

ROLE OF TRADITIONAL AND COMPLEMENTARY MEDICINE IN SUSTAINING HEALTH AND WELL-BEING OF MALAYSIANS

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Abstract: Traditional and complementary medicine (TCM) is widely known among Malaysians for its practices. This paper aims to examine users' experiences and perceptions of TCM on its role in sustaining the health and well-being of Malaysians. To achieve the objective of this study, a qualitative study was conducted with the respondents by using an online in-depth interview through the video conferencing platform. Fifteen respondents residing in Penang, Malaysia who used TCM including Traditional Malay Medicine, Traditional Chinese Medicine, Traditional Indian Medicine, and Islamic Medical Practice were recruited for this study. The data from the interviews were recorded and transcribed verbatim. Thematic approach was used for data analysis to identify emerging themes and sub-themes. Results indicated five core themes: (i) Strength of traditional beliefs on TCM, (ii) Personalised patient-practitioner relationship, (iii) Perceived effectiveness of TCM (iv) TCM provides better preventive measures, and (v) TCM promotes a holistic approach to health and well-being. Here, it concludes that TCM impacts Malaysians' health and well-being. Therefore, its potential for growth and importance, especially for sustaining health and well-being cannot be denied. Further research with a larger sample of respondents is needed to represent the population better while deepening the understanding of users' experiences and perceptions.

Keywords: Sustainability, traditional and complementary medicine, health, well-being.
Abbreviations: Traditional and Complementary Medicine (TCM)

Introduction

Traditional and Complementary Medicine (TCM) is an ancient medical practice that existed before modern medicine in human society and undoubtedly plays a remarkable role in sustaining Malaysians' well-being (Kaur *et al.*, 2019; Marican *et al.*, 2021; Teow *et al.*, 2021). Concepts of well-being are closely related to health and quality of life, where the World Health Organisation (WHO) defines health as "the full physical, mental and social well-being, not merely the absence of disease or infirmity" (World Health Organisation, 2019). Malaysians practice various ways of maintaining health and well-being with TCM. According to Kleinman (1986), health-seeking behaviour is classified into three sectors: popular (home level) sector, folk (informal) sector, and professional sector. Of this, the popular (family) sector covers 75% of every 1,000 illness episodes, 750 never get

outside of the family sector and are managed through household means (Payyappallimana, 2010). Users include using herbal medicines apart from over-the-counter medicines.

Malaysia is a multicultural society in Southeast Asia, well-known for its rich tropical biodiversity that has been the major producer of traditional and complementary health products (Hasneezah *et al.*, 2016). Though the present healthcare system in Malaysia is based on modern Western medicine, traditional and complementary medicine has built its roots a long time ago and undoubtedly plays a remarkable role in primary healthcare. The diversity in traditional medical systems in Malaysia reflects the diverse population of Malay, Chinese, Indian, and indigenous heritage. Malaysia recognises traditional Malay medicine, traditional Chinese medicine, traditional Indian medicine, Islamic

medical practices, chiropractic, osteopathy, and homoeopathy under Malaysia's Ministry of Health. The World Health Organisation (WHO, 2019) defined traditional medicine as the "sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences, indigenous to different cultures, whether explicable or not, used in the maintenance of health, as well as the prevention, diagnosis, improvement or treatment of physical or mental illness" while complementary is defined as a "broad set of healthcare practices that are not part of a country's tradition nor part of a conventional medicine and are not fully integrated into the dominant health care system". Both include products, practices, and practitioners of TCM (WHO, 2019). Hence, Malaysia's TCMs are valuable and rich in the cultural heritage of its people reflecting diverse cultures and traditions (Farooqui, 2013; Jamaludin & Aloysius 2019; Zaki & Hussin, 2019).

The significance of using TCM across societies cannot be overemphasised with roughly 80% of the world population depending on TCM for their health upkeep, treatment, and prevention of minor ailments and chronic severe diseases (Adebisi, 2019). As for most developing societies, in Malaysia, many individuals depend on these alternative medicines, whether as complementary medicine to be taken together with conventional medical treatments or as alternative medicine, for their primary healthcare (Doolan & Carne, 2020). The combined use of Western medicine and TCM is common, reflecting the increasing popularity of TCM in Malaysia (Marican *et al.*, 2021). TCM is gaining popularity across Malaysian regions owing to its accessibility, low cost, and low side effects and it has become a vital component in our healthcare system that will improve the level of health and quality of life of Malaysians (Chandran *et al.*, 2018). Since people regularly use them to enhance health and well-being, examining Malaysian users' experiences and perceptions of TCM is crucial. As most previous studies used cross-sectional studies employing a self-administered questionnaire, this study used in-depth interviews to explore

the users' experiences and perceptions of TCM in enhancing their well-being.

Literature Reviews

TCM remains a leading source of healthcare in many developed and developing countries (Tahir *et al.*, 2015; Abdullah *et al.*, 2018). Worldwide, it is used for disease prevention and sustaining well-being in both countries (Abdullah *et al.*, 2018). Moreover, some countries provide traditional methods in their primary health services (Mordeniz, 2019; WHO, 2019). As seen from the World Health Organisation's 2019 report, the progress on TCM, indicated for the last two decades by 179 WHO Member States from policies, national laws, and regulations on TCM, which includes herbal medicines in tackling unique health challenges (WHO, 2019).

Studies in neighbouring countries support the prevalent use of TCM. Traditional systems of medicine that exist in other East and South Asian countries are influenced mainly by TCM, and each one has developed distinctive features of its own (Mordeniz, 2019). Such countries include a high prevalence of TCM use in Indonesia as reported by Nurhayati & Widawati (2017) and Pengpid & Peltzer (2018). In Japan, *Kampo*, a system of traditional herbal medicine, is even covered by the national health insurance plan and is practised by many licensed medical doctors (Motoo *et al.* 2021). In India, *Ayurveda* is practised within the national federal health system (Suhail & Srinivasalu, 2021). On the other hand, Africa's traditional medicine remains the primary source of healthcare as it has been throughout the continent's history (WHO 2019).

Malaysia's mainstream healthcare delivery system is based on conventional medicine, and there is growing interest in TCM (Suhami *et al.*, 2015). The popularity of TCM among Malaysians urged the Ministry of Health (MOH) to launch the TCM National Policy in 2001. It was later revised in 2007 in accordance with WHO guidelines on integrating TCM into the modern healthcare system. Presently, the ministry is slowly integrating TCM into the national healthcare system. This step ensures

both traditional and conventional medicine co-exist with modern medicine while enhancing Malaysians' health and quality of life (Jasamai *et al.*, 2017). Hence with a history of the co-existence of both medical fields, the integration into the mainstream conventional healthcare system is still very much in its infancy (Kaur *et al.*, 2019). Though myriad studies focused on patterns and utilisation of TCM use (Silvanathan & Low, 2014; Othman & Farooqui 2015; Ridzuan *et al.*, 2021; Teow *et al.*, 2021), the importance of knowing the personal experiences and perceptions of users as the integration of TCM into the mainstream conventional health care system is needed during its developing stage. Therefore, the study documents the users' personal experiences and perceptions in representing the public's voices in assisting the integration of TCM into the national healthcare system in Malaysia.

Materials and Methods

Research Location

Penang was chosen as a study location due to its renowned and bustling melting pot of races and religions, including Malays, Chinese, Indians, and other ethnic groups of different religions. Penang's multiculturalism position indicates grounds to study the population's experiences and perceptions of TCM usage. In addition, Penang is home to many TCM practitioners whose recognised practice areas are Traditional Malay Medicine, Traditional Chinese Medicine, Traditional Indian Medicines, and others.

Data Collection Methods

Qualitative is used to gain a more profound and rich understanding of experiences and perceptions of TCM on its roles in enhancing Malaysians' well-being. Information was extracted from respondents based on their personal experiences and perceptions using in-depth interviews guided by a semi-structured interview schedule. This technique allowed a deeper understanding of their perspectives.

The interview schedule was assessed and amended for flow, wording, and ease of use by the university research ethics panel in its initial stages. It included a broad outline of topics to be discussed, allowing respondents to describe and explain their experiences and perceptions using their terms while introducing new topics for discussion. Questions were based on the following key areas: respondents' demographic data, TCM modalities used, and reasons for using traditional and complementary medicine. Moreover, relations of preferred medical treatment are shared, while perceptions and experiences of TCM in particular and the general growth of TCM were discussed. Due to COVID-19 unprecedented change and disruption, online interviews were conducted using the videoconferencing platform.

Sampling Procedure and Respondents' Profiles

Respondents recruited are based on treatments received, recognised as TCM in Penang under the Ministry of Health through posters shared on social media and practising practitioner's clinics. The inclusion criteria are as follows: 1) the respondents must be above 18 years old; 2) Users of traditional and complementary medicines (Traditional Malay Medicine, Traditional Chinese Medicine, Traditional Indian Medicine, Islamic Medical Practice) 3) Malay or English language speakers, 4) Received TCM treatments in Penang, Malaysia. Those who fulfilled the criteria and responded to the posting were contacted, and online interviews using the video conferencing platform were arranged based on the respondents' convenience. Fifteen respondents who used TCM, including Traditional Malay Medicine, Traditional Chinese Medicine, Traditional Indian Medicine, and Islamic Medical Practice in Penang, Malaysia, were recruited for this study. Information obtained was deemed sufficient until no new information was added. This is synonymous with the methodological principle of saturation in most qualitative research (Saunders *et al.* 2018).

Data Analysis and Concept of trustworthiness

Thematical analysis through *Atlas ti* identified themes, conceptual categories, commonalities, and differences in the respondents' responses through qualitative data. Recordings of the scheduled interviews ensured the accuracy and completeness of data. The initial step began with listening to the recorded audio and reading the transcripts. The familiarisation and immersion of data assisted researchers in reflecting on data and better understanding and interpreting the views shared. Secondly, codes were generated using *Atlas.ti* to produce a concise matrix of key emerging ideas. Lastly, a coding summary and report were produced with the themes and sub-themes that make meaningful contributions to answering the research questions.

Data validity was established using Lincoln & Guba (1985)'s concept of trustworthiness. This comprised credibility, transferability, and dependability. Data collection and analysis methods were well-established to enhance credibility. The involvement of researchers was experienced in conducting the interviews. Moreover, respondents voluntarily participated with encouragement to share honestly throughout the interviews to achieve credibility. Dependability was ensured by using a consistent data collection and methodology approach. To maintain confirmability, the researchers held frequent meetings, reflexive and critical discussions and debriefings during the entire data collection and analysis period. Data collected and analysed were described as detailed as possible to enhance the transparency of the research design used while transferability among researchers.

Research Ethics

Ethics approval was obtained from the Human Research Ethics Committee (JEPeM), Universiti Sains Malaysia (USM/JEPeM/20120707). Interviews started upon confirmation of the respondent's understanding of the study information with their informed consent. The consent letter contained the nature and objective of the study and ethical considerations followed

throughout the research. Before the interview, consent forms were sent to the respondents via email and social media messaging platforms. Respondents' signatures were a form of agreement and inclination to participate in the interview. Moreover, respondents were informed that their anonymous narratives might be used in the published work later and that they had the right to terminate the interview at any time or not to answer any irrelevant or disturbing questions. The Malay and English languages were used according to the respondents' preferences. Interviews lasted 60 to 90 minutes, with a token of appreciation given upon completion.

Socio-demographic characteristics of the respondents

A total of fifteen TCM users were interviewed. Table 1 summarises the socio-demographic characteristics of the respondents who participated in the study. Malay respondents were the highest number, predominantly from the 25-45 age group. All the respondents have used more than one type of TCM modality. Among them are Chinese acupuncture, traditional Malay massage, Islamic medical practice, wet cupping, herbal medicines, and Ayurveda. The reasons for varied medicine are maintaining well-being, treating illness, and preventing chronic or acute illness. Anonymity is used to protect the identity of the respondents.

Results and Discussion

Thematic analysis identified five core themes focusing on users' experiences and perceptions of TCM in enhancing their well-being. They are (i) Strength of traditional beliefs on TCM, (ii) Personalised patient-practitioner relationship, (iii) Perceived effectiveness of TCM, (iv) TCM provides better preventive measures, and (v) TCM promotes a holistic approach to health and well-being. Seven subthemes investigated include family influence, awareness of TCM, safety and nature, *halal* image, well-being, pluralistic medical practice, and TCM used during COVID-19.

Table 1: Socio-demographic characteristics of the respondents

Respondents	Gender	Age	Ethnic	TCM modalities used	Reasons using TCM
Respondent 1	Male	51	Malay	Acupuncture, Islamic wet cupping, Malay massage, herbal medicine	To treat illness, to maintain well-being
Respondent 2	Male	20	Malay	Chinese herbal medicine	To prevent illness; to maintain well-being
Respondent 3	Female	23	Malay	Chinese herbal medicine	To prevent illness, to maintain well-being
Respondent 4	Female	35	Malay	Malay massage, Malay herbal medicine	To maintain well-being
Respondent 5	Male	36	Malay	Acupuncture, Malay massage, Chinese herbs	To maintain well-being
Respondent 6	Male	25	Chinese	Chinese herbal medicine	To treat illness
Respondent 7	Female	21	Chinese	Chinese herbal medicine	To treat illness, to maintain well-being
Respondent 8	Female	44	Malay	Malay massage, Malay herbal medicine	To maintain well-being; to prevent illness
Respondent 9	Female	38	Malay	Malay massage, Malay herbal medicine	To maintain well-being; to prevent illness
Respondent 10	Female	40	Indian	Acupuncture, Malay massage, Chinese herbal medicine	To treat illness
Respondent 11	Female	20	Malay	Islamic medical practice, herbal medicine	To treat illness
Respondent 12	Male	40	Malay	Malay herbal medicine, wet cupping	To treat illness; to maintain well-being
Respondent 13	Male	45	Indian	Ayurveda, Ayurvedic medicine	To treat illness; to maintain well-being
Respondent 14	Female	32	Malay	Malay massage, Malay herbal medicine	To maintain well-being; to prevent illness
Respondent 15	Male	39	Indian	Ayurveda, Ayurvedic medicine	To prevent illness; to maintain well-being

Strength of Traditional Beliefs on TCM

TCM is an ancient practice handed down by generations. Hence, two sub-themes identified are family influence and creating public awareness of TCM.

Family Influence

Family influence is the most common reason for TCM use, with many respondents disclosing knowledge on traditional medicine usage was passed down from family to

maintain good health and treat illness. Many respondents acknowledged this. Information and recommendations from family members, especially elders such as grandparents, parents, and older relatives, are often obeyed and not questioned. Quotes below provide examples of knowledge handed down from family.

“My parents taught me to use herbal medicine since young. Whenever I got fever, my parents will not give me

Panadol, but he will go to the sinseh shop and buy for me the herbs medicine to consume. I feel better after that” (Respondent 1).

“Well, I mean this started when we were still kids. If you were ill, then you just get your herbal tea to easy sweating and drink coconut water to reduce the heat and to prevent dehydration. This is something you bring along with you when you got older and for own children. This is thing you learned from one’s own parent” (Respondent 9).

Some respondents exposed their children to TCM after experiencing it. “What my parents taught and practised on me; I will pass it to my children” were mentioned by the respondents. The interviews with respondents affirmed this. Respondent 2 said his family practised traditional Chinese medicine. When he has a cough or fever, his dad will get powdered substance (herbal medicine), which has a weird smell but is very effective. When he finishes the packet of herbal medicine, he will feel better quicker than modern ones. Another respondent also mentioned that her family and relatives suggested herbal medicine, which is beneficial depending on the illness.

“Modern medicine does not work for my gastric problem. So, I try herbs and all these kinds of TCM suggested by my family and relatives. I found it works better than modern medication” (Respondent 3).

The respondents also mentioned recommendations by relatives on the TCM practitioner. For example, Respondent 7, who had cramps from her menses, received recommendations from her aunty to get treatment from a Chinese medicine practitioner in Ayer Hitam, Penang.

“I have tried other practitioners, but it did not help. Then, my aunty recommended the Chinese practitioner in Ayer Hitam. My aunty said the practitioner is good as she has been

there for her health problem, and he has helped her to treat her illness” (Respondent 7).

Creating Awareness of Traditional and Complementary Medicine (TCM)

Most respondents voiced concerns about the government’s role in promoting TCM in Malaysia. A respondent shared, “We have the natural source(s), we have the unique cultures from various ethnicities in Malaysia, why not we use it? Others in the study supported this view.

Respondent 1 also expressed his thoughts on the younger generation not being exposed to the TCM due to scepticism. He suggested the role of government in creating more awareness of TCM, or the heritage and knowledge from the older generation will likely vanish.

“Most people do (are) not aware of the benefits of TCM. If it were not because of my parents who introduced it, I wouldn’t have known about it. The government should play a role. Ministry of Health should recognise the TCM practitioners, gave them more priority as to the conventional medicine” (Respondent 1).

Personalised Patient-practitioner Relationship

The desire for closer patient-centered and supportive relationships is one of the reasons users choose TCM. Most respondents perceived their relationship with the TCM practitioners as a critical component of the treatment process. Key characteristics of a supportive patient-practitioner relationship consist of trust, acceptance, and feeling cared for. Respondent 2, who has used traditional Chinese medicine since he was young, shared:

“We (family) went to the same sinseh (traditional Chinese medicine practitioner). Grandma used to see sinseh before I was born. He (sensei) explains everything in detail, and he mentioned if the medicine does not

work just come back to him and he will prescribe another medicine. For now, everything he gave is effective. He's very nice and doing his job very well and makes us trust him" (Respondent 2).

Respondent 14, who had just given birth, felt cared for when her midwife listened to her problems.

"I'm going back to my hometown for 'berpantang' (confinement period) after delivered my baby. Makcik Miah, who has been our family midwife took care of me and my baby. I was down when my baby was diagnosed with jaundice. But my traditional midwife calms me down and advise me to breastfeed my baby frequently. She also massaged my body to make me feel better. She gave me the opportunity to talk about what I was going through. 'You really felt that somebody was listening to you and cared for you" (Respondent 14).

Interviews also showed that TCM practitioners' patients' sociocultural backgrounds and patient's ideologies determine the choice of TCM. With TCM, usually community-based, practitioners who are well-acquainted with patients' backgrounds, lifestyles, and cultural beliefs live in the same community. Moreover, respondents felt it is easier to communicate with the practitioners than with medical doctors. Here, the relationship is built with time, and listening skill is crucial to healing.

"I feel easy to talk about my diabetic's illness to my practitioner. He understands my health beliefs and condition. My practitioner will hear me patiently and advise me to take care of my food and take my medicine. Compared to the conventional doctor, they don't have time for me. They just ask me to follow the food intake and scold me when my glucose level increased" (Respondent 13).

Respondent 7, who sees a TCM practitioner for her menses cramps, shared her experience with the practitioner.

"I had a good experience with my TCM practitioner. He is very nice. He can communicate well and understand my condition and know the problem" (Respondent 7).

Respondents also mentioned the qualities of the TCM practitioner, including friendliness and niceness. The following quote provides an example of respondents' perspectives on TCM practitioners.

"I went to the Chinese physicians for my knee problem. I got the contact from Google search based on good reviews. The uncle is very experienced, knowledgeable person. He is very friendly, very kind and likes to talk and share knowledge about health. The way he handles patients, we feel easy with him. The premise environment also very nice, homely and we feel peace when we are at the premise" (Respondent 10).

Perceived Effectiveness of TCM

Respondents' most cited reason for TCM use is the perception of TCM to be more effective than conventional medicine. Using efficacy as the ability of TCM to produce the desired effect, sub-themes emerged involving beliefs that TCM is generally safe, natural, and halal. Belief in the effectiveness of the TCM is a reason for their treatment choice. Respondent 10, who has tried Traditional Chinese Medicine, is very satisfied with the practitioner's treatment, whom she called uncle. She also brought her mother and aunty to receive treatment.

"The traditional medicine is very effective. My aunty can't bend her pointing finger. I think because of the calcium problem. I brought her to uncle (sinseh) to check. For the first

time, uncle do the acupuncture. But she can't stand the pain. So, for the second meeting, uncle doesn't do the acupuncture. He just massage and put the medication (herbs) and then wrap it and leave it for 24 hours. After the fourth time meeting uncle, she can see the changes to her finger. She can bend her fingers now" (Respondent 10).

Another respondent, Respondent 6, who seeks Traditional Chinese Medicine for his skin condition, also mentioned the effectiveness of the medicine.

"I suffered from eczema. My skin will be red, itchy and my nail is in bad condition. I have tried many treatments including the skin specialist, but not successful". With this TCM practitioner, I feel like my disease got cured. Of course, it takes time, every week has to go see him and get the medicine. What I can say, TCM takes time, but it's effective" (Respondent 6).

Respondent 7, one of the female respondents also shared her experience of taking the herbal medicine given by the Traditional Chinese Medicine practitioner.

"I received treatment for my menstruation problem. The practitioner gave me herbal medicine where it needs to be boiled in water. The taste is not very nice, but it helps to improve and regulate my menses" (Respondent 7).

Respondents refuted the assumption of TCM being cheap depending on the type of TCM used, as it can be expensive, as shared by Respondent 6:

"The medicine cost me around RM220 to RM300 per week. Every week I need to go to the premise to get the medicine. So yeah, I think it costs me around RM10k – RM20k for two years treatment. But it worth as it cured my disease" (Respondent 6).

Respondent 1 also shared a similar experience.

"I went for acupuncture for my gout problem. The acupuncture treatment is quite expensive you know. With a thorough check up and treatment, it will cost around six to seven hundred per treatment" (Respondent 1)

Safe and Natural

All respondents perceived TCM originated from natural sources without harmful additives such as chemicals or drugs as it is not chemically invasive compared to Western medicine. Hence, their belief that TCM is relatively safe suggests Respondent 5, who has been using TCM since age, shared, "I don't think it will do any harm if you take it because it's all-natural".

Respondent 14, who had just delivered her second baby, believed in the safety and efficacy of TCM during her postpartum period in restoring energy after childbirth.

"I used traditional Malay massage and consumed herbal medicine to improve blood circulation and to restore my energy. I have been practicing it since my first baby. It helps me to recuperate faster after delivery" (Respondent 14).

However, a few mothers expressed their concerns about the consumption of herbal medicine during the early weeks of their postpartum period, as one shared:

"As I fully breastfed my baby, I will avoid taking herbal medicine, for example jamu (herbal concoction) during the first week after delivery as jamu is considered 'hot' as I'm afraid my baby will get jaundice. I will slowly consume jamu with a small amount depends on the effect to my body after the second week or third week after delivery. Jamu is very good for recovery of new mothers after gave birth" (Respondent 4).

Respondent 1, who received TCM treatment for gout and joint pain, also emphasised the nature and safety of the medicine.

“I have got the treatment from the modern medicine. The doctor gave me painkillers and inflammation to reduce swelling. This modern medicine had drugs, have side effects. Herbal medicine is something benefit you, it made from natural remedies, and we feel safe to consume them” (Respondent 1).

Many respondents argued for avoiding the side effects of technology or chemicals with the thought of TCM as “more natural products”. However, one of the respondents who had given birth to her third child shared her concerns.

“I’d use complementary medicine during my postpartum period. I used TCM to improve my well-being. I used massage, heat therapy, belly binding, herbal bath, and consumed herbal medicine. TCM just more natural things and eating well and generally looking after yourself” (Respondent 4).

Leading to concerns about approval from trusted sources, various acts regulate natural products and go through approval, registration, and Good Manufacturing Practice (GMP) before being approved by regulatory authorities such as the Ministry of Health, Drug Control Authority (DCA), and National Pharmaceutical Regulatory Agency (NPRA). Natural products used in traditional and complementary medicine practices are deemed safe and quality-assured once these regulatory bodies approve. Hence, respondent 8, who received traditional Malay medicine to maintain well-being and prevent illness, shared that she only trusts products approved by the Ministry of Health for T&CM products.

“I think just to be cautious and to avoid any dangers, check the label and ingredients of the TCM products, check the Ministry of Health approval before you take/consume them” (Respondent 8).

Halal Image

In Malaysia, the Islamic *halal* principle is essential for Muslims before consuming edible products. *Halal* food consumers (Muslims) who use TCM shared their concerns on the *halal* authenticity of products sold under TCM, which was raised by Muslim respondents who used Traditional Chinese Medicine. Due to the complete code of dietary laws presented in the Holy Qur’an for Muslims, *halal* products should be mentioned clearly in the ingredient list apart *halal* certification.

“Ingredients of Chinese medicines ingredients all writings are in Chinese. Malay users cannot read and understand the ingredients used, that is the barrier. Must break the chain” (Respondent 1).

Another respondent also shared his concerns about this matter.

“I used to take Chinese herbs for my fever and cough. Usually, I will ask the sinseh about the ingredients used. It will be easier for the Muslims if the ingredients were written in dual language (Mandarin and English). If obtained from plant origin would be considered as halal, but if obtained from animals then it has restrictions by Islamic principle” (Respondent 3).

TCM Provides Better Preventive Measures Than Conventional Medicine

When asked whether TCM provides better preventative measures, all the respondents agreed. Sub-themes unravelled are well-being, pluralistic medical practice, and TCM used during the COVID-19 pandemic.

Well-being

Besides using TCM to treat illness, respondents also identified preventive measures while maintaining well-being as the most common reasons for using TCM.

“Not necessarily because I’m sick, but also as a prevention strategy and for well-being. As my grandparents and parents have diabetes, I took bitter gout capsules to reduce blood sugar level and to prevent me from getting diabetes apart from reducing my carbohydrate intake. Just for precaution” (Respondent 12).

Consequently, dissatisfaction with conventional medicine and looking for an alternative treatment method were shared among the respondents for using TCM.

“In the past, I have always suffered from the cough. My throat will be itchy, and I can’t stop coughing. It was very embarrassed especially when I’m conducting class. I tried the conventional medicine, the cough medicine given by the clinic, but nothing helped. Then, I heard about honey and lemon mixture from my close friends. When using specific mixture, for maybe two weeks, it can prevent such issues. I did it and all my cough problem, suddenly became less pronounced” (Respondent 8).

Medical Pluralistic Practice

Some of the respondents in this study also mentioned the belief in combining TCM and modern medicine to cure disease quicker than using TCM alone. Few shared

“For my high blood pressure, I used to consume the hospital medicine, but at the same time I also tried herbal medicine product such as buah tunjuk langit (sky fruit) capsule. Its benefit is to lower the blood pressure” (Respondent 12).

“I used both conventional medicine and TCM, depends on illness. For the minor illness such as body heat, fever, neck pain and body ache, I usually go to TCM practitioners. But, for major

illness like appendicitis, I will go to the hospital to remove it to do operation” (Respondent 1).

From the interviews, most respondents have used more than one type of TCM modality. Due to Malaysia’s multi-ethnic, multi-cultural, multi-religious developing country, knowledge of TCM has been embedded into the health belief system and deeply integrated into their lives. Therefore, it is common for other ethnicities to use the healthcare system belonging to their own or other ethnicities. Moreover, views originating from surrounding culture and health beliefs due to upbringing may increase trust in trying TCM apart from conventional medicine.

“I used few types of TCM. For my gout, I used to do acupuncture by the Chinese practitioner, I also do Islamic wet cupping to remove toxic waste from the blood stream, and for body ache I used to do Malay massage at least once a month” (Respondent 1).

TCM Used During COVID-19 Pandemic

Since interviews were conducted during the COVID-19 pandemic, respondents were asked on the intake of alternative food to prevent COVID-19. Many Malaysians shared to consume herbal medicine for prevention as shown below. Herbs, healing oils, honey, and homemade concoctions were among the alternative food they take to boost their immune system.

“I used to take habbatus sauda’ oil (black cumin oil) early in the morning and night half hour before taking meal. Habbatus sauda’ is very good as antioxidant, anti-inflammatory. It also encouraged to take as it is considered as makanan sunnah (prophet’s food)” (Respondent 8).

“... my family used to boil some cloves in a hot water for a few minutes, and then breath in the steam in and out. It was said it can clear the lung for better breathing” (Respondent 9).

“With the increase in COVID-19 cases, my family has taken a few precautions. Apart from getting vaccinated, my wife used to make rasam, a spicy and tangy soup made with tamarind and herbs such as garlic, pepper, cumin, mustard seeds and coriander. It has been used traditionally as a treatment for flu, or cold and as a remedy for sore throats and fever. Rasam is thought to have antioxidant and antibacterial properties” (Respondent 13).

“After much misinformation read in messages, I have taken into account of checking the validity and come to the knowledge of few of Traditional Chinese Medicine in preventing me from contracting COVID. Some of which I consume are Lianqio (Forsythiae Fructus), Japanese honey suckle also known as Jiangyinhua (Lonicera japonica) and Chinese Licorice also known as Gancao. ... they’re for increasing the body’s immune system in combatting viral infections” (Respondent 7).

TCM Promotes a Holistic Approach to Health and Well-being

Integrating physical and mental health as an integral part of well-being is part of the TCM healthcare systems. The following provides examples of perspectives on the holistic approach of TCM.

“It’s (TCM) very holistic, so it treats person as a whole...When I see my TCM practitioner, he’s looking at my health and well-being overall” (Respondent 12).

“Ayurveda is a holistic system of healing. The method of Ayurveda is unique and universal. Instead of treating the symptoms of a disease, it treats the individual and caring is given for the entire body” (Respondent 15).

Respondent 11, who gets her treatment for her asthma from an Islamic medicine practitioner, mentioned that Islamic medicine promotes faith healing through prayer and reciting Quranic verses. It treats physical illness while helping patients to eliminate negative emotions. Using holistic wellness considers external environments and spiritual well-being.

Confidence in the practitioner seemed to determine the patient-practitioner relationship, which depends on several factors. The feeling of being in a specific and individualised relationship with the practitioner was related to the practitioner’s interpersonal and communication skills, including the ability to adopt a holistic approach to the patient.

“The practitioner asks questions about my family, about my home. He is very nice. The relationship with the TCM practitioner is longer, deeper and makes more sense” (Respondent 10).

Discussion

Examination of the users’ experiences and perceptions of TCM in enhancing the well-being of Malaysians using in-depth interviews conducted with TCM users showed personal views of TCM users. The study confirmed findings from previous studies of families playing an essential role in healthcare decisions (Silbermann & Hassan, 2011; Suhami et al., 2015; Shewamene et al., 2020). In Asian countries, family members who are mainly providers of care for family members play an essential role in healthcare decisions. Most respondents disclosed that information and knowledge on traditional medicine were passed from their families to maintain good health and treat illness. Recommendations are passed by the elderly such as parents and relatives, as seen in “it was always done this way”, stated several times by respondents who use TCM treatment.

Moreover, respondents voiced their concerns about creating TCM awareness as it improves Malaysia’s health and quality of life. With Malaysia’s multi-ethnic hub, TCM

showcases Malaysia's unique healthcare comprising three major ethnicities- Malay, Chinese, and Indian- in the Traditional and Complementary Medicine Division under the Ministry of Health. Its underdevelopment will be a waste for the Malaysian government if it is not utilised accordingly (Chandran *et al.*, 2018).

The personalised patient-practitioner relationship is a factor in respondents' choice of TCM treatment. All respondents perceived their relationship with their practitioners as essential to healing. They reported a good relationship with their practitioners as they were cared for and welcomed by the friendly personalities of TCM practitioners. These findings support the work by Foley *et al.* (2021), whereby the desire for a more patient-centred and supportive relationship was a reason for choosing to favour TCM. Patients value caring, empathic, and therapeutic relationships with their TCM practitioners.

The majority of the respondents believed in the effectiveness of the TCM treatment. Similar findings were also reported by Ali *et al.* (2018) and Ridzuan *et al.* (2020). Furthermore, despite expensive TCM treatments similarly reported in the previous studies by Siti *et al.* (2009) and Tahir *et al.* (2015), respondents in this study continued their treatments due to its effectiveness. This finding also aligns with Jasamai *et al.* (2017) on attitudes toward Complementary and Alternative Medicine (CAM) among Malaysian adults, whereby CAM is usually more expensive than conventional medicine with the public willing to pay.

Despite the assumption that TCM is generally safe to consume, postpartum women have concerns regarding the herbal concoction regarded to be *heaty*. *Heaty* is assumed to be "hot" which could cause jaundice in their baby. The findings show similarity in the previous studies by Fuad *et al.* (2020) and Teoh (2013) on the use of CAM among postpartum women who consumed herbal medicine, where it showed that more than half of the respondents reported neo-natal jaundice in their newborns. Moreover, respondents perceived TCM as natural, without

side effects and chemicals. The findings persist with previous studies (Silvananthan & Low, 2014; Ali *et al.*, 2018; & Zheng *et al.*, 2020).

The respondents raised a *halal* image in this study as Malaysia is a Muslim country with Islam as the official religion of Malaysia *halal* authenticity of TCM products. It became a concern as consumable items should be *halal* and deemed fit, clean, and wholesome for health (Zeinalian *et al.*, 2017). Similar considerations apply to *halal* issues reported by a study on traditional Chinese Medicine among postpartum women in Malaysia (Jamaludin & Aloysius, 2019). Besides treating illness, the respondents shared that the most common use for TCM is preventing and maintaining well-being. This is consistent with the previous finding among Malaysians who primarily sought TCM services to maintain wellness (Siti *et al.*, 2009; Kaur *et al.*, 2019).

The combined use of conventional medicine and TCM is common among the respondents in this study. It is due to the belief that combining TCM and modern medicine complements one another, curing and healing faster. Previous research asserted that the main users consist of TCM and conventional medicine rather than using TCM alone (Tam, Chang & Norazah, 2014; Othman & Farooqui, 2015).

Another important finding is using different race TCM modalities by other races. Although TCM modalities are synonymous with race/ethnicity, the study showcases the openness of other race modalities. Teow *et al.* (2021) reported that the evolution of TCM modalities in Malaysia is unique due to the amalgamation of different Asian cultures over many decades. Through amalgamation, myriad complementary alternative medicine modalities build openness stemming from the traditions of one ethnic group. It is also consistent with Mohiuddin *et al.*'s (2021) research on using traditional Chinese medicine in Malaysia among the ethnicities, whereby the Malay population preferred traditional Chinese medicine. Therefore, showing the commonality of other ethnicities in using other ethnic TCM modalities.

Since the COVID-19 outbreak, many complementary medicine herbal prescriptions have circulated in the community as Malaysians intake herbal medicine to prevent contracting the disease. Most respondents showed to consume TCM such as Chinese herbs, honey, Malay herbs and homemade concoctions due to the perception of strengthening the immune system. A study by Lam *et al.* (2021) in Hong Kong found the public commonly used TCM during the pandemic. Intake of vitamins, dietary supplements, and Chinese herbal medicine were consumed to strengthen immunity and prevent virus contraction. While vaccination and social distancing were used to control the pandemic, professional bodies should proactively consider public preferences and provide information regarding the effectiveness and safety of TCM for COVID-19 prevention and treatment.

The holistic approach of TCM is reported to have been practised and promoted over time. Treatments include the patient's social life, relationships, external environment, and spiritual well-being while combating the disease (Simwaka *et al.*, 2007). Similarly, a study by Warriner *et al.* (2014) on women's attitudes toward the use of complementary alternative medicine in pregnancy revealed that complementary alternative medicine is very holistic through its wholesome treatment.

Conclusion

This study aims to understand the experiences and perceptions of Malaysian users on TCM treatment. Here, it concludes that TCM impacts Malaysians' health and well-being. Despite modern health services, Malaysians still use various traditional healthcare systems. Furthermore, the potential for growth and importance, especially for maintaining health, cannot be denied. In addition to its popularity, it is deeply rooted in strong cultural beliefs. In terms of practical perspective, TCM is often seen as more accessible, affordable, and acceptable to local populations and can therefore be a tool to help achieve universal health coverage. It can

be said that TCM plays a part in complementing Malaysia's national healthcare system.

The national government and international organisations recognise TCM's role. World Health Organisation (WHO) acknowledges TCM's long history of use in health maintenance, disease prevention, and treatments. In terms of theoretical perspective, TCM is an important tool to achieve the United Nations Sustainable Development Goals, listed under SDG3, where health is central to ensuring healthy lives and promoting well-being for all ages which cannot be achieved through modern medicine alone. A comprehensive approach is needed, where TCM approaches to health and well-being are holistic. This approach makes the TCM an appropriate tool for sustainably achieving universal health and well-being (James & Bhatnagar, 2020). Now, TCM is on par with the modern medicine sector. While the TCM systems are gaining popularity, they are crucial for recognition as legitimate healthcare systems. Over the last 20 years, the Malaysian government developed policies to institutionalise and incorporate TCM into the national healthcare system through regulatory measures for its practitioners and services. Malaysia is evaluated as an 'in-process country' in which the integration of TCM into the national healthcare system is most actively underway, considering cultural, political, or economic diversity (Park, Yi & Kwon, 2022).

Integrating TCM into the national health care system should include the voices of the public, the TCM practitioners, and the TCM associations for their public interest. The primary concern is to regulate and ensure the safety of TCM services and products through more research. The findings can be a stepping stone for conducting systematic and in-depth studies to gain more information on the public's experiences and perceptions of TCM. The main limitation of this study was the small sample of respondents, including respondents from one state in Malaysia, hence creating bias upon extrapolating the results to reflect on TCM experiences and perceptions in Malaysia. Furthermore, the TCM modalities used were

not equally proportionate among respondents. Therefore, it cannot fully conceptualise the overall experiences of the TCM users. Further research is needed with a larger sample of respondents to better understand users' experiences and perceptions.

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Conflict of Interest Statement

The authors declare that they have no conflict of interest.

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