistics directly affect the

efficiency and cost of commercial promotion of Chinese herbs[10]. Furthermore, commercial promotion may overemphasize economic benefits while neglecting the transmission of cultural connotations, and may even damage the public image of TCM due to excessive commercialization.

4. Cultural Education Pathway: This pathway mainly manifests in the form of "Confucius Institutes + community free clinics," with single events averaging around 150 participants. This model combines language learning with cultural experience, making it easily accepted by younger groups, but it lacks scale and sustainable impact. The challenge lies in how to effectively transform complex TCM knowledge, develop teaching materials and curriculum systems that align with local learners' cognitive habits, and address the shortage of teachers. In this regard, Brazil has made a series of local attempts, mainly including the following:

(1) University Degree Education: Seven public universities, including the University of Brasília and the University of São Paulo Medical School, offer elective or postgraduate certificate courses in acupuncture/phytotherapy, but the annual training scale is less than 200 people.

(2) Confucius Institutes: Three "TCM Confucius Institutes" at the Federal University of Goiás, Rio de Janeiro State University, and São Paulo State University offer short-term "Chinese + TCM" courses, with an average of about 1,100 students annually. However, there is a lack of Portuguese teaching materials and continuous faculty, failing to form a systematic, phased progression of TCM knowledge and TCM practitioner training.

(3) Private Training Institutions: More than 20 private schools, such as the São Paulo Acupuncture College (IBRAFO), provide vocational training ranging from 300 to 600 hours. The problems include high tuition fees, inconsistent standards, and low certificate recognition. Interviews conducted for this study show that 68.4% of respondents indicated they were "interested in TCM but had no reliable learning channels," with teacher and teaching materials being the primary pain points.

## 4. Obstacles and Challenges in the Dissemination of TCM Culture in Brazil

### 4.1. Language and Cultural Barriers

Portuguese is the official language of Brazil, belonging to the Latin language family. TCM classics and professional terminology are largely based on Chinese, often classical Chinese. The significant differences in syntax and pragmatics between the two languages can easily lead to semantic loss and cultural misunderstandings during Chinese-Portuguese translation. For example, common expressions in TCM cultural theory, such as "Yin-Yang and the Five Elements," "Qi, Blood, and Body Fluids," and classical concepts like "Qi," "Meridians," and "Zang-Fu Manifestation," lack culturally equivalent terms. The translated concepts often differ significantly from the original TCM meanings, leading to post-translation distortion. Missing semantic items cause issues in the expression system and logical layers of TCM concepts in the target language, making TCM culture difficult to widely understand and accept in the short term. Among the study's respondents, 67% of Brazilian physicians found concepts like the "Yin-Yang and Five Elements" theory difficult to explain to patients, affecting compliance.

During the dissemination process, TCM cultural concepts inevitably engage in dialogue, collision, and integration with Brazil's local cultural concepts, religious beliefs, and health awareness. For instance, Brazil has a rich tradition of herbal use. Whether TCM's herbal theory can find connections with local herbal knowledge to achieve "cultural translation" and "meaning co-construction" is a fundamental prerequisite for ensuring dissemination strategies can "adapt to local customs" and avoid "cultural discount."

## 4.2. Herb Supply and Market Regulation Bottlenecks

Although Brazil's regulatory policies on Chinese medicine are relatively lenient compared to Europe and the United States, there are still many restrictions. According to RDC 21/2014 regulations, Chinese medicine products can be marketed in Brazil without health registration, but they cannot mention indications on packaging or in advertisements and must be used under the guidance of professionals[11]. Furthermore, the import and logistics of Chinese medicinal herbs face bottlenecks. MDIC data shows that in 2023, Brazil imported Chinese herbal decoction pieces and extracts from China worth \$213 million, a year-on-year increase of 18.6%, accounting for 34.2% of Brazil's phytotherapy imports. However, restricted by RDC 21/2014 regulations, Chinese medicine products cannot advertise indications through non-prescription channels and can only clear customs as "dietary supplements," with an average customs clearance time of 42 days, 12 days longer than general phytotherapy products[12]. RDC 96/2008 also explicitly prohibits advertising efficacy for unregistered drugs, or "cure cases" on social media can incur fines of 5,000 to 50,000 Brazilian Reals, making marketing by enterprises often hesitant. The retail end features a "tripartite balance" between Chinese clinics, herbal shops, and e-commerce platforms, but the chain rate is less than 5%, and the top 10 enterprises hold only an 18.7% market share, showing a market characterized as "small, scattered, and weak." Silva et al. (2018) pointed out that poor logistics limit the circulation and use of Chinese medicine in Brazil[13].

## 4.3. Singular and Inefficient Dissemination Methods

Currently, the dissemination of TCM in Brazil mainly relies on traditional pathways such as academic exchange, master-apprentice inheritance, commercial promotion, and cultural education. Although these methods have a certain degree of authority and stability, their dissemination scope is limited, making it difficult to reach the general public. A survey conducted for this study shows that 75.2% of respondents first encountered TCM through "recommendations from relatives and friends," only 9.8% through social media, and 6.1% through television or newspapers. The penetration rate of digital dissemination is significantly lower than that of other consumer categories in Brazil (averaging over 35%).

## 4.4. Talent and Teaching Material Gap

Currently, there is no complete Portuguese translation of the *Huangdi Neijing* on the market. Among the existing six acupuncture textbooks, four are imported copyrighted versions from Portugal, disconnected from Brazilian disease types, constitutions, and phytotherapy resources. TCM Confucius Institutes are important platforms for TCM cultural dissemination. In 2019, the Confucius Institute of Traditional Chinese Medicine at the Federal University of Goiás was

established, offering courses combining Chinese language and TCM, including acupuncture, tuina, and Tai Chi, providing a platform for the localization of TCM education[14]. However, TCM education in Brazil still faces issues such as a lack of teaching materials, insufficient teachers, and an imperfect curriculum system. Tian Shiyuan (2023) pointed out that the Confucius Institute at the Federal University of Goiás has not yet formed a systematic TCM curriculum system and lacks Portuguese teaching materials, affecting teaching effectiveness and the cultivation of professional talents[15]. Simultaneously, Chinese dispatched teachers have an average tenure of 1.5-2 years, with high turnover, impacting the continuity of courses and the TCM education system.

Research indicates that Brazilians' acceptance of TCM is closely related to their cultural background, education level, and medical needs. Brazilian public awareness of TCM mainly focuses on external therapies such as acupuncture and tuina, with extremely limited understanding of Chinese herbal formulas and theoretical systems. Some people trust TCM due to personal therapeutic effects, but other groups hold reservations due to cultural differences[16]. These issues lead to low social recognition and acceptance of TCM culture in Brazil, resulting in multiple resistances and difficulties in its dissemination.

## 5. Construction of Innovative Dissemination Pathways

To address the aforementioned challenges, this paper proposes a three-dimensional integrated DYLL (Digital-Youth-Local) innovative dissemination pathway framework, constructing a multi-level, three-dimensional dissemination ecosystem.

### 5.1. Digitalization: Developing a Dedicated TCM APP

Building on the preliminary exploration of establishing dedicated applications proposed by Hollanda H et al. (2020)[17], this study proposes developing a dedicated TCM APP for Brazilian users with comprehensive upgrades in functionality and models. This APP should not merely be an information query tool but a comprehensive platform integrating "knowledge popularization + online consultation + community interaction + e-commerce services." In terms of content, it should provide authoritative Portuguese TCM knowledge. Functionally, it should connect with registered Brazilian TCM practitioners for lightweight online consultations. Community-wise, it should establish user exchange areas for sharing treatment experiences. Service-wise, it should connect with certified herb suppliers to solve logistical challenges. Through big data analysis of user behavior, it can achieve personalized content promotion, precisely meeting user needs, and realizing a closed loop from information acquisition to service implementation.

This APP can adopt a "one body, two wings" co-operation model. The "body" refers to developing the Brazilian TCM Pro APP, whose functions should cover authoritative science popularization, AI tongue diagnosis, online appointment booking, electronic medical records, herb e-commerce, etc. Content can rely on domestic TCM universities, Brazilian acupuncture associations, etc., to jointly build a "Portuguese TCM Knowledge Graph." Technically, it should be compatible with low-end Android devices, which hold a 62%

market share in Brazil. Operationally, it can offer free basic consultations or operate at prices 30% below the average outpatient price. The "two wings" refer to the big data supervision dashboard + cloud classroom. The supervision dashboard can track imported herb batches, customs clearance times, and sampling qualification rates in real-time. The cloud classroom can introduce MOOC + live streaming, credit mutual recognition, etc..

## 5.2. Youth-oriented: Creating a TikTok TCM Short Video Platform

Targeting the high reliance of Brazilian youth on social media, establish a TikTok TCM channel matrix, creating a professional, interesting, and visual TCM short video channel. Use short videos to disseminate TCM health knowledge, acupressure techniques, herb introductions, etc. Use visual, vivid, intuitive, and entertaining methods to "dimensionally reduce" the dissemination of complex TCM knowledge, lowering cognitive barriers, breaking the stereotype of TCM as "ancient and obscure," enhancing its appeal among younger groups, and cultivating interest and goodwill among the younger generation. For example, content can include: one-minute introductions to a single Chinese herb, acupressure tutorials, TCM health tips, a day in the life of a TCM practitioner, etc. Consider launching 15-second "pain point--demonstration" three-part videos, use popular Portuguese BGM to elevate completion rates. Also consider launching mini-games like "Meridian Parkour." Additionally, leverage the appeal of influencers by collaborating with Brazilian fitness bloggers and women's soccer players to film short videos on "sports injury rehabilitation," using the affinity of sports culture to expand the audience.

## 5.3. Localization: Co-building a "China-Brazil Medicinal Plant Research Network Platform"

Utilizing Brazil's rich natural medicinal resources, initiate and operate an online forum themed "Application of Brazilian Native Medicinal Plants in TCM Theory." Invite Chinese and Brazilian botanists, pharmacologists, and TCM practitioners to participate, discussing the pharmacological effects of characteristic plants like Brazilian Ginseng (*Pfaffia glomerata*) and Guarana (*Paullinia cupana*), conducting chemical composition and pharmacological evaluations, and promoting their inclusion in the appendix of the Brazilian Pharmacopoeia. Simultaneously, promote mutual recognition of standards between China and Brazil, fostering in-depth cooperation between the Chinese Pharmacopoeia Commission and ANVISA to achieve mutual recognition of bilateral testing results and shorten customs clearance times.

This platform is not only an academic exchange platform but also one that promotes the localization and sustainable development strategy of TCM. It can not only promote academic exchange but also push the participation and sense of identity of the Brazilian public.

## 6. Conclusion and Outlook

The dissemination of TCM culture in Brazil is a cross-cultural, interdisciplinary, and cross-platform systematic project. The dissemination of TCM in Brazil has achieved preliminary results but still faces multiple challenges such as language, logistics, and dissemination models. Based on a profound analysis of the current status and existing pathways,

this study proposes a set of innovative pathways integrating modern dissemination concepts, suggesting that the dissemination of TCM culture must adhere to the logical framework of "embracing digitalization, facing youth, and centering on localization." This is not a complete negation of traditional pathways but an upgrade and expansion based on them, aiming to construct a multi-level, three-dimensional dissemination ecosystem.

This paper points out that promoting the dissemination of TCM in Brazil necessitates a digital transformation, constructing a digital dissemination matrix centered on "dedicated APP + TikTok short videos + localized forums" to enhance its cultural adaptability and dissemination efficiency. This is not merely an update of technical means but a profound transformation of dissemination theory. It signifies a shift from one-way input to two-way interaction, from elite dissemination to mass dissemination, and from cultural transplantation to cultural integration. The exploration of this pathway can not only inject new vitality into the further development of TCM culture in Brazil but also provide replicable and promote experiences and references for the dissemination of TCM culture in other countries and regions. Simultaneously, it can strengthen cooperation between China and Brazil in policy, education, and research fields, promoting the localization and sustainable development of TCM in Brazil.

Of course, this study also has its limitations. For example, the research scope primarily focuses on Brazil, and the universality of its conclusions needs further verification; the actual effects of digital dissemination pathways also require long-term evaluation after project implementation. Future research can build upon this topic, conducting broader cross-national comparative studies or deep "effect evaluation" studies on a specific innovative dissemination pathway (e.g., the APP).

In summary, the international dissemination of TCM culture is a long-term and arduous systematic project. It requires not only policy support and capital investment but also cultural wisdom, dissemination ingenuity, and an open and inclusive mindset.

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