

What are the reasons for choosing traditional medicine over conventional medicine? A qualitative study

¿Cuáles son las razones para elegir la medicina tradicional sobre la medicina convencional? Un estudio cualitativo

Eza Kemal Firdaus^{1*}, Tati Hardiyani², Jony Francisco Dos Santos Silva³, Haeril Amir⁴

SUMMARY

Objective: *This study aims to describe the participants' reasons for choosing traditional medicine over conventional medicine.*

Methods: *This study uses a qualitative design with a phenomenological study design approach. Data collection was carried out by in-depth interviews with the samples selected via purposive sampling.*

Result: *This study found three themes related to reasons for choosing traditional medicine over conventional medicine, which included doubts about conventional medicine, the factors and the values of traditional medicine.*

Conclusion: *For participants, traditional medicine is more humanistic than conventional medicine, which tends to focus on the hospital's provisions and standard operating procedures.*

Keywords: *Traditional medicine, chronic illness, conventional medicine.*

RESUMEN

Objetivo: *Este estudio tiene como objetivo describir las razones de los participantes para elegir la medicina tradicional sobre la medicina convencional.*

Métodos: *Este estudio utilizó un diseño cualitativo con un enfoque de diseño de estudio fenomenológico. La recolección de datos se llevó a cabo mediante entrevistas en profundidad con las muestras seleccionadas a través de un muestreo intencional.*

Resultado: *Este estudio encontró tres temas relacionados con las razones para elegir la medicina tradicional sobre la medicina convencional, que incluyeron dudas sobre la medicina convencional, los factores y los valores de la medicina tradicional.*

Conclusión: *Para los participantes, la medicina tradicional es más humanista que la medicina convencional, que tiende a centrarse en las disposiciones del hospital y los procedimientos operativos estándar.*

Palabras clave: *Medicina tradicional, enfermedad crónica, medicina convencional*

DOI: <https://doi.org/10.47307/GMC.2023.131.s1.6>

ORCID: 0000-0001-9111-211X^{1*}

ORCID: 0000-0002-4653-8485²

ORCID: 0000-0002-4653-8485³

ORCID: 0000-0002-2350-0150⁴

¹Department of Nursing, Faculty of Health, Universitas Harapan Bangsa, Indonesia

Recibido: 29 de enero 2023

Aceptado: 6 de febrero 2023

²Department of Nursing Anesthesiology, Faculty of Health, Universitas Muhammadiyah Purwokerto, Indonesia

³Hospital Nacional Guido Valadares, Dili, Timor-Leste

⁴Faculty of Public Health, Universitas Muslim Indonesia

*Corresponding author: Eza Kemal Firdaus

E-mail: ezakemal@uhb.ac.id

Address: Jalan Raden Patah No 100, Central Java, Indonesia,

Phone: +6285227923853

INTRODUCTION

Chronic disease is difficult to cure, usually lasts more than six months, is difficult to control, and threatens life (1). Chronic diseases are divided into two types, namely communicable and non-communicable diseases. Non-communicable diseases include asthma, chronic obstructive pulmonary disease (COPD), cancer, diabetes mellitus (DM), hyperthyroidism, hypertension, coronary heart disease, heart failure, stroke, chronic kidney failure, kidney stones, and joint/rheumatic diseases. In comparison, infectious diseases include sexually transmitted diseases, human immunodeficiency virus (HIV)/acquired immune deficiency syndrome (AIDS), diarrhea, pneumonia, malaria, tuberculosis, and hepatitis/liver disease/jaundice (2).

Data provided by the World Health Organization (WHO) show that the number of deaths increased in 2018 by around 71 % or around 57 million deaths, and as many as 41 million deaths were caused by non-communicable diseases, with the highest ratio including cardiovascular disease as high as 44 %, cancer as high as 22 %, chronic respiratory disease by 9 % and diabetes by 4 %. As for infectious diseases alone, there were 20.9 million deaths in HIV patients, including 374 000 with positive tuberculosis (TB), 1.3 million deaths occurred in HIV-negative TB patients, and 445 000 deaths in malaria patients from a total of 216 million cases (3).

In Indonesia, according to Basic Health Research Results, the prevalence of cancer was 1.4 % in 2013, which increased to 1.8 % in 2018, with diabetes mellitus increased from 1.5 % in 2013 to 2.0 % in 2018, heart disease was 0.5 % in 2013 increased as much as 1.5 % in 2018. COPD by 3.7 % in 2013 (2,4), and as many as 30.4 % of households in Indonesia utilize a service provider. Among them, 77.8 % of households use traditional medicine without tools, and 49.0 % use traditional herbal medicine (2).

According to the National Center for Complementary and Integrative Health (NCCIH), traditional medicine is a diverse group of treatment systems, practices, and healthcare products that

are not currently considered part of conventional medicine (5-7). Using of complementary medicine was very high in patients with chronic diseases; 75.3 % with diabetes, and 63 % in patients with kidney disease, compared to patients with acute diseases or healthy population and as much as 97.7 % prefer consuming herbal medicines and mind-body therapies (8), while the results of a study conducted by Ho et al., states that the prevalence of the use of complementary medicine in patients with chronic diseases is 77.4 % (9). The use of complementary medicine is more in demand among the public, with 79 % sales, while as many as 17.6 % of the public will try alternative medicine before conventional medicine (10).

METHODS

This research uses a qualitative design with a phenomenological study design approach. Data collection in this study was carried out by in-depth interviews with eight patients with chronic diseases (cancer, heart disease, COPD, DM) who were selected using purposive sampling with inclusion criteria: participants had chronic diseases (cancer, heart disease, COPD, DM) that has been diagnosed by a doctor which is proven by medical records, participants who went to traditional medicine, skills, and the supernatural (Table 1).

The tools used during the interview process were voice recorders, field notes containing interview guides, and blank notes to describe the participant's facial expression, attitude, or condition. In this study, triangulation was carried out on four people, namely two pairs of participants and two traditional medicine practitioners recommended by the participants (Table 2).

RESULTS

This study found three themes related to reasons for preferring traditional medicine over conventional medicine, including distrust of conventional medicine, the factors and the values of traditional medicine.

Table 1. Characteristics of Research Participants (11)

Code	Initial	Gender	Age	Education	Occupation	Diagnosis	Frequency of Conventional	Type of Traditional Medicine	Frequency of Traditional Medicine
P1	NY. S	Female	35	Senior High School	Housewife	Breast Cancer	± 2 Years	Herbal	± 1 Years
P2	NY. A	Female	31	Bachelor's degree	Midwife	Uterus Cancer	± 1 Year	Herbal	± 3 Months
P3	NY. N	Female	28	Junior High School	Housewife	DM	± 8 Month	Herbal	± 1 Month
P4	Mr. S	Male	42	Vocational High School	Entrepreneur	Myocardial Infarction	± 1.5 Years	Shaman	± 3 Months
P5	NY. W	Female	39	Elementary School	Housewife	DM	± 5 Years	Massage, Herbal	± 2 Years
P6	Mr. I	Male	47	Junior High School	Farmers	COPD	± 1 Year	Massage, Herbal	± 6 Months
P7	Mr. E	Male	36	Associate degree	Entrepreneur	Coronary	± 1 Year	Cupping, Herbal, breathing exercises	± 3 Months
P8	Mr. H	Male	33	Vocational High School	Entrepreneur	COPD	± 2 Years	Cupping	± 1.5 Months

Table 2. Characteristics triangulation participants (11)

Code	Education	Occupation	Description
T1	Junior High School	Housewife	Wife P4
T2	Senior High School	Housewife	Wife P7
T3	Elementary School	Farmer	Practitioner P4
T4	Elementary School	Farmer	Practitioner P1

Distrust of conventional medicine

According to participants, conventional treatment services were considered slow and seemed indifferent, not to mention the ineffectiveness of the drugs given, which added to the participants' disappointment with conventional medicine. In addition, the participants also stated that they were afraid of being addicted to consuming chemical drugs from conventional medicine, which in the long term would harm their bodies. Those are their drives to try traditional medicine. According to the participants, if the healing of their illness cannot be obtained through conventional medicine, it may be possible to get it via other treatments, one of which is traditional medicine, because, according to them, the treatment is a matter of compatibility. Following are some participant statements that represent the perception category:

"...I've used medical treatment five times with different doctors, there was no result. finally, I decided to take herbal treatment...."

"...the service was not good.... we asked questions but instead of answering they kept silent and we went there like that..." (P5, Female, 39 years, DM)

"...trying to be healed is an endeavor, sir, I'm thankful if I can find the right medicine and be healed, I'm just trying my hardest..."(P7, Male, 37 years old, Coronary)

"...What I'm afraid of is if the drugs are addictive to the body..... I'm afraid it's also dangerous for my body" (P8, Male, 33 years old, COPD)

The above statement was also supported by triangulation participants who stated that taking

conventional medication does not significantly change the participant's disease and only creates addiction. In addition, the triangulation participants also said that traditional medicine was a matter of compatibility. The following is an excerpt of their statement in the following interview.

"... Undergoing treatment at the doctor, there were no apparent changes, you know... the only change is when he's on medicine, but when he doesn't take medicine, it relapses again..." (T1, Wife of P4)

".... sometimes some of my patients have eee... underwent three different traditional medicine treatments, before they came to me, and in the end my medicine suits them, they will then stop the three others, so it's whether it is suitable for you..." (T4, Practitioner Mrs. S)

Economic Factors

Conventional medicine that is expensive without giving significant results related to the illness is causing the participants to look for other alternative treatments with lower costs. For participants, traditional medicine needs to be considered because apart from the location being close to home, the cost of traditional medicine is also very affordable. Here are some participant quotes taken from the interview results:

"(high pitched voice) What is clear is that, especially regarding costs, the cost is cheaper if the service is more family-friendly, it's different from going to the hospital; to the doctor is already expensive, in my opinion, the service is not good. .." (F5, Female, 39 years, DM)

"Yes, the location.....close to home" (P7, Male, 37 years, Coronary)

"...once a month I have to go to the Doctor, which costs a lot. I also have small children who are still in school and have household needs, so for my treatment, yes, what used to be once a month, became once every three months. It minimizes the expenses" (P8, Male, 33 years old, COPD).

This statement was also supported by triangulation participants who stated that the cost of conventional treatment was an obstacle because its daily needs were quite different from traditional medicine, which was without a set price and not necessarily with money as the payment. The following is an excerpt from the participant's statement, which can be seen from the results of the following interview.

"Yes, the main thing is because of the cost, because treatment at the doctor costs a lot and it's like there are too many needs..... plus the distance to the hospital is far away, so it's a waste of time, and a waste of money...." (T2, Wife of P7)

"...most say it's cheap because I happen to not charge at set prices... Just sincerity even if for example eeee...they don't have money, it is okay if, for example, they don't use money, and pay for food, for example, bananas or rice or cassava, I don't have a problem..." (T3, Practitioner P4)

Values of traditional medicine

The process flow of traditional medicine gives participants their own beliefs. For the participants, the position of traditional medicine practitioners is the same as that of a doctor. This is because practitioners can also find out the disease experienced by participants without having to carry out a medical examination as in conventional medicine. This adds to the participants' confidence and trust in practitioners regarding the traditional medicine they are undergoing. The following are participant statements quoted from the interview results.

".....it's more of trust..in other words, I still believe in such things (smile)." (P4, Male, 42 years, myocardial infarction)

".... ..he already knows, that is right. this.. here, I was shocked there (eyes widened while holding his chest) I do not think this is true, this 'smart' person already knows about my illness.." (P1, Female, 35 years old, Breast Cancer)

The act of giving encouragement made by practitioners to participants also creates values in the process of traditional medicine that participants in conventional medicine do not obtain. This adds to and arouses the participant's enthusiasm for recovery, calms the participant, and answers curiosity previously not obtained by the participant in conventional medicine. The following are excerpts from participant statements taken from the interview process.

".....then if we go to tradition we are considered like a family.. we are embraced by love for support, the point is there must be a cure for the disease" (P5, Female, 39 years old, DM)

Triangulation participants also stated something similar to other participants that communication and encouragement before action give peace to both participants and families. The following is an excerpt of the interview below.

".....then what I like to talk about first, before therapy, the goal is to make the patient comfortable and calm...." (T3, Practitioner P4)

DISCUSSION

People choose traditional medicine as a step to cure the disease, in addition to using medical healing. Traditional medicine can meet their health needs from a social, psychological, and organic perspective, which some people cannot obtain from doctors or related health services. Traditional medicine practitioners can cure their patients using methods different from those used by doctors (12,13).

Participants thought that poor hospital services and ineffective treatment made participants disappointed with conventional medicine. Participants said that they came to the hospital to be served well and to get cured, but this turned out to be the opposite of what was expected. The desire to recover made the participants try other treatments outside conventional medicine. Some participants

thought that healing is a matter of compatibility; if this is not found in conventional medicine, maybe healing can be obtained from traditional medicine. In addition, the participants' fear of being addicted to drugs from the hospital made the participants more confident in seeking traditional medicine. Patients who seek treatment from traditional medicine have fear and dissatisfaction with modern medicine, the belief that modern medicine cannot or has failed to treat disease. Chemical drugs can harm health (14,15).

It cannot be denied that economic factors are the fundamental reason participants practice complementary and integrative medicine. The fear of medical expenses and increasing daily needs made the participants rack their brains to prioritize which came first, recovery or responsibility. Participants stated that with high costs, medicines from the hospital only temporarily affected their illness, and if the medicine ran out, the symptoms would return. This disappointed the participants with conventional treatment because of the costs already spent, and many participants felt that there needed to be a significant change related to their illness. Hence, they considered the treatment to be useless. Therefore, participants try to do traditional medicine with affordable costs and a location close to home, making participants calmer about their financial condition.

Economic status is a factor of a person's ability, namely in the form of income as support to access health services, because the use of health services depends on the ability of consumers to pay (16,17). The reason people use traditional medicine is not to spend much money on one treatment ritual, as a place to socialize people with one another (social ties), and the belief that traditional medicine can cure various diseases (18-20).

This study found that traditional medicine has value in participants' eyes compared to conventional medicine. This was proven by the participants doing traditional medicine. For the participants, communication is the initial approach taken by practitioners, for it can provide peace. Without being limited by time, participants can tell all the complaints they are experiencing, and practitioners also respond positively by providing support/encouragement that all diseases have a cure.

In addition, the practitioner also explains in detail all the information needed so that before starting treatment, the participants know everything from the type of disease, and the stages of treatment, to the type of treatment that uses natural ingredients and without any medical action. This adds to the participants' confidence and trust in traditional medicine because, according to the participants' view, practitioners also have the same position as health workers since they can also find out the participants' illnesses even with differences in treatment handling.

Poor communication patterns also influenced participant dissatisfaction with conventional medicine in conventional medicine (10,21,22). There needs to be more communication between doctors and patients, so explanations about taboos and others are often overlooked or not optimal (23,24). This opinion is based on the experience of participants during conventional treatment. Based on this, the participants felt that alternative, complementary medicine was better than conventional medicine. This opinion is also based on a comparison between the approaches used in alternative, complementary medicine and the approaches used in conventional medicine. Participants' assumption that complementary medicine is better than conventional medicine will further motivate patients to prefer alternative medicine compared to conventional medicine.

Encouragement therapy, the body being massaged, and afterward being given herbal concoctions makes traditional medicine its value for participants. In contrast to conventional medicine, participants said that the information obtained from doctors was very little and ignorant, and the service was not good.

CONCLUSION

The dissatisfaction with conventional medicine, economic problems, and the values of traditional medicine that conventional medicine does not have is the reason why people prefer traditional medicine over conventional medicine. For the participants, the process of traditional medicine was more humanistic than conventional

medicine, which tends to focus on the hospital's provisions and standard operating procedures.

Authors Contribution

All work related to the study conceptualization, data collection, data analysis, and reporting of the findings was completed by the corresponding author.

Funding

The author received no financial support for the research, authorship, and/or publication of this article.

Declaration of competing interest

The author declared no potential conflict of interest with respect to the research, authorship, and/or publication of this article.

REFERENCES

1. Meetoo D. Chronic Diseases: The Silent Global Epidemic. *Br J Nurs.* 2014;17(21):1320-1325.
2. Emilia NL, Sarman J, Beba N, Yanriatuti I, Matongka Y. The Effectiveness of Benson Relaxation Therapy to Reduce Anxiety in Student Competency Test Participants. *An Idea Health J.* 2022;2(3):111-116.
3. World Health Organization. Preventing Chronic Disease: A Vital Investment. Switzerland: Department of Chronic Disease and Health Promotion; 2005.
4. Basic Health Research. Main Result of Riskesdas 2018. Ministry of Health of the Republic of Indonesia. 2018. <http://www.depkes.go.id/>
5. National Center for Complementary and Integrative Health. Strategic Plan Exploring the Science of Complementary and Integrative Health; 2016.
6. National Center for Complementary and Integrative Health. Complementary, Alternative, or Integrative Health: What's In a Name?. 2018. <https://nccih.nih.gov>
7. World Health Organization. Traditional Medicine Strategy 2014-2023. *Alternative and Integrative Medicine.* 2013;1(1):1-78.
8. Hashempur MH, Heydari M, Mosavat SH, Taghi S. Complementary and alternative medicine use in Iranian patients with diabetes mellitus. *J Integrative Med.* 2015;13(5):319-325.
9. Ho TF, Rowland-Seymour A, Frankel ES. Generational Differences in Complementary and Alternative

- Medicine (CAM) Use in the Context of Chronic Diseases and Pain: Baby Boomers versus the Silent Generation. 2014;27(4):465-473.
10. Thomson P, Jones J, Browne M, Leslie SJ. Complementary Therapies in Clinical Practice Why people seek complementary and alternative medicine before conventional medical treatment: A population-based study. *Complementary Therapies in Clinical Practice*. 2014;20(4):339-346.
 11. Firdaus EK, Widyawati W, Effendy C. Experience of Patients with Chronic Diseases in Complementary Medicine, and Integrative Health Seeking Behaviors. *In International Journal of Nursing and Midwifery Sci*. 2021;5(1):40-48.
 12. Astin JA. Why Patients Use Alternative Medicine: Results of a National Study. *JAMA Network*. 2015;279(19):1548-1553.
 13. Setyoningsih A, Artaria MD. Selection of disease healing through non-medical or medical traditional medicine. *Soc Cult Polit*. 2016;29(1):46-49.
 14. Dinata AB, Muhaimin A, Lestari DWD. Individual Experience Using Traditional Medicine. *In Mandala of Health*. 2016. <http://bioetik.fk.unsoed.ac.id/>
 15. Heafner JC, Buchanan B. Exploration of Why Alaskans Use Complementary Medicine A Focus Group Study. *J Holistic Nursing*. 2015;34(2):200-211.
 16. Eisenberg DM. Advising Patients Who Seek Alternative Medical Therapies. *Ann Internal Med*. 1997;127(1):61-69.
 17. Liana Y. Analysis of the factors that influence families in the use of traditional medicine as self-medication in Tuguharum Village, Madang Raya District. *J Health Med*. 2017;4(3):121-128.
 18. Handika SR, Yoza D, Budiani ES. Treatment System And Public Perception of Traditional Shaman Treatment In The Village of Sungai Pasir Putih Kelayang Subdistrict Indragiri Hulu District. *Jom Faperta UR*. 2016;3(2):1-9.
 19. Kramlich D. Introduction to complementary, alternative, and traditional therapies. *Crit Care Nurse*. 2014;34(6):50-6; quiz 57.
 20. Kristoffersen AE, Stub T, Musial F, Fønnebø V, Lillenes O, Norheim AJ. Prevalence and reasons for intentional use of complementary and alternative medicine as an adjunct to future visits to a medical doctor for chronic disease. *BMC Complementary and Alternative Medicine*. 2018;18(1):1-8.
 21. Wahyudi JT. Experience of Patients with Cardiovascular Disease in Using Alternative Complementary Medicine. 2017.
 22. Efendi S, Agus AI, Syatriani S, Amir H, Alam RI, Nurdin S, et al. The Effect of Benson Relaxation on Quality of Sleep of Cancer Patients. *Open Access Maced J Med Sci*. 2022;10(G):99-104.
 23. Maung TM, Deborah GS, Tun AA. Traditional Medicine vs Modern Medicine in Rural Area of Kedah State, Malaysia. *J Pharm Biol Sci*. 2019;14(1):05-08.
 24. Mongiovi J, Shi Z, Greenlee H. Complementary and alternative medicine use and absenteeism among individuals with chronic disease. *BMC Complementary and Alternative Medicine*. 2016;16(248):1-12.