

ALTERNATIVE MEDICINE SERVICES: THE STUDY OF CHANGING NORMS FOR NEW HEALTHCARE OPTIONS FROM PAST TO PRESENT FOCUSING ON THAI CITIZENS IN CHANTHABURI PROVINCE

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Abstract

This research aims to study the decisions of Chanthaburi citizens in opting for alternative medicine services. A questionnaire is used as a data collection tool with 400 samples from the overall population that undertook alternative medicine services in Chanthaburi. The researchers have applied descriptive statistics for population data while using inferential statistic for analysing the data includes independent sample t-test, One-way ANOVA and multiple regression analysis. The research has found that variables such as gender, occupation, and the exercise of rights to receive services at the hospital (the first location to use the rights) have differently affected the decision to use alternative medicine services. Moreover, perceived service quality in terms of tangibility of the services, reliability, responsiveness toward patients, confidence in the service standard and care & empathy for the patients has an effect on factors influencing the decisions to use alternative medicine services at the significant level as of 0.05. As a result, it is recommended that the practice units of alternative medicine services should place emphasis on building greater trust with patients to answer to the needs of this new generation's healthcare trend that aims for a happy and healthy life through modern alternative medicine services.

Keywords: Alternative Medicine Services, Service Quality, Healthcare

Introduction

Currently, alternative medicine is an unconventional medicine which is opposed to the conventional or mainstream medicine. It is a result of synthesizing medical knowledge and every dimension of biological knowledge from both human and non-human living things. On the other hand, alternative healthcare / alternative medicine is the synergy of various arts and sciences in maintaining and caring for today human's health and well-being. This alternative approach has gradually gained its momentum and garnered more interests from both public and private hospitals. Its popularity has also been fostered by the competition among different medical innovations, and all of which are considered as "an option" with its own strengths and weaknesses. In fact, the World Health Organization (WHO) has also stressed the potential of each medical approach that can work in compliment with each other on the part that one lacks or can be applied together to build a sustaining good health and well-being for the general public (Kasekarma, P., 2008).

The current 20-year National Strategic Plan in Public Health, the first amended issue (2019) as well as other strategic and master plans that are relevant to Thai and alternative medicine have outlined the benefits that our citizens and country will be receiving throughout the first 5 years under this 20-year National Strategic Plan. More importantly, today is the time to make major changes to various systems and infrastructure focusing on rectifying our weaknesses and leveraging our strengths to create new innovations for added economic value and ultimately achieving the country's vision of "Stability, Prosperity, and Sustainability". This could be accomplished by applying our late King's Philosophy into practice to drive the use of Thai medicine, folk medical knowledge, alternative medicine and local herbs toward improving the Thai citizens' quality of life and generating added economic value for the country in the future (Technical and Planning Division Department of Thai Traditional and Alternative Medicine, 2018).

Furthermore, Thailand 4.0 is a policy and a vision to drive our economy through the creation of technology and innovations for stability, prosperity and sustainability of the country by following the Philosophy of Sufficiency Economy. In particular, the development of alternative medicine and herbal usages is an important tool that can drive our value-based economy and enable the improvement toward high value services, thereby creating the New S-curve industry of the country. In the next 20 years, Thailand aims for the increase of herbal products' value from 1.8 hundred billion THB to 1.21 – 2.95 trillion THB or an expected growth rate of 10 – 15% (National Institute of Development Administration, 2015).

Chanthaburi is another province that encourages physical and mental healthcare using Thai or alternative medicine. This can be considered as the full-spectrum holistic healthcare in all 4 dimensions includes promote, prevent, cure and restore. There are multiple complementary medicines that can be selected and applied such as Thai, Chinese, Ayurveda, Homeopathy, Physical and Mental therapy including meditation, yoga, and Qi Gong as well as the biochemical therapy using natural chemical through eating, applying, smelling, injecting, tucking and using stream, and these processes

will use herbal and vitamin or healthy food as the therapy or using operative treatments such as massage, re-arrangement, and chiropractic.

Due to these available multiple options, the researchers decided to study the decision-making process in undertaking alternative medicine services of Chanthaburi citizens to set up organizational development guideline for alternative medicine practice units in Thailand. The researchers hope that this research can generate healthcare services that can answer to patients' needs and also prepare us toward providing alternative medicine services on the international level.

Research Objectives:

1. To study Chanthaburi citizen's behaviours in undertaking alternative medicine services.
2. To study the factors that affect Chanthaburi citizens' decisions in undertaking alternative medicine services.
3. To study Chanthaburi citizens' perceived quality of alternative medicine services.

Research Framework

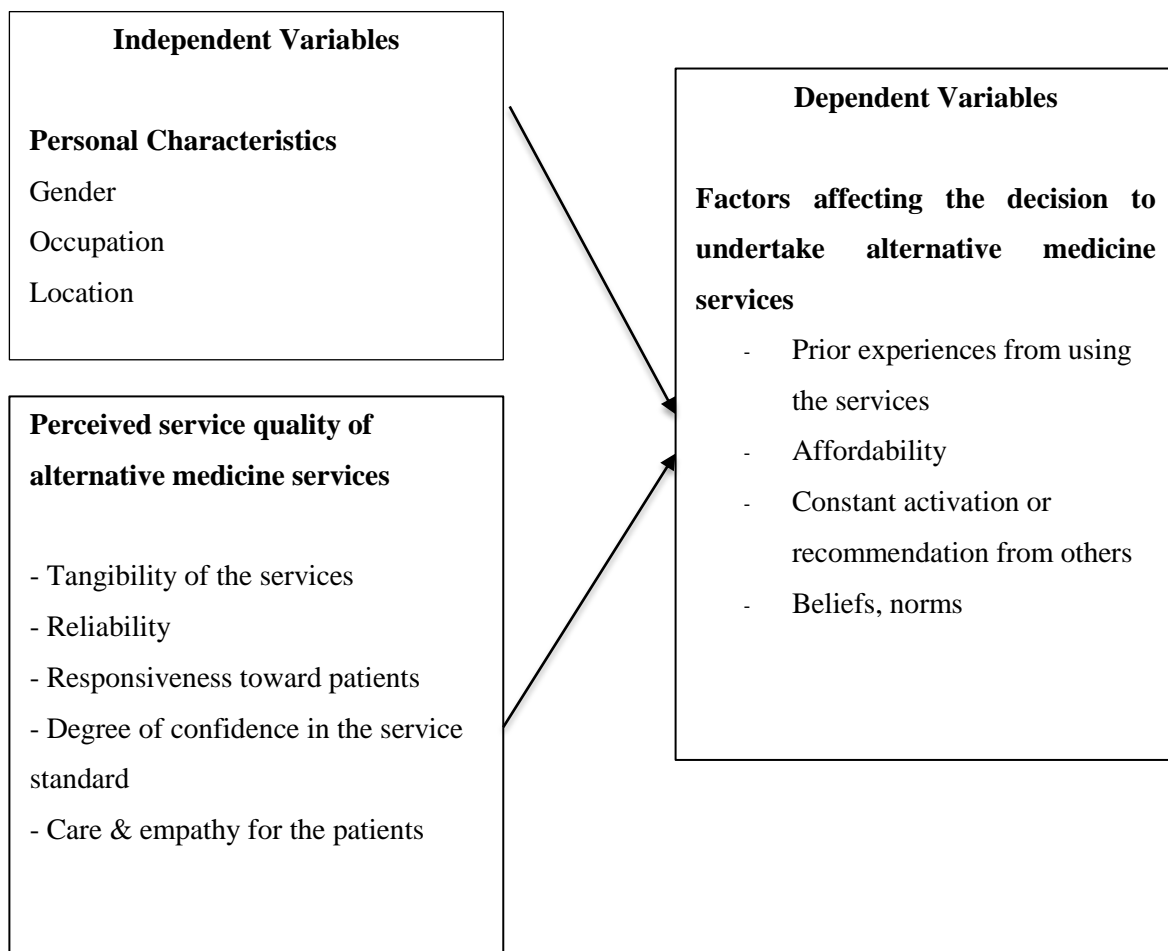


Figure 1 Research Framework

Hypotheses

Hypothesis 1 Different personal characteristics including gender, occupation and location can lead to different decisions on the use of alternative medicine services.

Hypothesis 2 Perceived service quality of alternative medicine services affect factors affecting the decision to undertake alternative medicine services

Literature Reviews

Alternative Medicine

Complementary and alternative medicine (CAM) refers to a group of medical operations systems and medical products as well as other healthcare options that are excluded from conventional medicine (Cungsathiensup, K. & Tantipitaka, Y., 2007). Besides, CAM also refers to the process of taking care of health and well-being that are not part of the normal national medical approach as well as not related with the mainstream healthcare approach of such country, thus people sometimes refer to this medical approach as Natural, Holistic or Non-conventional Medicine (Thai Traditional and Alternative Medicine, 2011).

Concept of Alternative Medicine

1. It follows the same principle of holistic medicine that focuses on every element of human, which recognized both mind and body as a whole and gives emphasis on the overall well-being of human and nature. The word “healthy” in alternative medicine is not only being free from diseases but also creating balance among the body’s systems. Thus, this will lead to effective immune system that can counter to anything that is harmful to life. If the immune system is malfunctioned or not fully functioned, the interfering factors can lead to illness and death.

2. The concept of alternative medicine has changed our role of behaviours toward healthcare/selfcare from “reactive” to “proactive”. People no longer need to wait until they fall sick, but they need to constantly take care of their health to prevent illnesses. This kind of concepts is opposed to conventional medicine. Moreover, some treatments and therapies from alternative medicine that are effective might not be able to pinpoint the root cause or may be difficult to scientifically prove its procedure and effectiveness such as leveraging the power of the Universe, meditation and more. Consequently, alternative medicine is not widely accepted in the world of conventional medicine.

Reasons behind the Adoption of Alternative Medicine

1. Conventional medicine is rooted from different kinds of traditional medicine. However, it has been systematically and constantly developed through scientific procedures over hundreds of years that it is proven and accepted as a safe medical approach. Nonetheless, any kind of medical approach may be effective for a population of one country, but it might not work as well on others due

to many factors involved. Nowadays, conventional or scientific medicine has been abandoned by some people as they are more willing to be treated with alternative medicine.

2. Conventional medicine has to rely on antibiotic for some chronic diseases and need lengthy period of treatments which can lead to side effects. In contrast, alternative medicine does not require patient to take medicine/chemical substance but rather rely on other types of treatments such as yoga, Qi Gong, massage or taking some herbs, which can greatly reduce chemical intake with no side effect as opposed to conventional medicine that may later harm one's health.

3. The antibiotic treatment or modern medical tools also come with higher costs comparing to alternative medicine that depends more on natural treatments such as the use of herbal medicine, meditation-yoga and etc.

4. Conventional medicine also based on "reactive" approach which focuses on the diagnosis of diseases or infections that are causing the illnesses, then later find the way to cure those diseases. This approach has left room for relapses of such diseases. Whereas the alternative medicine focuses on tackling the "root" of such illnesses. Therefore, it encourages patients to change all of their harmful behaviours to treat and prevent reoccurrences.

5. Alternative medicine is the treatment that focuses on holistic approach, placing emphasis on body, mind, soul, society, and environment to make the patients feel relax and eventually improve their quality of life. This view is contradicting with conventional medicine which focuses on certain organ that is malfunctioned or involved with such illness (Thirachaisakul, *et al.*, 2015)

Chanthaburi and the Use of Alternative Medicine

Traditional healthcare methods are synchronised with Thai culture, traditions, and norms for taking care of one's health and treating diseases or illnesses by using the principle of balancing body's elements as a guidance. Thai or alternative medicine is considered as our nation's wisdom. The knowledge from this local wisdom has long been passed on over thousands of years as the cultural heritage from generation to generation.

Although some knowledge might be lost or scattered overtime, recently, Thai or alternative medicine is widely received greater support for its restoration. This is clearly visible from the Ministry of Public Health's policy that supports the use of Thai medicine in hospitals. One of the hospitals that has gained tremendous success and well-known for its standard of Thai and alternative medicine treatments is the Thai and Alternative Medicine Clinic, Prapokklao Hospital in Chanthaburi. This clinic has been led by Dr. Chatchai Sawasdichai, a specialist doctor in Thai and alternative medicine clinic, who has also been awarded with National Outstanding Person Award in The Thai, Folk and Alternative Medicine branch. Dr. Chatchai has taken the lead in pioneering the Thai and Alternative Medicine Clinic of Prapokklao Hospital in Chanthaburi.

Related Researches

Suwanphong, N. *et al.* (2017) have studied the decision of undertaking Thai medicine services in hospitals of Ratchaburi citizens in order to assess the decision process of using such services and to analyse various relationships include personal characteristics, influencing factors, perceived service quality, and accessibility of Thai medicine services, which have led to the decision to use Thai medicine services. The samples of 425 patients are from Damnoen Saduak Hospital in Ratchaburi. Data collection is based on 5 sections of questionnaire includes personal characteristics, influencing factors, perceived service quality (at .91 confidence level), accessibility of Thai medicine services, and the decision to use Thai medicine services. The statistical approach used to analyse the data was the percentage frequency and median. From analysing the multinomial logistics regression, the finding suggested that the sample group decided to use Thai medicine service at 35.30% with overall value of the influencing factors, perceived service quality, and accessibility at moderate level; the highest values are 46.10, 62.80 and 47.10, respectively. Factors that were statistically and significantly related to the decision to use Thai medicine services include the existing awareness of Thai medicine

(Adj. OR = 2.96, 95% CI = 1.09-8.04), influencing factors at Good level (Adj. OR = 4.23, 95% CI = 2.51-7.12), perceived service quality at Good level (Adj. OR = 4.09, 95% CI = 2.33-7.15), and accessibility at Good level (Adj. OR = 2.16, 95% CI = 1.32-3.55)

Noppakao, S. *et al.* (2017) studied the predictors of self-care behaviours of the village public health volunteers based on Thai and alternative medicine in Phitsanulok. The aims of this research were to 1) study the level of self-care behaviours based on Thai and alternative medicine among the village public health volunteers and 2) analyse the predictors of self-care behaviours of the village public health volunteers in Phitsanulok. The samples were 327 public health volunteers from villages in Phrom Phiram District. The data was collected via questionnaire and using descriptive statistics to analyse the data include the percentage frequency, and the mean & standard deviations. The power of predictors that affected the self-care behaviours of volunteers was analysed by using Enter - Multiple Regression Analysis at 0.05 significance level. The findings showed that 1) majority of the volunteers have moderate level of self-care based on Thai and alternative medicine and 2) There were 3 predictors for the self-care behaviours of the volunteers, in which the attitude had the highest predictive power, then followed by budget support and marital status. Overall, these 3 predictors can predict the self-care behaviours of volunteers by 22.20% at 0.05 significance level.

Namsaeng and Towapangam, (2016) studied and assessed the patients' satisfaction level of Thai medicine services at Udon Thani's public hospitals. The research aimed to assess 1) the patients' level of satisfaction on the services received from Thai Medicine practice units, 2) personal characteristics and service quality have impacted the patients' satisfaction and 3) the relationship between the outcome of Thai medicine service standard evaluation (according to the standard of Thai Traditional Medicine and Complementary Medicine Hospital or TTCMH) and patients' satisfaction

level. The sample group was the patients who undertook Thai medicine services from April to June 2014 in 17 public hospitals of Udon Thani. Data collection was done by using questionnaire, and the Chi-square and Multiple Regression Analysis Method Stepwise were used to analyse the data as well as the relationship between the outcome of Thai medicine service standard according to TTCMH and the patients' satisfaction level based on the correlation coefficient.

The research found that most patients has good level of satisfaction toward Thai medicine services (with the mean of 3.81 and standard deviation of 0.43). Personal characteristics affecting the satisfaction level include age, symptoms, objective of using the services, type of the services, and size of service units. The servicing factors in every dimension include convenience, coordination, service mind, information, costs, herbal products and quality of the treatments. These factors affected the satisfaction level of the patients at a significance level of $p < 0.05$. The findings also showed that the relationship between the outcome of service standard evaluation and satisfaction level is relatively low with correlation coefficient (R) at 0.351 ($p < 0.05$), and the satisfaction level toward service quality has the highest level of correlation at $R = 0.300$. Therefore, each servicing unit should place emphasis on the patient's needs and continuously improve every dimension of its services in order to increase patients' satisfaction.

Charuwanchai, P. and Jarinto, K. (2015) studied the characteristics of patients who undertake alternative medicine in public hospital. This research aimed to understand the characteristics of alternative medicine's patients that will influence their decisions to use such services in public hospital. In addition, the research is a qualitative research and sampled its data from 21 patients as the main data source. The data was collected from interviews. Then, a content analysis tool, ATLAS ti. 5.0, was used to analyse the data. Researchers have found that patients of alternative medicine were ranging from children, teenagers, workers, to elders. However, most of them were aged between 40-60 years old and also work as public servants. They also showed signs of bone, joint and muscle related illnesses as well as other chronic diseases such as diabetes, hypertension and etc.

Moreover, these patients have opted to use alternative medicine services mostly in hospital that they could reimburse from their employment units and they also have experience in using alternative medicine for self-care at home. They also gained information about alternative medicine from family and relatives and thus believe that alternative medicine can reduce the use of chemical based medicine/products. They were also knowledgeable and has prior experiences on the use of alternative medicine from physical and mind therapy group such as meditation therapy, exercise and etc. Besides, the costs of alternative medicine include both treatments that comes with costs and those that are costless. Additionally, they tended to use alternative medicine in combination with conventional medicine and their reason to use alternative medicine was because it helped improve their symptoms.

Research methodology

This research uses primary data, the data that has been collected by using field work questionnaire, from the sample group of 400 respondents. The population size of this study is 532,466 people. The sample size is calculated from Taro Yamane formula at 95% confidence level and .05 degree of errors. Before data collection, the researchers tried to collect from the initial try-out of the questionnaire with 30 respondents and the calculation has shown that the reliability value is equal to 0.80.

To analyse the data, the researchers employed descriptive statistics including frequency and percentage to analyse personal information of respondents such as gender, age, occupation, and income. While mean and standard deviation are used to analyse the behaviours of respondents. Moreover, inferential statistics are also used to analyse the data including independent sample t-test, One-way ANOVA and multiple regression analysis.

Findings

General information of respondents.

From the study, it was clear that the majority of respondents are female (281 persons or 70.25%) and male (119 persons or 29.75%). In terms of age study, it was found that most of respondents aged less than 30 years old (239 persons or 59.80%), followed by between 30-39 years old (55 persons or 13.80%), between 50-59 years old (53 persons or 13.30%), between 40 – 49 years old (32 persons or 8%) and more than 60 years old (21 persons or 5.30%). In terms of education study, most of the respondents have acquired undergraduate degree, about 259 respondents or 64.80% of the total respondents. Whereas there are 130 respondents or 32.50% that have below undergraduate education level, and around 11 respondents or 2.80% have graduated from the post-graduate level. In terms of occupation study, the majority of respondents are office workers, about 108 respondents or 27% of the total respondents, then followed by 97 housewife/unemployed respondents or equal to 21.80%. While 76 respondents or 19% are farmers, and 54 respondents or 13.50% are entrepreneurs, respectively. In addition, 53 respondents or 13.30% are public/civil servants, and 22 respondents or 5.50% are general workers/employees, respectively.

In terms of the exercise of rights to receive services at the hospital (the first location to use the rights), the study shows that most of the respondents paid for their medical service by themselves, about 261 respondents or 54% of the total respondents. While there are 151 respondents or 37.8% who used social security to pay for the services. About 22 respondents or 5.5% relied on group insurance from their company welfare, and 11 respondents or 2.8% using their reimburse rights from being public servants. In terms of the use of desired services, the study depicts that most of the respondents were sometimes able to use the desired services, about 162 respondents or 40.5% of the total respondents have reported this. Whereas around 140 respondents or 35% were able to use their

desired services almost every time. In addition, about 98 respondents or 24.5% were able to receive their desired services every time.

In terms of the types of alternative medicine services, the majority of respondents have used Thai massage before, about 225 respondents or 56.3% of the total respondents. Then, it followed by 55 respondents or 13.8% who have been diagnosed and ordered with herbal medicine and around 54 respondents or 13.5% have used herbal streaming before. Also, about 44 respondents or 11% have used herbal compression, while around 11 respondents or 2.8% have used Tub Mhor Gluea and other kind of treatments. Lastly, in relations to sources of information about alternative medicine services of the hospital, the study showed that most of the respondents have received information about the alternative medicine services of the hospital from friends/neighbours, about 192 respondents or 48% of the total respondents. It then followed by electronic media with 109 respondents or 27.3%, and 44 respondents or 11% have received the information from the hospital promotion and PR campaigns. Whereas the mass media such as radio/TV were reported by 33 respondents or 8.3% and newspaper/printed media were mentioned by 22 respondents or 5.5%.

Hypothesis Testing

Hypothesis 1 Different personal characteristics including gender, occupation and location can lead to different decisions on the use of alternative medicine services.

The study indicated that different personal characteristics including gender, occupation and location can lead to different decisions on the use of alternative medicine services at the statistically significant level as of 0.05 due to the p-value is lower than 0.05.

Hypothesis 2 Perceived service quality of alternative medicine services affect factors affecting the decision to undertake alternative medicine services

Table 1 The relationship between factors that affect the decision to use alternative medicine services

Perceived service quality		X ₁	X ₂	X ₃	X ₄	X ₅	Y
Independent Variables							
Tangibility of the services	X ₁	1.00					
Reliability	X ₂	0.673	1.00				
Responsiveness toward patients	X ₃	0.664	0.887	1.00			
Confidence in the service standard	X ₄	0.386	0.778	0.694	1.00		
Care and empathy for the patients	X ₅	0.331	0.709	0.646	0.874	1.00	
Factor influencing the decisions to use alternative medicine services (dependent variables)	Y	0.656	0.673	0.597	0.575	0.565	1.00

Table 1 shows that the correlation coefficient between predictive variables is ranging from 0.331 – 0.887 at statistical significance level of 0.05 and all of the relationships are positive. The pair of predictive variables that has the highest correlation coefficient value is reliability (X_2) and the responsiveness toward patients (X_3) at 0.887 with positive direction. Whereas the pair of predictive variables that has the lowest correlation coefficient value is the tangibility of the services (X_1) and care & empathy for the patients (X_5) at 0.331 with positive direction.

When further analyses these correlation coefficients between predictive variables and factors influencing the decisions to use alternative medicine services of Chanthaburi citizens, we have found that all predictive variables have positive relationship with the factors influencing the decisions to use alternative medicine services of Chanthaburi citizens. This can be listed in ascending order from highest to lowest as follows: care & empathy for the patient (X_5), confidence in the service standard (X_4), responsiveness toward patients (X_3), tangibility of the services (X_1) and reliability (X_2).

Table 2 The weight and importance of predictive variables influencing the decisions to use alternative medicine of Chanthaburi citizens

Predictive variables		b	Beta	SE _b	t	Sig
Tangibility of the services	X_1	0.382	0.486	0.037	10.201	0.000
Reliability	X_2	0.196	0.248	0.069	2.853	0.005
Responsiveness toward patients	X_3	0.127	0.176	0.052	-2.433	0.015
Confidence in the service standard	X_4	0.063	0.073	0.066	0.954	0.341
Care & empathy for the patients	X_5	0.229	0.279	0.056	4.088	0.000
a = .923	R = .761	R² = .580		S.E_{est} = .372	F = 108.752	

Table 2 lists out the weight and importance of each factor affecting the predictive variables and influencing the decisions to use alternative medicine services of Chanthaburi citizens. There are 4 factors at statistical significance level of 0.05 includes the tangibility of the services (X_1), reliability (X_2), responsiveness toward patients (X_3), and care & empathy for the patients (X_5), which have coefficient of the variables in the form of standard score β equal to 0.486, 0.248, 0.176, and 0.279, respectively, as well as in the form of raw score (b) equal to 0.382, 0.196, 0.127, and 0.229, respectively. Also, the Multiple Correlation Coefficient (R) is equal to 0.761 with the predictive power at 58% ($R^2 = 0.580$) and the standard error of the prediction (**S.E_{est}**) is equal to 0.372. While the constant value of the predictive equation in the form of raw score (a) is equal to .923. In fact, the 4 predictive variables can be used to construct a predictive equation in the form of raw score to predict the decision to use alternative medicine services of Chanthaburi citizen as follows:

$$Y = 0.923 + 0.382(X_1) + 0.196(X_2) + 0.127(X_3) + 0.229(X_5)$$

or
$$Y = 0.923 + 0.382 (\text{tangibility of services}) + 0.196 (\text{reliability}) + 0.127 (\text{responsiveness toward patients}) + 0.229 (\text{care \& empathy toward patients})$$

or the equation of standard score as follows

$$Y = 0.486(\text{tangibility of services}) + 0.248(\text{reliability}) + 0.176(\text{responsiveness toward patients}) + 0.279 (\text{care \& empathy toward patients})$$

Discussion and Recommendation

The findings from this research, Alternative Medicine Services: “The Study of Changing Norms of New Healthcare Options from Past to Present focusing on Thai Citizens in Chanthaburi”, have shown that different genders will differently affect the decision to use alternative medicine services with statistical significance level of 0.05. The majority of the respondents on the decision to use alternative medicine services of Chanthaburi citizens are female, about 281 respondents or 70.25% from the total. This is correspondent to the study of Suwanphong, N. (2017) on the decision of undertaking Thai medicine services in hospitals of Ratchaburi citizens that has also found that most respondents from sample group were female, about 67.5% of the total respondents.

In addition, the study of variables such as occupation and the exercise of rights to receive services at the hospital (the first location to use the rights) shows that these differences can result in different decisions made on the use of alternative medicine services with statistical significance level of 0.05. Furthermore, most of the respondents, about 261 respondents or 53.9%, have paid for their services by themselves. This is also correspondent to the study of Kamonpiyaphat, S. (2015) about the decision to use private hospital in Bangkok, which has reported that majority of the respondents, about 116 respondents or 29%, have paid for services by themselves.

The analysis of the relationship between perceived service quality of the alternative services and the decision to use alternative medicine services has shown that there are 5 variables affecting the decision to use alternative medicine services of Chanthaburi citizens include the tangibility of the services, reliability, responsiveness, confidence in the service standard, and care & empathy for the patients with the statistical significance level of 0.05. This is also in accordance to Srinagarindra, R. (2015), who studied the service quality of a private hospital at the gynaecology clinic with a sample size of 150 patients. There were 6 levels of perceived service quality. He has found that the reliability and trust on the operations of medical staff and officers was recognised as the highest quality by the outward patients who have used the services of the gynaecology clinic at the private hospital.

Recommendation on Research Finding Usages

Alternative medicine practice units should place more attention on raising the patients' trust.

Recommendation for further research

Future research should use experimental approach to study the effectiveness of healthcare by various types of alternative medicine treatments such as Thai massage, herbal medicine, DhammaNamai healthcare and etc.

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