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The most frequent and credible source of information on natural health products

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ABSTRACT

The study looks at the various information sources of natural health products and credibility of these sources.

Television was the most frequent source of information on natural health products as half (51%) of the respondents were frequently exposed to the television. Consumers also trusted television most since this source is regulated. Before consumers purchase natural health products however, they consult family and friends since these sources have testimonies that can be trusted.

The researcher recommends that the Food and Drugs Authority should implement policies that would check the efficacy of herbal medicine advertised on the television. If possible, the Food and Drugs Authority should implement policies to make efficacy test of herbal medicine advertised on television the same as orthodox medicine. This would enhance trust in consumers of natural health products.

Information source from community center and social media should go through some form of registration authorized by the Food and Drugs Authority in order to increase trust of consumers who patronise these sources.

Keywords: frequent, credible, source of information, natural health products, trust

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Introduction

The media now plays much role in the era of technology. Since the media is a powerful tool in the 21st century, advertisement of products with health benefits is now used by producers to strategically position their products to gain a competitive advantage. Various advertisements in the mass media including television and radio programmes have significantly increased consumers' awareness and given natural health products some credence (Ekor, 2014).

One source of advertisement might be acceptable for a particular product but might not be acceptable for another. Tourist attraction is readily accepted when advertised on television or print than radio since people can better appreciate in pictorial form what is advertised (Markwei, 2005). Radio advertisement is widely used by consumer goods marketers since it can reach wider audience in both rural and urban areas (Ayimey et. al., 2013). It is thus gaining popularity in the advertisement of natural health products. This is because radio provides timely and relevant information. Radio attracts buyers to herbal shops than television (Ayimey et. al., 2013). Nine out of ten of retailers in Ayimey et al. (2013) study prefer radio to television. This is because radio is easily available compared to television.

Yepoka (2017) claims that advertisement covers about 65% of herbal medicine operating expenses. One radio station in Ghana makes about 50000 Ghana Cedi per month from the advertisement of natural health products. Furthermore, each herbal enterprise employs about fifty people thus reducing the unemployment rate in Ghana (J. Amoah, personal interview, October 7, 2017). A natural health product is a great opportunity to entrepreneurs and a big revenue source to the government (Yepoka, 2017).

There are however floods of advertisement in the media. Advertisers make all kinds of claims that have not been certified or authenticated. Some consumers however have an unquestioned faith in health claim advertisement from some sources. Information source shapes credence. Suleiman(2014) states that many people see friends/ relatives' information on natural health products as more credible than other sources. There are now many herbal shops which sell natural health products which are licensed by regulatory authorities. Lack of effective regulation however mean that these claims are not verified or authenticated by the regulatory authorities (Ministry of Health,2005). Information source from community information center, the internet and friend/relative/social group, which are mostly not regulated make claims according to the herbs used for preparation. It is important to answer the question; what are the most frequent and credible sources of health claim advertisement?

Objective: To identify the most frequent and credible source of information on natural health products in relation to their socio-economic characteristics.

Hypothesis

Research question	Hypothesis	Information on which it is based
What is the most frequent and credible source of information on natural health products in relation to socio-economic characteristics?	Radio is the most frequent information source patronized by consumers of herbal medicines and herbal food supplement. Information source from friends and relatives is the most credible source on natural health products.	Retailers of herbal medicine believe that radio advertisement attracts buyers to their shop since a lot of people listen to radio (Ayimey et. al., 2013). Consumer's decision to use herbal medicine is based on advice from friends. (Suleiman 2014)

Significance of study

Findings from Ayimey et. al.(2013) shows that majority of consumers patronize herbal medicine that are advertised on radio since they see radio as a reliable source of information. Radio is also more available as compared to television. The study of Ayimey et. al(2013) however limited its scope to advertisement on the media but not on social relations. Information from friends, relatives, referrals, and programs on the various media was not taken into consideration. These sources may have an impact on the purchases of natural health product. This study would look into the impact of social relations on purchases of natural health products and help management in decision making. Finding from this research would inform management whether to put more effort into advertisement as advocated by Yepoka (2016) or to focus on building lasting relationship with consumers.

Literature review

Howards (1977) outlines three different types of information sources in the consumer's environment namely symbolic stimuli, significant stimuli and social input. Symbolic stimuli deal with brand or product information as described by the marketer in the form of advertisement (television, radio, internet and bill boards) while significant stimuli deal with the product characteristics like the price, quality, availability, distinctiveness and service. Social input is information source in the social environment which include social class, family and reference group which the marketer has no control over.

Advertising is a form of communication which is intended to persuade people to make a purchasing decision on a particular product. Advertisement has taken advantage of the media to make products known to the public

Significant stimuli deal with the product characteristics like the price, quality, availability, distinctiveness and service. Levy and Derby (2005) outlined that aside claims mentioned by the marketer, there are other claims of the product that are not mentioned by the marketer which is usually the product characteristics.

Social input is the social environment where people get interactive. Suleiman(2014) found out that about 91% of people in Saudi Arabia do not consult physician before taking herbal medicine. They rely on advice of friends to purchase herbal medicine. This is because the media portrays herbal medicine are scientifically proven. They perceive that herbal medicine is natural so harmless. Friends/ relatives greatly influence the behavior of a person. In other for a person to fit into the society, he must adapt to the culture of the environment as specified in Maslow's theory. This also explains why many people are influenced by friends to take herbal medicine.

Fergie (2013) distinguished between social input and advertisement. He mentioned that the social input is interactive but advertisement is informative. This is the main difference between symbolic stimuli and social input. Application like the Facebook, What Sapp, LinkedIn and Twitter are all considered social input since people get interactive there. Blankson et. al. (2012) claim that Ghanaians, especially those who have travelled oversea, see social input as a pleasure and that it enhances social role and image. This is because through social input, they get to know what the latest trend and development is.

Many people see friends/ relatives' information of natural health products as more reliable (Suleiman, 2014). Information source from friends are however difficult to regulate. Whether claims are misleading or not, consumers follow the norm of the environment. For instance, herbal food supplement which is registered as food is considered medicine by some consumers, who advise others also (Aweh, 2017). This informed the Food and Drugs board to admonish the public to see tinctures as food instead of medicine. In spite of the label on herbal food supplement as a food supplement, people still use it to solve health

conditions.

Community information centers also provide information on products that are acceptable by the community for a long time. Herbal medicine is hand down from one generation to another and claims by the older generation about herbal medicine are seen as credible by the younger generation.

Due to scam on the internet, advertisement is not usually reliable. The echoes of unreliability of advertisement have worsened consumer's appreciation of advertisement (Pollay et. al., 1993). Pollay et. al. (1993) stated that the public attitude towards advertising is negative since they consider advertising as being falsified. Producers find a way to make their products attractive by over magnifying the benefit of their products.

Methodology

The study was conducted in the Greater-Accra and Ashanti regions of Ghana. This is because; these regions are representative of the country as a result of high migration of people from the other parts of the country. There are about 47 and 44 radio stations respectively in Kumasi and Accra aside other information sources of natural health products (Wikipedia, 2017). This shows the extent to which people in the metropolitan are exposed to the various information sources.

The target population was households in both Accra and Kumasi Metropolitan.

Adults over the age of 18 years residing in Ghana who have used one or more herbal product for at least once in six months prior to the survey were interviewed. The sample size was 385.Kumasi and Accra metropolitan are divided into the 20 sub-metros and each sub-metro is subdivided into communities. One community was randomly selected from each sub-metro. Twenty household samples from houses were drawn from each community making a total sample size of three hundred and eighty five. The sampled household in each community was by systematic random sampling that is, selecting every fifth residential address on a road. This enhanced representative sample where there was no record of list of households currently. When a house has more than one household, systematic random sampling method was employed in the selection of households. If a sampled household do not consume herbal medicine or herbal food supplement, the household is dropped and the next household immediately after that is selected as an alternative. Quota sampling was used to get at least one female from each house.

Structured questionnaires and interviews were used as the data collection tools. The researcher collected data from consumers of natural health products. After the researcher had decided on the people to visit, she designed her questionnaires. Questionnaires included close and open-ended questions.

Adults over the age of 18 residing in Ghana who have used one or more natural health product for at least once in six months prior to the survey were interviewed. The data was collected within a period of two month.

Results and discussions

Socio-Economic Characteristics of Respondents

The Table 4.1 shows some basic socio-economic characteristics of the respondents interviewed in this study. Socio-economic variables measured include respondent's Age, Education and Income. Percentage frequencies of Sex, Marital status, Religion and Occupation were also measured. Two third respondents were males (66%). Interestingly, more than a third of respondents were both between the ages of 18-29 and 30-44. More than half respondents (53%) were unmarried while almost half were married (47%).

Table 4.1; Socio-Economic Characteristics of Respondents.

Variable	Category	Frequency	Percentage%
Sex	Male	252	65.7
	Female	133	34.3
Age (years)	18-29	143	37.3
	30-44	152	39.2
	44-60	64	16.7
	>60	26	6.8
Marital status	Married	179	46.5
	Not married	206	53.5
Religion	Yes	370	96.1
	No	15	3.9
Education	No formal education	5	1.3
	Primary	32	8.3
	Junior High School	111	29.0
	Senior High School	162	42.1
	Tertiary	75	19.4
Occupation	Student	15	3.8
	Self Employed	231	60
	Private firm	100	26
	Public firm	36	9.3
	Unemployed	3	0.8
Income (Ghana Cedis)	100-499	125	34.4
	500-999	151	41.6
	1000-2999	76	20.9
	3000-10000	11	3

Source: field survey

Those with religious affiliation recorded a high percentage of approximately 96% as against those of no religion with 4%. This might be due to Ghana being located in Africa and thus regarded as a religious country. Almost half (43%) of respondents had completed the senior high school. This means that averagely respondents had formal education. Almost two third (61%) of respondents were self - employed.

4.2 Most Frequent and Credible Source of Information on Natural Health Products

Half (51%) of the respondents were frequently exposed to the television and were therefore familiar with advertisement of natural health products on the television.

Table 4.2; TheMost Frequent Source of Information on Natural Health Products.

	Frequency	**Percentage (%)**
Television	198	50.8
Radio	107	27.9
Product label	2	0.5
Relatives/friends	53	13.7
Internet	5	1.5
Community center	8	2.3
Pharmacist	9	2.5
herbal shop	0	0
Doctor	0	0
Mobile van	3	0.8
Totals	385	100%

Source: field survey (2018)

This finding however conflicts with studies from Ayimey et al. (2013) that radio is the most frequent source of information on herbal medicine. The reason for this contradiction might be because Ayimey et al. (2013) used herbal retailers as their respondents instead of herbal medicine consumers.

Table 4.3; Relationship between Sex and Most Frequent Source of Information

Most Frequent Sources of Information	**Sex**		**Totals**
	Males N (%)	Females N (%)	N (%)
Television	118(47)	76 (58)	193(50)
Radio	76(30)	33(25)	109(28)
Relatives/friends	40 (16)	12(9)	53(14)
Others*	19(7)	11(8)	30(9)
Total	253(100)	132 (100)	385(100)

Note *denotes community center, mobile van pharmacist, internet and product label

Source: field survey (2018)

The results in Table 4.3 show that 11% more females than males are frequently exposed to television as an information source. Chi square test showed significance level of 0.05% ($\chi 2$=23.219, df=14) between the most frequent source of information and sex of respondents. We thus reject the null hypothesis of the chi square test that there is no association between sex and most frequent source of information.

Table 4.4; Relationship between Age and Most Frequent Source of Information

Most Frequent Sources of Information	Ages				Totals
	N (%)	N (%)	N (%)	N (%)	N (%)
	18-29	30-43	44-60	>60	
Television	81(57)	77(51)	26(40)	9(35)	193(50)
Radio	39(27)	39(26)	20(31)	10(38)	108(28)
Relatives/friends	15(10)	22(15)	11(17)	4(15)	52(14)
Others*	7(6)	12(6)	7(11)	3(12)	29(9)
Total	143(100%)	150(100%)	64(100%)	26 (100%)	383(100%)

Note *denotes community center, mobile van pharmacist, internet and product label

Source: field survey (2018)

Chi square test showed no association ($\chi 2$=27.712, df=21) between the most frequent source of information and age of respondents. We thus accept the null hypothesis of the chi square test that there is no association between age and most frequent source of information.

Table 4.5; Relationship between the Most Frequent Source of Information and Purchase of Herbal Medicine

		Purchase of herbal medicine		Total
		No N (%)	YES N (%)	N (%)
Most frequent sources of information	Television	4(2.7)	144(97)	148(100)
	Radio	1(1)	90(99)	91(100)
	Relatives/Friends	9(20)	37(80)	46(100)
	Others*	4(14)	24(86)	28(100)
Total		18(6)	295(94)	313

Note *denotes community information center, mobile van pharmacist/doctor and internet

Source: field survey (2018)

People who purchase herbal medicine were frequently exposed to television and radio. Chi square test showed significance level of 0.01% ($\chi 2$=45.656, df=7) between the most frequent source of information and purchase of natural health products. We thus reject the null hypothesis of the chi square test that there is no association between purchase of herbal medicine and most frequent source of information.

From the Table 4.6, it can be seen that more than half (76%) of respondents were exposed to information at least once a day.

Table 4.6; Frequency of Exposure to Information

	Frequency	Percentage
At least once a day	296	76.1
At least once a week	78	20.6
At least once a month	10	3.3
At least once in a year	0	0
Totals	385	100

Source: field survey (2018)

This means that consumers are exposed to information on natural health products. Frequent exposure to information on natural health products might lead to believe in the information.

Interestingly, majority (40%) of respondents trusted television most because they believed television as a regulated source of information. This also confirms the findings that consumers are frequently exposed to information on the television.

Table 4.7; The Source of Information Trusted Most by Consumers of Natural Health Products.

	Frequency	**Percentage**
Television	152	39.5
Radio	71	18.4
Product label	2	0.6
Relatives/friends	35	35.1
Internet	9	2.3
Community center	5	1.3
Pharmacist	0	0
herbal shop	0	0
Doctor	0	0
Mobile van	11	2.9
Totals	285	100%

Source: field survey (2018)

Surprisingly, few respondents (13%) were frequently exposed to information from relatives/ friends. However, more than a third (35%) respondents trusted information source from relatives/ friends. Their main reason was that friends/ relatives had used herbal medicine before so their testimony was to be trusted.

This confirms finding from Suleiman (205) the consumers of herbal medicine trust information from friends and relatives. Surprisingly community center was not a frequent source of information on natural health products. This might be due to sampling of mainly registered natural health products users.

Table 4.8; Relationship between Age and Medium Trusted Most

Most trusted Sources of Information	18-29 N (%)	30-43 N (%)	44-60 N (%)	>60 N (%)	Totals N (%)
Television	63(44)	53(37)	28(44)	7(27)	150(40)
Radio	21(15)	26(18)	15(23)	5(19)	67(18)
Relatives/Friends	48(34)	54(38)	18(28)	10(38)	130(35)
Others*	10(7)	9(6)	3(5)	4(16)	27(6)
Totals	142(100)	142(100)	64(100)	26(100)	374(100)

Note *denotes community information center, internet and product labelSource: field survey (2018)

Chi square test showed no association ($\chi 2=24.849$, df=21) between the most trusted source of information and age of respondents. We thus accept the null hypothesis of the chi square test that there is no association between most trusted source of information and age of respondents.

Table 4. 9; Relationship between Sex and Medium Trusted Most

Most Trusted Sources of Information	Sex		
	Male	Female	
	N (%)	N (%)	N (%)
Television	90(37)	60(46)	150(40)
Radio	47(19)	21(16)	68(18)
Relatives/Friends	90(37)	41(31)	131(35)
Others*	17(11)	9(7)	26(7)
Totals	245(100)	131(100)	376(100)

Note *denotes community Information Center, Internet and Product Label

Source: field survey (2018)

More females trusted television compared to males. This might be because more females were frequently exposed to information from the television. Chi square test showed significance level of 0.05% ($\chi 2=23.219$, df=14) between the most trusted source of information and sex of respondents. We thus reject the null hypothesis of the chi square test that there is no association between most trusted source of information and sex of respondents.

From Table 4.20, more than half (58%) of the respondents first consulted friends/relatives before the purchase of natural health products. This confirms the finding that consumers trusted friends/ relative for information on herbal medicine. One quarter of respondents also consulted information based on advertisement.

Table 4.10; Frequency Distribution of Respondents' Consultation on Natural Health Products before Purchases

	Number of respondents	Percentage
Friend/Family	214	58.3
Advertisement^{+}	90	24.5
Vendor	52	14.1
Pharmacist	9	2.3
Doctor	3	0.8
Total	368	100

Note $^{+}$denotes television, radio and product label

Source: field survey (2018).

The researcher recommends that the Food and Drugs Authority should implement policies that would check the efficacy of herbal medicine advertised on the television. If possible, the Food and Drugs Authority should implement policies to make efficacy test of herbal medicine advertised on television the same as orthodox medicine. This would enhance trust in consumers of natural health products.

Information source from community center and social media should go through some form of registration authorized by the Food and Drugs Authority in order to increase trust of consumers who patronise these sources.

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