



Understanding the Experiences of Chronic Disease Survivors in Using Herbal Medicines as an Alternative Treatment Approach in the context of rural communities in Indonesia

Sakinah Siregar

universitas islam sumatera utara, Indonesia

sakinahsiregar95@gmail.com

Article Info

Article history:

Received 21-01-2025

Revised 09-02-2025

Accepted 16-02-2025

Keyword:

Herbal Medicine; Patient Experiences; Chronic Illness; Natural Remedies; Health Alternatives.

ABSTRACT

Herbal medicine has gained global attention as a complementary approach to managing chronic illnesses, offering a natural alternative to conventional treatments. While its biochemical efficacy has been studied extensively, little is known about the subjective experiences and cultural contexts influencing patients' use of herbal remedies. This study addresses this gap by exploring the lived experiences of individuals managing chronic illnesses through herbal medicine, focusing on their motivations, challenges, and sociocultural influences. Using a phenomenological approach, the study captures the depth of participants' perspectives, providing insights into the interplay of personal beliefs, cultural norms, and healthcare decisions. Data were collected through in-depth interviews with 12 participants from diverse sociocultural backgrounds, and thematic analysis revealed three key themes: the role of trust in natural remedies, the influence of family and community, and challenges in accessing quality herbal products. These findings have important practical implications for healthcare policies, particularly in integrating alternative medicine into mainstream healthcare systems. Policymakers should consider fostering greater collaboration between conventional healthcare providers and herbal medicine practitioners to ensure safe and informed use of herbal treatments. Additionally, addressing issues related to the regulation and accessibility of quality herbal products can enhance patient outcomes and promote more holistic healthcare approaches. These findings highlight the importance of cultural and social factors in shaping health behaviors, emphasizing the need for patient-centered approaches in healthcare policies and interventions. By uncovering the essence of patients' experiences, this research contributes to a more holistic understanding of alternative medicine and lays the groundwork for future studies exploring diverse cultural contexts and integrated healthcare models.



©2024 Authors. Published by PT Mukhlisina Revolution Center.. This work is licensed under a Creative Commons Attribution-NonCommercial 4.0 International License. (<https://creativecommons.org/licenses/by/4.0/>)

INTRODUCTION

The use of herbal medicine as an alternative treatment has gained considerable attention globally, particularly among individuals managing chronic illnesses (Chacko, 2003). As chronic conditions such as diabetes, hypertension, and arthritis require long-term management, patients often seek complementary approaches to mitigate the limitations and side effects of conventional pharmaceuticals. Herbal medicine, rooted in centuries of traditional practices, offers a perceived natural and holistic approach to health that aligns with cultural beliefs and personal values. This growing trend highlights the intersection of traditional knowledge and modern healthcare needs.

Despite the increasing adoption of herbal medicine, the subjective experiences of individuals who turn to this approach remain underexplored. Previous studies have predominantly focused on the biochemical efficacy and safety of herbal treatments, often emphasizing quantitative analyses over the lived realities of patients. These investigations, while valuable, fail to capture the nuanced motivations, challenges, and socio-cultural dynamics that influence patients' choices. Understanding

these experiences is essential for providing a more holistic perspective on the role of herbal medicine in chronic disease management.

Existing literature underscores the influence of cultural and social contexts on health-related decisions. For instance, the integration of family and community beliefs in health practices significantly impacts the acceptance and use of herbal remedies. Yet, there remains a need for research that delves into the personal narratives of patients, illuminating the deeper meanings and implications of their reliance on herbal medicine. By adopting a phenomenological approach, this study aims to bridge this gap by uncovering the subjective realities of individuals navigating chronic illnesses through herbal treatments, offering insights into the interplay of personal agency, cultural values, and healthcare alternatives.

Research into the lived experiences of individuals managing chronic illnesses has emerged as a crucial area of inquiry, particularly in understanding how alternative treatments like herbal medicine influence patients' lives (Cooper dkk., 2022). This focus is essential because the subjective dimensions of health-related decisions often transcend biomedical outcomes, encompassing cultural, social, and psychological factors. However, exploring these nuanced experiences presents significant methodological challenges.

Traditional approaches to studying health behaviors frequently rely on quantitative methods that prioritize generalizability over depth. While such methods offer valuable statistical insights, they often fall short of capturing the rich, subjective realities of individuals navigating complex health journeys. For example, structured questionnaires may document broad trends in herbal medicine use but cannot fully illuminate the deeply personal motivations and cultural meanings underlying these choices. These limitations underscore the inadequacy of conventional research paradigms in addressing the essence of such phenomena.

Phenomenology, with its emphasis on uncovering the meaning of lived experiences, offers a robust framework for overcoming these challenges. By focusing on the first-person perspectives of patients, this approach facilitates a deeper understanding of how individuals perceive and interpret their experiences with herbal medicine. In doing so, it addresses critical gaps left by previous research methods, enabling a more comprehensive exploration of the interplay between personal agency, cultural influences, and the perceived efficacy of alternative treatments.

Existing approaches to understanding patients' use of herbal medicine primarily focus on practical outcomes, such as the biochemical efficacy of herbal remedies or their integration into healthcare systems (Coyle dkk., 2020). While these studies provide valuable insights into the functional aspects of herbal medicine, they often neglect the subjective and experiential dimensions that shape patients' decisions and perceptions. This reliance on practical, outcome-driven methodologies has led to an incomplete understanding of the holistic nature of the phenomenon.

Quantitative methods, widely used in previous research, fail to capture the depth of patients' lived experiences, particularly the interplay between cultural beliefs, social contexts, and personal agency. Such approaches often reduce complex human experiences to measurable variables, overlooking the rich meanings and nuanced motivations that drive patients to choose herbal medicine as an alternative treatment. This gap in the literature leaves critical questions unanswered, including how patients perceive the efficacy of herbal remedies, what challenges they face in adopting such treatments, and how their social and cultural environments influence their health-related choices.

To address these limitations, a phenomenological approach offers a promising alternative. By prioritizing patients' subjective experiences, this methodology enables researchers to uncover the essence of their interactions with herbal medicine (Crone & Wise, 1997). This study seeks to bridge the identified gaps by adopting a phenomenological lens to explore the deeper meanings and lived realities of individuals managing chronic illnesses through herbal treatments, providing a more comprehensive and holistic understanding of the phenomenon.

Previous research has explored the use of herbal medicine from various perspectives, including its efficacy, safety, and integration into healthcare systems. However, studies that focus on the subjective experiences of patients remain limited. Existing literature highlights the importance of

cultural and social factors in shaping health-related decisions, but these elements are often treated as secondary to clinical outcomes. Theories of holistic health and patient-centered care emphasize the value of understanding individual perspectives, yet the experiential aspects of using herbal medicine in chronic disease management remain underexplored. This study builds on these insights by adopting a phenomenological approach to uncover the lived realities of patients using herbal treatments.

The phenomenological approach chosen for this study prioritizes the exploration of meaning and experience as perceived by the participants (Ernst & Pittler, 1999). This methodology is particularly suited to addressing the limitations identified in prior research, offering a deeper understanding of the interplay between personal, cultural, and social influences on health behaviors. Through interpretative phenomenological analysis (IPA), this study aims to answer critical questions about how patients perceive and experience the use of herbal medicine in managing chronic illnesses. This approach ensures that the complexity of their experiences is not only documented but also interpreted within the broader context of their lives.

This article is organized into several sections. The introduction establishes the relevance of the study and presents the knowledge gap that this research addresses. The next section contextualizes the phenomenon under investigation, detailing the theoretical and cultural frameworks that inform the study. The methods section outlines the phenomenological approach and the processes used for data collection and analysis. The results present themes derived from the data, which are then discussed in relation to existing literature in the discussion section. The article concludes by summarizing the findings and their implications for research, policy, and practice in the field of herbal medicine.

RESEARCH METHODS

Study Design

This study employed a phenomenological approach to explore the subjective experiences of individuals living with chronic illnesses who use herbal medicine as an alternative treatment (Frenkel dkk., 2013). Phenomenology was chosen due to its focus on understanding the lived experiences of participants and uncovering the underlying meaning of phenomena within their social and cultural contexts. By emphasizing the subjective perspectives of individuals, this approach allowed for an in-depth exploration of motivations, challenges, and cultural influences associated with the use of herbal medicine. An interpretative phenomenological analysis (IPA) was utilized, which is particularly suited for examining how individuals make sense of their personal and social worlds. This approach involved a dual process of understanding participants' experiences and interpreting their meanings.

Participants

Participants in this study were adults diagnosed with chronic illnesses, such as diabetes, hypertension, or arthritis, who had been using herbal medicine for at least six months. Inclusion criteria required that participants be willing to share detailed accounts of their experiences, provide informed consent, and represent diverse sociocultural backgrounds (Gaul dkk., 2011). Exclusion criteria included individuals with no prior experience using herbal medicine or those unwilling to participate in interviews. Participants were recruited through a combination of direct outreach and referral methods. Specifically, recruitment was conducted in collaboration with community health centers, traditional medicine practitioners, and patient support groups. Additionally, a snowball sampling technique was employed, wherein initial participants referred others who met the study criteria. These strategies ensured access to individuals with rich experiential knowledge of herbal medicine use in chronic illness management.

Participants were selected using purposive sampling to ensure a variety of perspectives reflective of different social, cultural, and economic contexts. A total of 12 participants, aged between 35 and 65 years, were included. This sample size was determined based on thematic saturation, which was assessed iteratively during data collection and analysis. Saturation was reached when no new

themes or significant variations emerged from the data, indicating that additional interviews would likely yield redundant insights. Prior qualitative studies utilizing phenomenological methods have similarly found that 10 to 15 participants are generally sufficient to achieve thematic depth (Guest, Bunce, & Johnson, 2006). The group consisted of 7 women and 5 men, with an average age of 50 years, providing a balanced representation across genders..

Data Collection

Data were collected through semi-structured, in-depth interviews conducted in a setting chosen by the participants to ensure their comfort and privacy (Gill dkk., 1994). Interviews were guided by a flexible protocol that included open-ended questions designed to elicit detailed narratives about participants' experiences with herbal medicine. Example prompts included, "Can you describe your journey with herbal medicine?" and "What factors influenced your decision to use herbal remedies?" The interviews lasted between 45 and 90 minutes and were audio-recorded with participants' consent. Observational notes were also taken to capture non-verbal cues and contextual details. Data collection took place over three months and adhered to protocols that ensured a supportive and non-judgmental environment.

Data Analysis

Data were analyzed using thematic analysis within the framework of interpretative phenomenology. Transcriptions of interviews were carefully reviewed and coded to identify significant statements and recurring patterns (Han dkk., 2015). A systematic approach was followed, beginning with the identification of initial codes and progressing to the development of broader themes that captured the essence of participants' experiences. Themes were refined through iterative comparison with the raw data to ensure alignment with participants' narratives. Software tools, such as NVivo, were used to organize and manage data but did not influence the interpretative process. The final themes emerged as a synthesis of participants' lived experiences, providing insights into their motivations, challenges, and cultural influences in using herbal medicine.

Ethics

Ethical approval for this study was obtained from the relevant institutional review board prior to data collection. Participants were provided with detailed information about the study's purpose, procedures, and potential risks before voluntarily consenting to participate (Ibrahim dkk., 2016). Written informed consent was obtained from all participants, ensuring they understood their rights, including the ability to withdraw from the study at any time without repercussions. Anonymity was maintained by assigning pseudonyms to participants, and all data were stored securely to protect confidentiality. The study adhered to ethical guidelines outlined by the Declaration of Helsinki and relevant local regulations.

RESULTS AND DISCUSSION

Initial Motivations for Using Herbal Medicine

Participants revealed that their decision to adopt herbal medicine was deeply rooted in a combination of personal beliefs, dissatisfaction with conventional treatments, and familial influences. Many expressed a preference for natural remedies due to their perceived safety and minimal side effects. One participant shared, "I feel more comfortable using natural ingredients; the side effects are almost nonexistent compared to chemical drugs. My grandmother always told me that nature provides everything we need." This sentiment was echoed by others who viewed herbal medicine as a safer alternative, particularly when faced with adverse effects from conventional pharmaceuticals.

Family and community recommendations were pivotal in shaping these choices. A participant recounted, "My mother and aunts always used herbal remedies, so when my condition worsened, they

suggested I try the same.” These narratives underscore the significant role of social connections in guiding health-related decisions.

Positive Experiences and Challenges in Using Herbal Medicine

While several participants reported noticeable improvements in their health, others highlighted the challenges of adopting herbal medicine. For many, the sense of empowerment and control over their treatment was a recurring theme. “Using herbal remedies gives me hope and a sense that I am actively taking care of myself,” one participant remarked. This sense of agency was a powerful motivator, especially for those who had grown disillusioned with conventional treatments.

However, logistical and informational barriers often hindered their experiences. Participants described difficulties in sourcing authentic, high-quality herbal products. One lamented, “It’s hard to find herbs that are genuine and effective. Sometimes I feel like I’m taking a risk.” Economic constraints also posed challenges, particularly for participants from lower-income households. Observations revealed that some participants resorted to preparing their remedies at home, often based on traditional recipes passed down through generations. Despite these challenges, the dedication to maintaining health through herbal remedies remained unwavering.

The Influence of Cultural and Social Contexts

The use of herbal medicine was deeply embedded in cultural beliefs and practices. Participants described how their trust in traditional remedies was reinforced by local customs and familial traditions. “In our community, herbal remedies are not just medicine; they are a way of life,” one participant explained. This cultural alignment created a strong sense of legitimacy and trust in herbal medicine, often surpassing their faith in conventional medical systems.

The role of family and community was particularly salient, with participants frequently relying on shared knowledge and collective experiences. Observations confirmed that these practices were often interwoven with daily life, from sourcing ingredients in local markets to preparing remedies in household settings. These activities fostered a sense of connection and continuity, reinforcing the social and cultural value of herbal medicine.

The findings illustrate that participants’ experiences with herbal medicine are deeply shaped by personal, social, and cultural contexts. Their motivations stem from a blend of trust in natural remedies, dissatisfaction with conventional treatments, and familial influences. While the use of herbal medicine provides a sense of empowerment and connection to cultural traditions, it is not without challenges, including limited access to quality products and economic constraints. The essence of this phenomenon lies in the intersection of individual agency, community support, and cultural heritage, which collectively define the lived experiences of chronic disease patients using herbal medicine.

Key Findings

This study reveals that the use of herbal medicine by patients with chronic illnesses is deeply rooted in personal beliefs, cultural influences, and the desire for greater agency in their healthcare decisions (Li & Wang, 2005). The findings highlight the complex interplay between social, cultural, and individual factors, addressing the overarching research question on how patients perceive and experience herbal medicine as an alternative treatment.

Contribution to Research Questions

The results of this study provide significant insights into the motivations, challenges, and social contexts that shape patients’ choices to use herbal medicine. Participants’ narratives emphasize the role of trust in natural remedies and the dissatisfaction with conventional medicine as key motivators (Little, 2009). These findings address the first research question by illustrating how patients’ subjective experiences are influenced by a combination of intrinsic beliefs and external cultural pressures. Additionally, the challenges reported—such as difficulties in accessing high-quality herbal products and the financial burden—shed light on the broader systemic and logistical barriers. In response to the second research question, the study demonstrates that cultural norms and

family influences profoundly affect patients' perceptions of herbal medicine, underscoring the relevance of social and cultural contexts in shaping health-related behaviors.

Relationship to Existing Literature and Theory

These findings align with existing research emphasizing the role of cultural and social determinants in shaping health behaviors. For instance, previous studies on patient-centered care have highlighted the importance of integrating cultural beliefs into treatment plans, reinforcing the idea that healthcare decisions are not solely based on clinical efficacy but also on perceived alignment with personal and cultural values (Ljubenic dkk., 2018). The results also complement theories of holistic health, which advocate for an understanding of patients' experiences beyond their physical symptoms. However, this study expands on these perspectives by providing a phenomenological lens, which captures the nuanced and deeply personal dimensions of using herbal medicine. Unlike studies that focus solely on measurable outcomes, this research adds depth to the understanding of patients' lived experiences, bridging gaps in the existing literature.

Implications of the Findings

The findings of this study hold significant implications for both scientific and practical domains (Mendoza dkk., 2022). From a scientific perspective, the insights highlight the need for healthcare models that integrate cultural and individual preferences, particularly for populations with deep-rooted traditions in herbal medicine. Understanding the lived experiences of patients provides valuable guidance for clinicians and policymakers in tailoring health interventions that respect cultural values and promote patient autonomy. Socially and culturally, the study underscores the importance of community and family influences in shaping health decisions, suggesting that public health campaigns should consider these dynamics to enhance their effectiveness. Practically, the results indicate a demand for improved access to authentic and high-quality herbal products, as well as educational programs that empower patients to make informed decisions about alternative treatments.

Study Limitations

Despite its contributions, this study has several limitations that warrant discussion. First, the qualitative and phenomenological design inherently limits the generalizability of the findings to broader populations (Pumthong dkk., 2015). The study's reliance on purposive sampling, while suitable for capturing diverse experiences, may not fully represent all demographics of chronic illness patients using herbal medicine. Second, the cultural specificity of the participants may limit the applicability of the findings to regions or populations with different cultural traditions and healthcare systems. Lastly, the study relied on self-reported data, which may introduce recall bias or the influence of social desirability on participants' narratives. These limitations should be considered when interpreting the results and planning future research.

Directions for Future Research

The findings of this study open several avenues for further investigation. Future research could explore the experiences of different demographic groups or cultural settings to examine whether the themes identified in this study are consistent across varied populations. Additionally, studies incorporating mixed methods could provide a more comprehensive understanding of the phenomenon by combining the depth of qualitative insights with the breadth of quantitative data. Investigating the long-term outcomes of integrating herbal medicine with conventional treatments could also provide valuable evidence for developing more holistic healthcare models. Finally, research into the role of education and community programs in enhancing patients' knowledge and access to herbal medicine could further advance the practical applications of these findings.

CONCLUSION

This study explored the lived experiences of patients with chronic illnesses who use herbal medicine as an alternative treatment, addressing the gap in understanding the subjective and cultural

dimensions of this phenomenon. The findings revealed that personal beliefs, cultural influences, and the desire for greater agency significantly shape patients' motivations and perceptions of herbal medicine. Challenges such as access to high-quality products and financial constraints also emerged, highlighting systemic barriers to its effective use. By adopting a phenomenological approach, this study provides a nuanced understanding of how patients navigate the interplay of cultural, social, and personal factors in their healthcare decisions, filling critical gaps left by previous research. These findings can inform healthcare practices by emphasizing the importance of cultural sensitivity and patient autonomy when designing treatment plans for patients using herbal medicine. Additionally, healthcare professionals could be trained to recognize and address the barriers, such as financial constraints and access to quality products, that impact the use of herbal treatments. These insights not only deepen our comprehension of alternative medicine but also offer practical guidance for improving patient-centered healthcare models. Future research could expand on these findings by exploring different cultural contexts or integrating mixed-methods approaches to provide a broader understanding of the long-term implications of herbal medicine use.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

REFERENCES

- Chacko, E. (2003). Culture and therapy: Complementary strategies for the treatment of type-2 diabetes in an urban setting in Kerala, India. *Social Science and Medicine*, 56(5), 1087–1098. Scopus. [https://doi.org/10.1016/S0277-9536\(02\)00105-3](https://doi.org/10.1016/S0277-9536(02)00105-3)
- Cooper, T. E., Teng, C., Howell, M., Teixeira-Pinto, A., Jaure, A., & Wong, G. (2022). D-mannose for preventing and treating urinary tract infections. *Cochrane Database of Systematic Reviews*, 2022(8). Scopus. <https://doi.org/10.1002/14651858.CD013608.pub2>
- Coyle, M. E., Yu, J. J., Zhang, A. L., Jones, L., Xue, C. C., & Lu, C. (2020). Patient experiences of using Chinese herbal medicine for psoriasis vulgaris and chronic urticaria: A qualitative study. *Journal of Dermatological Treatment*, 31(4), 352–358. Scopus. <https://doi.org/10.1080/09546634.2019.1591580>
- Crone, C. C., & Wise, T. N. (1997). Survey of alternative medicine use among organ transplant patients. *Journal of Transplant Coordination*, 7(3), 123–130. Scopus. <https://doi.org/10.7182/prtr.1.7.3.j651880137772172>
- Ernst, E., & Pittler, M. H. (1999). Experts' opinions on complementary/alternative therapies for low back pain. *Journal of Manipulative and Physiological Therapeutics*, 22(2), 87–90. Scopus. [https://doi.org/10.1016/S0161-4754\(99\)70112-0](https://doi.org/10.1016/S0161-4754(99)70112-0)
- Frenkel, M., Abrams, D. I., Ladas, E. J., Deng, G., Hardy, M., Capodice, J. L., Winegardner, M. F., Gubili, J. K., Yeung, K. S., Kussmann, H., & Block, K. I. (2013). Integrating dietary supplements into cancer care. *Integrative Cancer Therapies*, 12(5), 369–384. Scopus. <https://doi.org/10.1177/1534735412473642>
- Gaul, C., Schmidt, T., Czaja, E., Eismann, R., & Zierz, S. (2011). Attitudes towards complementary and alternative medicine in chronic pain syndromes: A questionnaire-based comparison between primary headache and low back pain. *BMC Complementary and Alternative Medicine*, 11. Scopus. <https://doi.org/10.1186/1472-6882-11-89>
- Gill, G. V., Redmond, S., Garratt, F., & Paisey, R. (1994). Diabetes and Alternative Medicine: Cause for Concern. *Diabetic Medicine*, 11(2), 210–213. Scopus. <https://doi.org/10.1111/j.1464-5491.1994.tb02022.x>

- Han, M., Sung, Y.-K., Cho, S.-K., Kim, D., Won, S., Choi, C.-B., Bang, S.-Y., Cha, H.-S., Choe, J.-Y., Chung, W. T., Hong, S.-J., Jun, J.-B., Jung, Y. O., Kim, S.-K., Kim, T.-H., Koh, E., Lee, H.-S., Lee, J., Lee, J.-H., ... Bae, S.-C. (2015). Factors associated with the use of complementary and alternative medicine for Korean patients with rheumatoid arthritis. *Journal of Rheumatology*, 42(11), 2075–2081. Scopus. <https://doi.org/10.3899/jrheum.141447>
- Ibrahim, I., Hassali, M., Saleem, F., & Al Tukmagi, H. (2016). A qualitative insight on complementary and alternative medicines used by hypertensive patients. *Journal of Pharmacy and Bioallied Sciences*, 8(4), 284–288. Scopus. <https://doi.org/10.4103/0975-7406.199349>
- Li, X., & Wang, H. (2005). Chinese herbal medicine in the treatment of chronic kidney disease. *Advances in Chronic Kidney Disease*, 12(3), 276–281. Scopus. <https://doi.org/10.1016/j.ackd.2005.03.007>
- Little, C. V. (2009). Simply because it works better: Exploring motives for the use of medical herbalism in contemporary U.K. health care. *Complementary Therapies in Medicine*, 17(5–6), 300–308. Scopus. <https://doi.org/10.1016/j.ctim.2009.08.001>
- Ljubenic, M., Lazarevic, V., Golubovic, M., & Binic, I. (2018). Integrative Approach to Psoriasis Vulgaris. *Holistic Nursing Practice*, 32(3), 133–139. Scopus. <https://doi.org/10.1097/HNP.0000000000000180>
- Mendoza, J. A., Lasco, G., Renedo, A., Palileo-Villanueva, L., Seguin, M., Palafox, B., Amit, A. M. L., Pepito, V., McKee, M., & Balabanova, D. (2022). (De)constructing ‘therapeutic itineraries’ of hypertension care: A qualitative study in the Philippines. *Social Science and Medicine*, 300. Scopus. <https://doi.org/10.1016/j.socscimed.2021.114570>
- Pumthong, G., Nathason, A., Tuseewan, M., Pinthong, P., Klangprapun, S., Thepsuriyanon, D., & Kotta, P. (2015). Complementary and alternative medicines for diabetes mellitus management in ASEAN countries. *Complementary Therapies in Medicine*, 23(4), 617–625. Scopus. <https://doi.org/10.1016/j.ctim.2015.01.016>