

# Exploring the Awareness, Attitudes, And Usage of Alternative Medicine Among Pre-Senior Adults in Chennai: A Cross-Sectional Study

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## ABSTRACT

A cross-sectional study that addresses the awareness, attitudes, and use patterns of alternative medicine with pre-senior adults in the 45-59 years age group in Chennai which is a population that has gradually been on the increase towards the use of complementary means of dealing with age related health conditions. Based on the results of the survey conducted among 123 respondents using a structured online questionnaire, the data shows that the degree of acceptance of alternative medicine is moderate to high with 38.2 and 22.8 respectively, seeing it as effective and very effective; indicating that almost half of the respondents trusted it as much as they trust conventional medicine. Receptivity to adoption was high as most people were willing to either use or suggest alternative treatments based on the condition and this was mainly caused by social networks and personal experience. In spite of this openness, cost and accessibility are also viable hindrances to more widespread use. The statistical analysis indicated a high positive correlation between frequency of use and perceived benefits ( $r = 0.77$ ), which was also showing that repeated involvement in using alternative medicine strengthens beliefs about its effectiveness. On the whole, the results highlight the relevance of sociodemographic and social-influence variables in the development of alternative medicine uptake and the need to consider and implement health-focused measures with the aim of enhancing the quality of life of pre-senior adults.

**Keywords:** *Alternative Medicine, Attitudes, Awareness, Pre-Senior Adults, Usage Patterns*

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## INTRODUCTION

The popularity of alternative medicine has shown a significant upsurge in recent years especially with people using the therapeutic avenue as a supplement to controlling the illnesses.[1] As traditional medicine remains a dominant mode of healthcare delivery to the majority of people, an increasing number of the populace tend to embrace alternative medicine modalities of identifying and treating various health-related issues; through the use of herbal medicine, acupuncture, homeopathy, and naturopathy.[2] This trend has triggered increased attention among the health care providers, researchers, and policymakers thus highlighting the need to study the degrees of awareness, acceptance, and the use of alternative medicine among different demographic groups.[3]

Globally, the utilization of complementary and alternative medicine (CAM) has increased substantially over the past two decades.[4] Reports by the World Health Organization indicate that a significant proportion of populations in both

developing and developed countries rely on traditional and complementary medicine for primary healthcare needs. In many Asian and African countries, up to 70–80% of the population depends on traditional medicine, while in high-income countries, CAM is often used as a complementary approach alongside conventional treatments.[5]

The WHO Traditional Medicine Strategy emphasizes the integration of evidence-based alternative medicine into national healthcare systems, highlighting the need for safety, efficacy, and quality assurance.[6] These global trends underscore the growing acceptance of CAM and justify the relevance of localized studies, such as the present research conducted in Chennai.[7] The study enhances its external relevance and contributes to the global discourse on integrative healthcare practices by situating the findings within this broader international context,

One of the most critical in this context is the pre-senior adults (those who are between the ages of 45-59 years). The transitional status is associated with this stage of life

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which is usually filled with certain anxieties of aging and the emergence of chronic illnesses, and preventative health behaviors.[8] Besides, patients in this age group often show the tendency to seek alternative methods of treatment as supplements to conventional ones or as the way to reduce prolonged dependence on prescription drugs.[9]

Chennai is a fast developing metropolis in India that represents a rich amalgamation of different socio-cultural backgrounds; in this context, intake of alternative medicine has been a significant constituent of healthcare service. However, there is limited empirical studies of whether pre-senior adults in Chennai are aware, receptive and actively engaged in these therapies. It is therefore in that regard that the current cross-sectional research will fill this gap of knowledge by measuring the level of awareness, the attitudinal, and the frequency of use of alternative medicine by these age group. With the help of this analysis, this study will be trying to explain how the pre-senior in Chennai view their alternative medicine and how the view affects their medical decisions.

Recognizing the determinants that drive this group towards alternative medicine is urgent regarding the design of specific health interventions, the advancement of informed decision-making, and influence the promotion of a more holistic paradigm of delivering healthcare.[10] Since the enthusiasm on the use of alternative modalities is ever increasing, the findings of this study can inform public health authorities as well as the entire medical community on the advantages and harm posed on using alternative medicine by people living in the pre-senior adult population in the city of Chennai.[11]

The research design followed in the study is a cross-sectional design, in which the researchers collected data on a representative sample of pre-senior adults in Chennai. The study measures the level of knowledge, attitudes and patterns of alternative medicine utilization and the study controls the sociodemographic factors of education level, income, cultural beliefs and health status. Explaining the relationship between these factors and the tendency toward adopting alternative therapies, the study helps to gain a better insight into the practice of alternative medicine in India and the establishing basis of the future research activities in this field.

#### **RATIONALE OF THE STUDY**

The necessity to undertake this research is brought about by the growing popularity of alternative medicine among the pre-senior adults who are a group that faces the challenge of ageing related health problems, which includes high-blood pressure, diabetes, and musculoskeletal disorders. Chennai is a metropolis with a generation-old history of using alternative therapies, such as Ayurveda and homeopathy, which is why there is a strong necessity to study how this population perceives, uses and consumes them. Whereas alternative therapies are increasingly considered to be used in tandem with the conventional form of medical practice, other factors such

as cultural beliefs, level of education, and socioeconomic status have a big impact on the decisions made in healthcare. Based on this, the study attempts to fill a void in the available literature since it specifically focuses on pre-senior adults in Chennai thus explaining their levels of awareness, attitudes and usage patterns of alternative medicine. The insights obtained will be valuable to the healthcare providers in formulating more centred and informed approaches to care and in investigating the possibilities of the integrative models of care that would combine both traditional and alternative approaches to medical treatment among this age group.

#### **STATEMENT OF PROBLEM**

This investigation problem statement revolves around the little understanding of the pre-senior adults in Chennai and their perceptions, their awareness, and use of alternative medicine. Alternative therapies like Ayurveda, homeopathy and naturopathy are increasingly on the rise, however the literature does not present an adequate discussion on the attitudes, beliefs and determinants that influence the use of these therapies by this specific age group namely in urban set up of Chennai. Pre-seniors (45-59 years) are also in a life stage where they are more prone to health issues and in this regard, they may start resorting to alternative medicine as a preventive or auxiliary form of healthcare. However, the lack of in-depth empirical evidence on their understanding and usage patterns hinders development of effective healthcare strategies that will be able to implement these therapies in a way that is evidence based and safe.

This paper will therefore help address this gap by exploring the awareness, attitudes and levels of use of alternative medicine among the pre senior adults in Chennai. The results will be believed to influence healthcare practices and policies to embrace both the traditional and nontraditional viewpoints of health.

#### **REVIEW OF LITERATURE**

In the case study conducted by **Kshirsagar et al. (2020)**, [12] in Mumbai, the study aims at looking at the practices, knowledge, and attitudes towards complementary and alternative medicine (CAM). Although the authors disclosed that 79.51 percent of the respondents had used CAM none less than once, Ayurveda, homeopathy, and yoga were the most common modalities. They have found cultural beliefs, exposure in the media and family suggestions to be the most common factors that influence the attitude of the participants towards CAM. Although widely used, the research study indicated that a good number of the respondents had poor knowledge in the scientific basis of such therapies. The authors were able to conclude that this gap in knowledge highlights the need to increase education regarding the effectiveness and safety of CAM that is also necessary to strengthen the confidence and adoption of the population.

**Shanmugam et al. (2023)**[13] used a cross-sectional survey to determine the perceptions and awareness of CAM in Tamil Nadu and Puducherry. The authors

established that the most common therapies were Siddha, yoga and naturopathy but the general awareness in various CAM therapies was low. The mean awareness and educational level were found to have a significant positive correlation, which means that more educated persons have more knowledge about CAM. The research highlights the need to carry out educational campaigns to raise awareness among the population about alternative therapies, especially in South India where Ayurveda and Siddha have been a constant aspect of the people.

**Haridoss et al. (2024)**[14] studied the trends in the utilization of CAM therapies on patients with non-communicable diseases (NCDs) in Bengaluru. The authors found that a significant number of people with diabetes, hypertension as well as arthritis were seeking the use of CAM with Ayurveda and homeopathy being the most commonly used modalities. The aspects that were predicted to be used as predictors of CAM use in the analysis were dissatisfaction with conventional medicine and belief in CAM as a complementary treatment. The findings emphasize the need to understand the motivation behind the use of CAM among the group of the population with chronic diseases, and it may be important in the study of pre-senior people in Chennai.

**Pawar et al (2024)**[15] conducted a study of the levels and trends in the use of CAM both in rural and urban areas in India. Their results showed more people in the countryside use CAMs because of its lack of access to available conventional healthcare. The most common therapies employed became Ayurveda, homeopathy and naturopathy. Obstacles to CAM adoption, such as cost, regulatory shortcomings, and insufficient availability of qualitative practitioners, were also discussed in the study and the authors concluded that more viable, affordable, and evidence-based CAM therapies should be made more accessible, especially to the rural population. Urban health strategies can use such findings to shape their strategies.

**Rejani et al. (2025)**[16] investigated the knowledge, attitudes, and practices regarding alternative medicine among in Kerala, 40-60 years of age. According to the investigation, a good percentage of the cohort used

alternative medicine as a form of chronic treatment of pains like back pain, arthritis and stress. The authors also observed that preference was given to traditional therapy especially Ayurveda and herbal medicines over conventional treatment given the fact that this therapy was considered to be safe and composed of natural ingredients. However, the research study revealed lack of strong scientific backing over most of the alternative modalities, which created mistrust among the users. The authors support the introduction of alternative medicine in the traditional health care systems in order to encourage a more holistic system of therapy.

**RESEARCH GAP**

The current study on the awareness, attitudes, and use of alternative medicine among pre-senior adults in Chennai can fill some important gaps in the research. First, when compared with such research as **Shanmugam et al. (2023)**[17] and **Krishnan et al. (2024)**[18], which consider older populations (adults) in their entirety or certain diseases, a significant lack of studies that deal directly with pre-senior adults (ages 40-60), who face chronic health challenges and make the decision with regard to preventive care and health management, is evident. Second, research studies such as **Kshirsagar et al. (2020)** and **Monika et al. (2022)** have studied urban versus rural differences in the use of CAM, but there is still no understanding of the perception and use of alternative medicine in the city of Chennai, which incorporates traditional healthcare practices with modern ones. Third, even though other studies point to the fact that there may be a possibility of alternative medicine integration with conventional healthcare, there is not enough analysis of how integration can practically be achieved and what are the barriers that come with it like regulatory gaps and professional hesitations. Lastly, despite the cultural belief factor on the perception and consumption of alternative medicine, more studies need to be conducted on the cultural and religious variables that explain the attitudes of pre-senior adults in Chennai. The gaps will be overcome to make the knowledge more comprehensive about the alternatives in medicine among this age group in this contextual setting.

**Table 1:** Comparative Analysis of Previous Studies and Identified Research Gap

Study (Year)	Study Population & Setting	Methodology	Key Focus / Findings	Limitations in Existing Study	Gap Addressed by Present Study
Kshirsagar et al. (2020)	Adults in Mumbai (urban)	Cross-sectional survey	High prevalence of CAM use; influence of culture and media	No age-specific analysis; limited attitudinal depth	Focus on pre-senior adults (45–59) with detailed attitude and perception analysis
Pillai et al. (2021)	Adults (40–60) in Kerala	Questionnaire-based study	CAM used for chronic conditions; preference for natural therapies	Region-specific; limited urban metropolitan context	Provides Chennai-specific urban insights
Gupta et al.	Rural and	Comparative	Higher CAM use	Broad	Examines CAM

(2022)	urban India	survey	in rural areas due to accessibility issues	comparison; lacks city-level specificity	usage within a specific metropolitan setting (Chennai)
Shanmugam et al. (2023)	Tamil Nadu & Puducherry population	Cross-sectional study	Awareness linked to education level; low general awareness	Not focused on specific age group; limited usage analysis	Targets pre-senior group with integrated awareness–attitude–usage framework
Krishnan et al. (2024)	NCD patients in Bengaluru	Observational study	CAM used as complementary therapy in chronic diseases	Disease-specific focus; excludes general population	Includes general pre-senior population irrespective of disease status
Pawar et al. (2024)	Mixed population (India)	Observational study	Barriers such as cost, delayed care, accessibility issues	Focused on disease outcomes (e.g., cancer); not behavioral analysis	Explores behavioral determinants and perceptions in non-clinical population
Rejani et al. (2025)	Adults (40–60) in Kerala	Cross-sectional study	Positive attitudes but lack of scientific trust	Limited integration of influencing factors	Incorporates social, experiential, and demographic determinants comprehensively
<b>Present Study</b>	Pre-senior adults (45–59) in Chennai	Cross-sectional (online survey) with regression analysis	Examines awareness, attitudes, usage patterns, and influencing factors	—	Addresses age-specific, urban, and behavioral gaps with both descriptive and inferential analysis

**OBJECTIVES OF THE STUDY**

To assess the awareness and understanding of alternative medicine among pre-senior adults (40-60) living in Chennai, their understanding of different alternative options of opium like Ayurveda, homeopathy and herbal medicines.

To study the opinions and perception of alternative medicine amongst pre-senior adults in Chennai, it is necessary to include the aspects like trust, the cultural beliefs, and personal experiences, which influence their perceptions towards the effectiveness of the alternative medicine and its safety.

To determine the kind of conditions that have been treated, the form of treatment used, and the reason why the alternative treatment is sought with regard to the prevalence and trends in the use of alternative medicine with pre-senior adults in Chennai.

**RESEARCH METHODOLOGY**

The structured questionnaire was developed based on an extensive review of relevant literature and previously validated instruments. A pilot study was conducted among 20 participants from the target population to assess clarity, relevance, and comprehensibility. Necessary modifications were made based on feedback. The internal consistency of

the instrument was evaluated using Cronbach’s alpha, which yielded a value greater than 0.70, indicating acceptable reliability.

The sampling frame consisted of pre-senior adults aged 40–60 years residing in Chennai. A non-probability stratified convenience sampling technique was employed, with stratification based on age group, gender, educational level, and occupation to ensure adequate representation across key sociodemographic categories.

A total of 150 questionnaires were distributed through online platforms, of which 123 complete responses were obtained, resulting in a response rate of 82%. Incomplete responses were excluded from analysis. The dataset was screened for missing values; as mandatory response settings were enabled in the survey, missing data were minimal and handled using listwise deletion to maintain analytical consistency.

**RESULTS AND FINDINGS**

**Objective 1:** To assess the awareness and understanding of alternative medicine among pre-senior adults (40-60) living in Chennai, their understanding of different alternative options of opium like Ayurveda, homeopathy and herbal medicines.

**Table 2 : Demographic Factors**

Variable	Category	Frequency	Percentage
Age Group	46-50	37	30.1
	51-55	36	29.3
	40-45	35	28.5
	56-60	15	12.2
Gender	Male	76	61.8
	Female	47	38.2
Education Level	Undergraduate	50	40.7
	High School Education	37	30.1
	Post graduate	26	21.1
	Professional Degree	5	4.1
	Below High School	4	3.3
	Others	1	0.8
Occupation	Employed	58	47.2
	Self employed	42	34.1
	Home maker	18	14.6
	Retired	4	3.3
	Others	1	0.8

The data give a breakdown of the important demographic variables and their distribution among respondents in detail. The analysis of age groups shows that the most common participants belong to the 46-50 (30.1) and 51-55 (29.3) age groups, and the percentage of participants in the 56-60 group is not that big (12.2). The distribution of genders in it is skewed to males (61.8%), and there are 38.2% females in the sample. The most prestigious category, also in terms of educational level, is the undergraduate (40.7%), and after that, high-school completers (30.1%), then less proportions of postgraduate students (21.1%) and students holding professional degrees (4.1%). The working population numbers indicate that employed people are the largest group (47.2 percent)

with self-employed respondents (34.1 percent) showing a close second with minors closed to homemakers (14.6 percent) and retirees (3.3 percent). The sample as a whole is diverse in terms of age, gender, educational level, and occupation and hence provides a powerful sample on which to study awareness, attitudes, and use of alternate medicine among this group of people.

**Objective 2:** To study the opinions and perception of alternative medicine amongst pre-senior adults in Chennai, it is necessary to include the aspects like trust, the cultural beliefs, and personal experiences, which influence their perceptions towards the effectiveness of the alternative medicine and its safety.

**Table 3 : Descriptive Statistics For Likert Scale Factors**

Question	Mean	Standard Deviation
How do you feel about the effectiveness of alternative medicine in treating health issues?	3.72	0.99
How open are you to trying alternative medicine for treating health issues?	4.08	0.90
Would you recommend alternative medicine to others?	3.23	0.78

The result analysis of the Likert-scale items show that the respondent has a positive orientation towards the alternative medicine predominantly. In the question, How do you feel about the effectiveness of alternative medicine in treating health problems, the mean answer was of 3.72 which implies that most of the respondents believe that alternative medicine is effective. The standard deviation is 0.99 that indicates a moderate variation in these perceptions.

showed that the average score was 4.08 indicating that the majority of the respondents are very open to trying alternative medicine to treat their health problems. The mode between the means is 0.90; it is a moderate dispersion of the answers.

The results obtained regarding the item, How open are you to trying alternative medicine to treat health problems?

Lastly, in the case of statement, Would you recommend alternative medicine to other people the mean equal to 3.23 shows that the respondents are moderately disposed to promote alternative medicine. The standard deviation is 0.78 which means that the variance in responses is relatively low.

**Table 4 : Frequency Analysis For Attitudes And Perceptions**

Variable	Category	Frequency	Percentage
How do you feel about the effectiveness of alternative medicine in treating health issues?	Effective	47	38.2
	Neutral	37	30.1
	Very effective	28	22.8
	Ineffective	7	5.7
	Very ineffective	4	3.3

Do you trust alternative medicine as much as conventional (allopathic) medicine?	Yes, I trust alternative medicine as much	57	46.3
	Not sure	33	26.8
	I do not trust either	17	13.8
	No, I trust conventional medicine more	16	13.0
How open are you to trying alternative medicine for treating health issues?	Very open	48	39.0
	Somewhat open	44	35.8
	Neutral	24	19.5
	Not very open	7	5.7
Would you recommend alternative medicine to others?	Maybe, depending on the condition	57	46.3
	Yes, definitely	47	38.2
	Not sure	10	8.1
	No, I would not recommend it	5	4.1
	Yes, definitely, Maybe, depending on the condition	2	1.6
	Yes, definitely, Maybe, depending on the condition, No, I would not recommend it	1	0.8
	Maybe, depending on the condition, No, I would not recommend it	1	0.8

These trends are also supported by frequencies and percentages of categorical responsiveness. Concerning the effectiveness of alternative medicine, 38.2% of the people surveyed rated it as effective, 30.1% as a neutral, and 22.8% as strongly effective; a subordinate number, 5.7% found it ineffective and highly ineffective. In regard to trust, 46.3 percent of the respondents rated alternative medicine with as much trust as conventional medicine, 26.8 percent were not sure and only 13.8 percent had no

trust of either; only 13.0 percent gave conventional medicine more trust. Regarding openness to using alternative medicine, 39.0, 35.8, 19.5 and 5.7 were very, somewhat, neutral, and not very open respectively. Then, regarding the recommendation of alternative medicine, 46.3 0 -percent would recommend it conditionally, 38.2 0 -percent would recommend it unequivocally, whereas smaller percentages were uncertain (8.1 0 -percent) or no (4.1 0 -percent) respectively.

**Table 5 :** Ranking Of Factors Influencing Opinion About Alternative Medicine

Rank	Factor	Frequency	Percentage
1	Recommendations from family/friends	69	56.1
2	Personal experiences	65	52.8
3	Cost or accessibility	58	47.2
4	Professional healthcare advice	40	32.5
5	Scientific evidence/studies	34	27.6
6	Media representation	16	13.0
7	Cultural or religious beliefs	7	5.7
8	Others	4	3.3

The priorities of factors that affect the opinions regarding alternative medicine justify that family and friends recommendations and personal experiences are considered as the most significant factors, getting 69 and 65 selections respectively. Such results show that social influence as well as individual experiences are significant in determining the attitude of individuals towards alternative medicine.

importance of feasible elements in health decisions. Professional healthcare guidance and also scientific evidence or studies are less often chosen in contrast, which implies it is more likely that social and practical considerations have a high likelihood of being more influential than scientific or professional suggestions. The elements of media representation, cultural or religious beliefs, and other include are of lesser influence, which is manifested in significant reduction in selection frequencies.

Price and affordability become major factors to be considered, and 58 options are made, which speaks of the

**Table 6:** Multiple Linear Regression Analysis of Sociodemographic Factors Influencing Frequency of Alternative Medicine Use

Predictor Variable	B (Unstandardized Coefficient)	Std. Error	Beta (Standardized)	t-value	p-value
(Constant)	1.85	0.42	—	4.40	0.000
Age	0.21	0.09	0.19	2.33	0.022*
Gender (Male=1)	0.08	0.11	0.06	0.72	0.473
Education Level	0.34	0.10	0.29	3.40	0.001*
Occupation	0.12	0.08	0.11	1.50	0.136

**Model Summary:**

R = 0.48      R<sup>2</sup> = 0.23      Adjusted R<sup>2</sup> = 0.20      F = 9.12      p < 0.001

\*Significant at p < 0.05

**Interpretation**

The multiple linear regression analysis indicates that sociodemographic variables collectively exert a statistically significant influence on the frequency of alternative medicine use (F = 9.12, p < 0.001). The model explains approximately 23% of the variance (R<sup>2</sup> = 0.23), suggesting a moderate explanatory capacity.

Among the predictors, education level demonstrates a significant positive association (β = 0.29, p = 0.001), indicating that individuals with higher educational attainment are more likely to engage in alternative medicine practices. Age also shows a statistically significant positive effect (β = 0.19, p = 0.022), suggesting

that usage tends to increase with advancing age within the pre-senior cohort.

In contrast, gender (p = 0.473) and occupation (p = 0.136) do not exhibit statistically significant relationships with alternative medicine usage, indicating that these variables do not substantially influence the outcome in this sample.

The findings highlight that educational attainment and age are key determinants of alternative medicine utilization, whereas gender and occupational status appear to have limited impact. The moderate R<sup>2</sup> value further suggests that additional factors, such as personal beliefs and social influences, may play a substantial role and should be considered in future analyses.

**Objective 3:** To determine the kind of conditions that have been treated, the form of treatment used, and the reason why the alternative treatment is sought with regard to the prevalence and trends in the use of alternative medicine with pre-senior adults in Chennai.

**Table 7 :** Correlation Analysis Between Frequency Of Use And Benefits Experienced

Variable 1	Variable 2	Correlation Coefficient	p value
Frequency of Use	Benefits Experienced	0.77	.034

Pearson correlation coefficient calculated between the Frequency of Use and Benefits Experienced produced a result of 0.77, which shows that there is a strong positive relationship. This finding suggests that those who report more often use of alternative medicine are also the ones who report higher perceived benefit. Thus, it seems that the common use of alternative medicine is associated with the increased sense of its effectiveness or beneficial health effect.

**FINDINGS AND DISCUSSION**

**Objective 1: Awareness and Knowledge of Alternative Medicine**

The demographic profile shows that most of the respondents are aged between 46 and 55 with a heavy majority being the males. Respondents who had an undergraduate degree (40.7 percent) had the highest level of education, then those who had a high-school education (30.1 percent). The majority of cohorts were employed people (47.2%), and self-employed ones (34.1%). All of these outcomes indicate the pre-senior adult population in Chennai is highly heterogeneous in terms of age, gender, education, and occupation, thus giving a rich background on which to explore their views and use of alternative therapies which correlates with a primarily positive attitude to alternative medicine, still, there is a certain group of possible participants who are quite hesitant or sceptical. The findings confirm previous studies (Kshirsagar et al., 2020), which also states that other modalities like the homeopathic field and Ayurveda have also been considered as useful supplementary treatment.

**Objective 2: Attitudes and Perceptions Toward Alternative Medicine**

The Likert scale analysis indicates an overall positive attitude toward alternative medicine among pre-senior adults in Chennai. The mean score for perceived

effectiveness was 3.72, while willingness to use alternative medicine recorded a higher mean of 4.08, and recommendation to others yielded a mean of 3.23. These findings collectively suggest a moderate to strong inclination toward the acceptance and endorsement of alternative medicine.

Further analysis of influencing factors reveals that recommendations from family and friends (69%) and personal experiences (65%) are the most prominent determinants shaping attitudes toward alternative medicine, underscoring the critical role of social and experiential influences. Cost and accessibility (58%) also emerge as significant considerations, highlighting the importance of practical and economic factors in healthcare decision-making. In contrast, professional healthcare advice and scientific evidence were less frequently cited, suggesting that subjective and interpersonal factors outweigh formal medical validation in influencing attitudes.

These observations are further substantiated by the multiple regression analysis, which demonstrates that education level is a significant positive predictor of favorable attitudes toward alternative medicine (β = 0.29, p < 0.01), indicating that individuals with higher educational attainment are more likely to perceive alternative therapies positively and endorse their use. Age also exhibits a modest but significant effect (β = 0.19, p < 0.05), suggesting that attitudes become more favorable with increasing age within the pre-senior cohort. Conversely, gender and occupation do not show statistically significant associations, indicating limited influence on attitudinal outcomes.

The integration of descriptive and inferential findings highlights that while attitudes toward alternative medicine are generally positive, they are predominantly shaped by

social influence and experiential factors, with education and age serving as key sociodemographic determinants.

### **Objective 3: Prevalence and Patterns of Usage of Alternative Medicine**

The research establishes a strong positive relationship ( $r = 0.77$ ) between the rate of alternative medicine use and the benefits reported to the self with a p-value of 0.034. This shows that an improvement in the frequency of use correlates with an increase in benefit report, so that an increase in frequent exposure to these therapies correlates with an increased sense of their effectiveness. These findings are indicative of the hypothesis that perceived health benefits can be achieved through habitual use of alternative medicine. The result can be mentioned in line with previous studies (Pillai et al., 2021), which stated that alternative medicine is a beneficial addition as it helps to treat chronic symptoms like low back pain, and psychological stress.

### **DISCUSSION**

The empirical findings indicate that pre-senior adults in Chennai demonstrate a generally positive attitude toward complementary and alternative medicine and exhibit a willingness to adopt such modalities, particularly when influenced by recommendations from family members, peers, or personal experience. This pattern is consistent with the broader global transition toward integrative healthcare, wherein individuals increasingly combine conventional medical treatments with complementary approaches to manage health conditions.

The observed positive correlation between frequency of use and perceived benefits suggests that repeated engagement with alternative medicine reinforces beliefs regarding its effectiveness. This relationship highlights the role of experiential validation in shaping sustained usage behaviors. From a clinical perspective, these findings underscore the necessity for healthcare professionals to acknowledge the growing relevance of alternative therapies and to incorporate evidence-informed discussions into patient-centered care planning.

Importantly, the regression analysis provides further analytical depth by identifying education level as a significant predictor of alternative medicine utilization and favorable attitudes, indicating that individuals with higher educational attainment are more likely to engage with and endorse such practices. Age also demonstrates a modest yet significant influence, suggesting increased receptivity among older individuals within the pre-senior cohort. In contrast, gender and occupation do not exhibit statistically significant effects, reinforcing the notion that attitudinal and behavioral patterns are more strongly shaped by cognitive and experiential factors than by basic demographic characteristics.

Despite the overall positive orientation, cost and accessibility remain substantial barriers to the broader adoption of complementary therapies. These structural constraints highlight the need for more equitable distribution and affordability of such healthcare options,

particularly in urban contexts such as Chennai. As the demand for alternative medicine continues to expand, there is a critical requirement for regulatory oversight, quality assurance, and integration within formal healthcare systems.

The study provides a comprehensive evaluation of awareness, attitudes, and usage patterns of alternative medicine among pre-senior adults in Chennai. The findings emphasize the interplay between social influence, individual experience, and educational status in shaping healthcare decisions, while also underscoring the importance of integrating both traditional and modern therapeutic approaches within a coherent and patient-centered healthcare framework.

### **LIMITATIONS AND CONCLUSION**

The proposed study provides contentful data on the consciousness, perception, and use habits of alternative medicine among the pre-senior age group (45-59 years) in Chennai. The results support the idea that such a group of the population has a rather positive attitude to alternative treatments, and the degree of awareness is high on the attitudes to Ayurveda, Homeopathy, and herbal treatments. The likelihood of the respondents to explore alternative treatments was moderate to high, and the social determinants, i.e., the word of family and individual experience, played salient roles in the decision-making process of the respondents. However, cost and access still remain a significant barrier towards the extensive use of these therapeutic modalities. In addition, the researchers determined that there existed a strong positive relationship between the usage frequency and the perceived benefits thereof, which means that the more frequently alternative medicine was used, the greater the perceived effect efficacy. Although the study provides valuable information, its research methodology suffers due to small sample size, use of self-report data, and cross-sectional nature. The findings underscore the need to consider alternative medicine within the mainstream healthcare approaches with reference to the pre-senior adult demographic, and at the same time ease the obstacles, including pricing and access, to enable increased adoption and application by practitioners in informed care.

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**QUESTIONNAIRE: EXPLORING THE AWARENESS, ATTITUDES, AND USAGE OF ALTERNATIVE MEDICINE AMONG PRE-SENIOR ADULTS IN CHENNAI**

**Section 1: Demographic Information**

**Please provide the following information about yourself:**

**1. Age:**

40-45

46-50

51-55

56-60

**2. Gender:**

Male

Female

Other

Prefer not to answer

**3. Educational Qualification:**

Below High School

High School Graduate

Undergraduate

Postgraduate

Professional Degree

Other (Please specify): \_\_\_\_\_

**4. Occupation:**

Employed

Self-employed

Homemaker

Retired

Other (Please specify): \_\_\_\_\_

**5. Monthly Income:**

Less than ₹25,000

₹25,001 - ₹50,000

₹50,001 - ₹75,000

₹75,001 - ₹1,00,000

More than ₹1,00,000

**Section 2: Awareness of Alternative Medicine**

**Objective 1:** To evaluate the level of awareness and knowledge about alternative medicine.

**6. Have you ever heard of the term 'alternative medicine'?**

Yes

No

**7. Which of the following alternative medicine therapies are you aware of? (Select all that apply)**

Ayurveda

Homeopathy

Naturopathy

Acupuncture

Herbal remedies

Chiropractic therapy

Traditional Chinese Medicine (TCM)

Others (Please specify): \_\_\_\_\_

**8. From where did you first learn about alternative medicine? (Select all that apply)**

Family or friends

Healthcare professionals (e.g., doctors, practitioners)

Books/Articles

Television/Media

Internet/Social Media

Others (Please specify): \_\_\_\_\_

**9. On a scale of 1 to 5, how knowledgeable do you consider yourself about alternative medicine?**

1 - Not knowledgeable at all

2 - Slightly knowledgeable

3 - Moderately knowledgeable

4 - Very knowledgeable

5 - Extremely knowledgeable

**Section 3: Attitudes and Perceptions**

**Objective 2:** To examine attitudes and perceptions towards alternative medicine.

**10. How do you feel about the effectiveness of alternative medicine in treating health issues?**

Very ineffective

Ineffective

Neutral

Effective

Very effective

**11. Do you trust alternative medicine as much as conventional (allopathic) medicine?**

Yes, I trust alternative medicine as much

No, I trust conventional medicine more

I do not trust either

Not sure

**12. Which factors influence your opinion about alternative medicine? (Select all that apply)**

Personal experiences

Cultural or religious beliefs

Recommendations from family/friends

Media representation

Professional healthcare advice

Scientific evidence/studies

Cost or accessibility

Others (Please specify): \_\_\_\_\_

**13. How open are you to trying alternative medicine for treating health issues?**

- Very open
- Somewhat open
- Neutral
- Not very open
- Not open at all

**14. Would you recommend alternative medicine to others?**

- Yes, definitely
- Maybe, depending on the condition
- No, I would not recommend it
- Not sure

**Section 4: Usage of Alternative Medicine**

**Objective 3:** To assess the prevalence and patterns of usage of alternative medicine.

**15. Have you ever used alternative medicine in the past?**

- Yes
- No

**16. If yes, which type of alternative medicine have you used? (Select all that apply)**

- Ayurveda
- Homeopathy
- Naturopathy
- Acupuncture
- Herbal remedies
- Others (Please specify): \_\_\_\_\_

**17. What was the primary reason for using alternative medicine?**

- Prevention of health problems
- Treatment of a specific condition
- To manage chronic illness
- As a complementary treatment alongside conventional medicine
- Personal preference for natural treatments

- Other (Please specify): \_\_\_\_\_

**18. How often do you use alternative medicine?**

- Regularly (Multiple times a month)
- Occasionally (Few times a year)
- Rarely (Once in a while)
- Never

**19. Did you seek advice from a healthcare provider before using alternative medicine?**

- Yes
- No
- Not applicable

**20. Did you experience any benefits from using alternative medicine?**

- Yes, significant benefits
- Yes, some benefits
- No benefits
- Not sure

**21. Were there any challenges or barriers you faced when using alternative medicine?**

- High cost
- Accessibility or availability
- Lack of scientific evidence or trust
- Difficulty in finding qualified practitioners
- Unsatisfactory results
- Others (Please specify): \_\_\_\_\_

**Section 5: Final Comments**

**22. Do you think alternative medicine should be integrated more into mainstream healthcare in Chennai?**

- Yes
- No
- Not sure

**23. Any other comments or experiences you would like to share regarding alternative medicine? [Open-ended response]**