IDENTIFY THE REASONS FOR COMPARATIVELY LESS TENDENCY OF YOUNG GENERATION TOWARDS AYURVEDIC MEDICAL TREATMENT (SPECIAL REFERENCE TO RATNAPURA DISTRICT).

P lankeshwara¹, Wdh De mel² and Nm wijesekara³.

1. Department of Management and Finance, Faculty of Management, Social Sciences & Humanities, General Sir John Kotelawala Defence University, Ratmalana, Sri Lanka.
2. Department of Management and Finance, Faculty of Management, Social Sciences & Humanities, General Sir John Kotelawala Defence University, Ratmalana, Sri Lanka.
3. Department Economics and Statistics, Faculty of Social Sciences and Humanities, Sabaragamuwa University of Sri Lanka, Belihuloya, Sri Lanka.

Abstract

The demand for Ayurvedic medicine has been growing even in the countries where western medicine was introduced. This is due to the fact that Ayurvedic medicine attempts to treat the primary cause of the disease and it tends to have less after effects since it uses herbal plants and minerals. However, in Sri Lanka, those who have more tendency towards Ayurvedic medicine seems to be the population over 25 years of age. It is evident that less tendency is from the youth population between the age category of 18-25 years. Thus, the study attempts to address the issue of reasons behind low tendency of young generation towards Ayurvedic medicine in Ratanapura District. This study mainly comprises of primary data and the sample of the study includes five Divisional Secretariats from Ratnapura District selected randomly. Chi Square method was employed for data analysis. According to the results of the analysis, demographic factors have no effects on low tendency of youth population towards obtaining Ayurvedic medical treatment while the variables in terms of, issues arising from Ayurveda system of medicine, attitude of young generation, issues arising from state sector, influence from modern western medicine, nature of the disease of an individual have an effect on the low tendency of young generation towards Ayurvedic medicine.

Introduction:

Background to the Study:

The science which teaches to lead a healthy lifestyle can be defined as Ayurveda. The basic principle of Ayurveda medicine is, to cure illnesses via striving a balance between physical, mental, spiritual and environmental well-being. Accordingly, Ayurveda shows directions for an individual to shape his or her life in achieving the balance between the said factors. If a particular person leads an Ayurvedic lifestyles, that person will be able to enhance total physical and mental health. Having good eating and behavioral habits based on Ayurveda will help to maintain a
healthy life. Diseases in terms of certain cancers which are incurable even through western medicine, have been able to be cured by Ayurveda without any side effects as such. Moreover Ayurveda medicine is suitable to cure diseases such as, high blood pressure, heart attacks, respiratory diseases, diabetes and cholesterol (Dalvi, Gogtay and Bhatt, 2002).

At present, Ayurveda medicine has become a popular system of medicine across the globe and teaching of Ayurveda medical techniques, usage and sale have been taking place in so many countries (Agarwal, Abhijnan and Raviraj, 2007). Although, most states believe that Ayurveda is a precious system of medicine that can be used as a remedy for many complicated issues, it is not accepted as a legitimate form of medical practice in many countries. However, according to World Health Organization, even at present, 80% of the world population meaning approximately 4 billion people use various Ayurvedic medicine to maintain good health (Chopra and Doiphode, 2002).

The demand for Ayurveda medicines can be discussed in various dimensions. Ayurvedic medicine can be basically defined as a form of medicine that mainly depends on herbal ingredients. Therefore, it is vital to pay attention towards manufacturing of herbal medicine. This is because such herbal medicine manufacturing sector is a strong sector of Sri Lankan exports. When considering the current international market for Ayurveda medicine, it is apparent that the demand tends to exceed the supply (Jayalath, Hettiarachchi and Kodikara, 2004).

Ayurvedic medicines exports of Sri Lanka has reported a growth of 95% in 2012 compared to 2010, where the value of such exports being USD 260,000. The primary buyers of such medicines can be identified as Australia, Japan, Maldives and India. Accordingly, not merely the demand for Ayurvedic medicines, but also the global demand for herbal ingredients related to beauty culture, natural healthy food items and herbal drinks also tend to be growing gradually (Perera, 2012).

When considering the recent trends of Ayurvedic medical treatments, Ayurvedic Spas, herbal baths, herbal steam baths, oil drips and ground herbs are in high demand, both locally and internationally. Along with the growing demand for such Ayurvedic Therapy, various Ayurvedic centers have been established in Sri Lanka to facilitate Ayurvedic treatment for both residents and foreigners.

Moreover, it is apparent that the customer attitudes towards Ayurveda has been considerably changed in the modern society. Having said that, the customers are more concerned and have increased tendency towards Ayurveda in order to maintain personal health and well-being, leading a healthy life and specially to maintain the young look. Not merely women but also men have the tendency towards Ayurvedic medicines and beauty culture in order to look younger. Due to this, certain changes have occurred even in the beauty industry of Sri Lanka, where many beauty cultural entities have shifted from chemical ingredients to herbal ingredients (Kodikara et al, 2004).

When looking at the evolution of Ayurvedic medicine, it is clear the fact that Ayurveda has been subjected to various changes and barriers. Even though the current demand for Ayurveda has increased compared to the past, it has still not reached the optimum level as such. Despite the growing demand in the international market for Ayurvedic medicines, the inadequate supply to meet such demand is a major constraint in this field. Moreover, less awareness and the attitudes of local customers towards Ayurveda has a direct impact towards the demand. Specially the displeasure of young generation towards Ayurvedic medical treatments has effects on this. This is because, Ayurveda does not generate instant results as Western medicine and it takes time for correct results. At the same time, current busy lifestyles of people urge for instant cure. Furthermore, specifications from Ayurveda such as drinking of bitter decoction, herbal oil application and alike are not appealing to the young generation. As a result, there is slow tendency of young generation towards Ayurveda medical treatments.

Research Problem:
A pilot study was conducted in order to gain some understanding on the attitudes of young generation towards Ayurvedic medicine. A sample consisted of 20 young people was selected and in order to review their attitudes, a questionnaire consisting of 10 questions was given. The Table 1.1 depicts the summary of the pilot study results.

| Attitude      | Statistics | Percentage (%) |
|---------------|------------|----------------|
| Medical Treatment | Ayurveda    | 25             |
Based on the results, it was apparent that young generation does not have positive attitude towards Ayurvedic medicine. Moreover, out of the sample selected, majority are not satisfied with the state patronage for Ayurveda and the availability of Ayurvedic medical centers. Only 40% have the intention to undergo Ayurvedic medical treatment in future while only 25% believe that Ayurveda is suitable for present context. Accordingly, statistics of pilot study shows that there exist low tendency of young generation towards obtaining Ayurvedic medical treatment.

The future of Ayurveda depends on the demand made by local people. Young population today are the future of the country. Their demand for Ayurveda will determine the survival of Ayurveda medical treatment. Accordingly, this study attempts to identify the reasons behind the les tendency of young generation towards Ayurveda medical treatment.

Objective of the study:-
To identify the reasons for comparatively less tendency of young generation towards Ayurvedic medical treatment.

Methodology:-
This research was mainly conducted using primary data and the sample was employed. As for the sample of the study, among the Divisional Secretariats from Ratnapura District, 5 divisional secretariats were selected using simple random sampling method. In a single Divisional Secretariat, 10 youth clubs were selected using cluster sampling method. Among those youth clubs, 15 members were selected using cluster sampling method. A structured questionnaire was used in collecting required data and the analysis was conducted using Chi Square method.
Literature Review:
Samarawera (2008), states that gender largely affects the tendency towards Ayurvedic Medicine. When tendency of female population is 62%, tendency of male population is around 38%. Among the inpatients of state Ayurveda hospitals, 94% are Sinhalese, while among the patients of Out Patient Department (OPD), 98% are Sinhalese. Moreover, among the patients of private Ayurvedic centers, 92% are Sinhalese. Furthermore, 92% inpatients, 96% patients of OPD and 96% of patients getting treatment from private Ayurvedic centers are Buddhists. When considering the age, most patients of Ayurveda medicine are tending to be in between the age group of 50-70 years. Least number reports from children less than 10 years and elderly population over 80 years of age. Type of the illness is another concern which affects the tendency towards Ayurvedic medicine. For certain types of illnesses such as joint pains people tend to seek Ayurvedic medicine. The study further states that economic factors such as, household income level, prices of Ayurvedic medicine, transport cost, indirect health cost, affect the demand for Ayurvedic medicine. Being a self-employed person or an unemployed person, has a positive relationship towards the tendency for Ayurvedic medicine while, being an employed person, prices of Ayurvedic medicine, illnesses such as Arthritis, have a negative relationship.

Abdulla (2004), stated the factors affecting the demand for government and private medical services. Accordingly, among the demographic factors, gender, age, nationality, level of education, nature of the employment, monthly household income and among the health services related factors, number of medical factors, proximity, number of working hours, types of medical insurance, auxiliary services, modern equipment, availability of specialized doctors, hospital staff affect the demand for government and private medical treatment.

Swant (2013), has conducted a study to identify the attitude of villagers towards Ayurvedic medical treatment. It was revealed that, among 300 respondents, 64% use only Ayurveda medicine, 22% use Ayurvedic medicine along with other medicine and 14% have taken Ayurvedic treatment only once or twice. Moreover he stated that prices or such medicine, validity, productivity, packaging are the concerns of people. Gender is not a factor affecting for the demand for Ayurvedic medicine while awareness and preference of village people towards Ayurveda medicine tend to be at a comparatively higher level.

According to Bautista and Ginson (1994), based on the study conducted using 2800 households in Philippines, household income is a significant factor affecting the demand for Ayurvedic medicine. Moreover, the study further revealed that when the number of doctors, medical centres or hospitals increases, the number of inpatients tend to decrease.

Prosset (2007), found that gender, education level, literacy rate, cost of treatment, proximity to the medical centers, affect the demand for medical treatment. The study has been conducted selecting 3 villages from Kenya as the sample and it was revealed the fact that more than half of the respondents were suffering from some kind of illness while 70% - 80% of such people have not taken proper medical treatment.

Data Analysis:
The association between the attitudes of the young generation towards Ayurvedic medicine and their tendency:
H₁: There is an association between the attitudes of the young generation towards Ayurvedic medicine and their low tendency.

P-value = 0.000
0.000 < 0.05
Thus, there is enough evidence to reject H₀ at 5% significance level.
The attitudes of young generation significantly affect towards the lower tendency of adopting Ayurvedic medicine. This is further proven by contingency coefficient. This value being, 0.578, it shows that this factor has an effect of 58% towards the low tendency of young generation towards the Ayurvedic medicine.

**Issues arising from the states sector and tendency of young generation towards Ayurvedic medicine:**
- **H₁**: There is an association between issues arising from the states sector and low tendency of young generation towards Ayurvedic medicine.
- **P-value** = 0.000
- 0.000 < 0.05
  
  Thus, there is enough evidence to reject H₀ at 5% significance level.

Issues arising from the state sector significantly affects the low tendency of young generation towards Ayurvedic medicine. The contingency coefficient being 0.594, implies that this factor have an effect of 60% towards the low tendency of young generation.

**Western medicine and tendency of young generation:**
- **H₂**: There is an association between western medicine and low tendency of young generation towards Ayurvedic medicine.
- **P-value** = 0.000
- 0.000 < 0.05
  
  Thus, there is enough evidence to reject H₀ at 5% significance level.

There is a significant relationship between influence of western medicine and low tendency of young generation towards Ayurvedic medicine. This can be further explained by contingency coefficient. The coefficient value being 0.397, implies that this factor affects the low tendency of young generation towards Ayurvedic medicine in 40%.

**Problems arising from Ayurvedic medicine and low tendency of young generation towards Ayurvedic medicine:**
- **H₃**: There is an association between problems arising from Ayurvedic medicine and low tendency of young generation towards Ayurvedic medicine.
- **P-value** = 0.000
- 0.000 < 0.05
  
  Thus, there is enough evidence to reject H₀ at 5% significance level.

Accordingly, the problems arising from Ayurvedic medicine significantly affects the low tendency of young generation towards Ayurvedic medicine. The contingency coefficient being 0.573 depicts that this factor affects the low tendency of young generation in 57%.

**Nature the disease of an individual and low tendency of young generation towards Ayurvedic medicine:**
- **H₄**: There is an association between the nature of the disease of an individual and low tendency of young generation towards Ayurvedic medicine.
- **P-value** = 0.000
- 0.000 < 0.05
  
  Thus, there is enough evidence to reject H₀ at 5% significance level.

Nature of the disease of a person have a significant impact on the and low tendency of young generation towards Ayurvedic medicine. This factor has 59% effect on the low tendency of young generation towards Ayurvedic medicine where the contingent coefficient being 0.587.

**Demographic factors and low tendency of young generation towards Ayurvedic medicine:**
- **H₅**: There is an association between the demographic factors and low tendency of young generation towards Ayurvedic medicine.
- **P-value** = 0.174
- 0.05 < 0.174
  
  Thus, there is no enough evidence to reject H₀ at 5% significance level.

According to the above P value, demographic factors do not affect the low tendency of young generation towards Ayurvedic medicine.
Findings and Conclusion:-

| Variable                                      | P value | Analysis Results                                                                 |
|-----------------------------------------------|---------|----------------------------------------------------------------------------------|
| Attitude of young generation                  | 0'0000  | The attitudes of young generation significantly affect the lower tendency of young generation towards Ayurvedic medicine. |
| Issues arising from the State sector          | 0'0000  | Issues arising from the state sector significantly affects the low tendency of young generation towards Ayurvedic medicine. |
| Influence of Western medicine                 | 0'0000  | Western medicine significantly affects the low tendency of young generation towards Ayurvedic medicine. |
| Problems arising from Ayurvedic medicine      | 0'0000  | The problems arising from Ayurvedic medicine significantly affects the low tendency of young generation towards Ayurvedic medicine. |
| Nature the disease of an individual           | 0'0000  | Nature of the disease of an individual have a significant impact on the low tendency of young generation towards Ayurvedic medicine. |
| Demographic factors                           | 0'174   | Demographic factors do not have an impact on the low tendency of young generation towards Ayurvedic medicine. |

Accordingly, the demographic factors do not have an effect on low tendency of young generation towards Ayurvedic medicine whereas the variables in terms of, issues arising from Ayurvedic medicine, attitudes of young generation, issues arising from the state sector, impact of western medicine and nature of the disease of an individual have significant impact on the low tendency of young generation towards Ayurvedic medicine in Sri Lanka.

References:-

1. Abdullah, S. (2004). Factors Influencing the Utilisation of Public and Private Primary Health Care Services in Riyadh City. Available at http://faculty.ksu.edu.sa/Alghanim/Current%Factors%20Influencing%20Utilisation%20of%20Public%20and%20Private%20Primary%20Health%20Care.pdf [Accessed 16 December 2013].

2. Agarwal, V., Abhijith, A., & Raviraj, P. (2007). Ayurvedic medicine for schizophrenia. Cochrane Database of Systematic Reviews. Available at http://www.thecochranelibrary.com [Accessed 16 December 2013].

3. Bautista, G., & Ginson, M.A. (1994). Patterns of Health Care Expenditures, Utilization and Demand for Medical Care in Sample Philippine Households. Available at http://dirp3.pids.gov.ph/ris/dps/pidsdps9509.pdf [Accessed 16 December 2013].

4. Chopra, A., & Doiphode, V.V. (2002). Ayurvedic medicine. Core concept, therapeutic principles, and current relevance. Medical Clinics of North America. Available at http://www.thecochranelibrary.com on July 15, 2013 [Accessed 16 December 2013].

5. Dalvi, S.S., Gogtay, N.J., & Bhatt, H.A. (2002). The use and safety of off-allopathic Indian medicines. Available at http://www.thecochranelibrary.com [Accessed 16 December 2013].

6. Jayalath, C., Hettiarachchi, P., & Kodikara, N. (2004). Market entry requirements for herbal medicinal products in Sri Lanka: A case study. Available at http://www.ruh.ac.lk/research/academic_sessions/2004_mergepdf/38-42.PDF [Accessed 16 December 2013].

7. Perera, K. (2012). Spices Used in Ayurveda Medicine. Available at http://www.thespicejournal.com/downloads/spices%20used%20in%20Ayurveda.pdf [Accessed 16 December 2013].

8. Prosser, T. (2007). Utilization of Health and Medical Services: Factors Influencing Health Care Seeking Behaviour and Unmet Health Needs in Rural Areas of Kenya. Available at http://ro.ecu.edu.au/theses/46/ [Accessed 16 December 2013].

9. Samaraweera, G. R. S. R. C. (2008). A Comparative Study of Demand for Ayurvedic Medical Care Private Vs. Government, Department of Economics and Statistics, University of Sabaragamuwa, Sri Lanka.

10. Sawant, V. (2013). Consumer’s Perception for Ayurvedic Therapy in Rural Market with Special Reference to Nashik District. Available at http://www.asmgroup.edu.in/incon/publication/incon13-mkt-020.pdf [Accessed 16 December 2013].