



Review Article

A short review based on the article entitled “Traditional Chinese medicine to improve rural health in South Africa: A case study for Gauteng”

Zijing Hu

Department of Complementary Medicine, University of Johannesburg, Johannesburg 2028, South Africa. E-mail: zhu@uj.ac.za

Abstract: This article employed a qualitative single-case study design to explore the South African population’s views and experiences on traditional Chinese medicine (TCM). This study is of profound significance since there is a lack of research focusing on the African population’s views and experiences on TCM. Furthermore, this study was the first research exploring South African patients’ views on TCM in the South African context. The findings of this study revealed that TCM is suggested to be adopted in Africa to promote rural health.

Keywords: Rural Health; Traditional Chinese Medicine; Alternative Medicine; Africans; Case Study

Received: 2nd April 2023; **Accepted:** 13th June 2023; **Published Online:** 11 July 2023

1. Overview of the background of the study

Literature reveals that rural health is a global challenge in both developed and developing countries^[1,2]. The availability, affordability and attainability of healthcare services are a critical crisis worldwide, particularly in the African continent. Mellor^[3] and Thou^[4] reveal that poverty, socio-economic conditions and poor health contributed to the decline of rural health in most parts of Africa. Therefore, there is a dire need for the improvement of health services among rural communities in Africa through attainable and affordable healthcare services, such as TCM. The literature supports that there is a lack of research focusing on the African population’s views and experiences of TCM. In my opinion, I concur that this study is of pertinent significance in promoting rural health in South Africa.

To promote rural health, it is important to clar-

ify the definition of rurality. The reason is that there are debates on the definitions of rurality since no definition meets all stakeholders’ requirements. The article defines rural health as “the health and health-care delivery in rural areas lacking urban characteristics, such as amenities and infrastructure”^[5]. I believe this definition meets the purpose of this study. Furthermore, this definition highlights the value of TCM in promoting rural health in South Africa where there is a lack of municipal services. Because TCM is effective and inexpensive^[6].

This study provided an overview of the use of TCM among African countries. The literature reveals that TCM is practised in many African countries. However, the inadequate TCM professional education service providers negatively influenced the accessibility and availability of TCM in Africa. According to Hu^[7], the University of Johannesburg is the only higher education institution that provides

acupuncture education for the purpose of training professional acupuncturists. For this reason, the authors of this study recommended introducing basic TCM knowledge and simple TCM treatment techniques to the rural residents, including herbal remedies, moxibustion, Chinese therapeutic massage and cupping.

The theoretical framework provides a theoretical lens to analyse the phenomenon that is being studied^[8]. This Health Belief Model is believed to be one of the most noteworthy frameworks for comprehending health behaviours. The reason is that this model offers an opportunity to understand health behaviours from multiple perspectives, including perceived susceptibility, perceived severity, perceived benefits and perceived barriers^[9].

2. Comments on the research methodology

Qualitative research is a research approach that focuses on the lived experiences of participants through the interpretation of researchers' perceptions of the phenomenon^[10]. This view concurs with Maree^[11], who states that the qualitative research approach is the most appropriate technique to explore the meanings and characteristics of participants. In this paper, the authors employed a qualitative case study design to investigate how rural health can be improved through TCM. The objectives of this study were to explore participants' views and experiences of TCM. Therefore, the qualitative approach was appropriate in this study since the author focused on participants' lived experiences. The interpretive paradigm utilised in this study allowed the researchers to acquire an in-depth understanding of participants' views and experiences^[10].

According to Maree^[11], interpretivist paradigm is based on observing and interpreting multiple realities by the researcher. Consequently, the researchers should utilise diverse data collection instruments to understand the relationship between the phenomenon (case) and the research question. The authors employed a single case study design for this study. A case study approach was used as “an intensive study about a person, a group of people or a unit,

aimed to generalise over several units”^[12]. Yin^[13] agrees with Creswell^[10] that the case study design allows researchers to explore and make meaning of participants' experiences. Yin^[13] further explains that studying a single case will provide a particular in-depth investigation of significant factors of a phenomenon. Kruger *et al.*^[14] states that a single case study is suitable to be selected when the case is critical, unusual, common and revelatory. Consequently, the single case study design was appropriate for this study. The reason was that the selected case was critical and unusual since rural health was critical and TCM was not a common practice in Africa. The selected case was common due to the fact that rural health was a global crisis, according to the literature. The selected case was revelatory because the author had the opportunity to conduct this study at the identified clinics.

In this study, the author employed a purposive sampling strategy to explore rural participants' lived experiences of TCM. Maree^[11] and Yin^[13] state that a purposive sampling technique is recommended when it is difficult to recruit participants due to the small population in the identified cases. Therefore, this sampling strategy is of profound significance since it was challenging to recruit participants for this study due to the limited TCM practitioners in South Africa^[14]. The small sample size was seen as an advantage of this study. Because it allowed the authors to collect in-depth descriptive data on participants' experiences with the use of TCM. The in-depth descriptions are advantages of interpretivist paradigm, which are also criteria of good qualitative research^[15]. Furthermore, the author utilised multiple techniques in this study to ensure the credibility, confirmability, dependability and transferability of the findings. This is crucial in qualitative studies since these perspectives indicate a good quality of qualitative research^[13,15].

3. Significance of the findings

Three themes emerged from data analysis, namely, a) the attitude to TCM among rural populations; b) the advantages of using TCM in rural areas; and c) the use of TCM in rural areas. The

findings of this study revealed that rural populations shared a positive view of TCM. They reported that the rural population was experiencing poor health situations due to poverty, a lack of health knowledge, and TCM service providers. For this reason, this study reported that the affordability and attainability of TCM would be beneficial to Africa. These findings concur with other studies which reveal that TCM is widely used in many countries in the world, which contributes to the improvement of the health of the rural population^[16,17].

Moreover, Wardle *et al.*^[18] point out that the patients' decisions regarding medical services are significantly influenced by their knowledge. Therefore, to promote rural health in South Africa using TCM, there is an urgent need to introduce TCM knowledge to the rural population. This finding was also supported by the HBM. According to the HBM, patients' perceived susceptibility, perceived severity and perceived benefits are fundamental to improve their health behaviours. Rural populations will only benefit from the use of TCM if they acknowledge that they are aware of diseases, recognise the severity of diseases and understand the benefits of diverse TCM approaches to prevent or cure disease. Furthermore, self-efficacy will also be encouraged if rural populations understand basic TCM knowledge; because of the recognition of benefits from the use of TCM.

The findings of this study highlighted that the efficacies of TCM were an important factor for participants to select TCM. This view also agrees with WHO^[17], which indicates that effectiveness and cost-effectiveness are the most important factors for the public to opt to use TCM. This study suggested that rural residents in Africa will benefit significantly from the holistic approach of TCM in both treating and preventing diseases, especially with no/low extra cost. This is of pertinent significance since poverty is still prevalent in Africa. The lack of resources in rural areas negatively affected the health of rural populations. This study further recommended promoting TCM health education among the rural population, as well as the application of TCM

theories in analysing the functions of African medicinal plants. TCM is widely used globally to treat various diseases. Rural residents are encouraged to accept multiple health behaviour changes to promote their health.

4. Conclusion

Rural health is a challenge in South Africa since poverty is still prevalent. Rural populations acquire less health knowledge. Furthermore, there is a lack of TCM service providers in rural areas. There is an urgent need to explore potential approaches to improve rural health. The successful application of the qualitative single case study design in this study is one of the contributions of this study. The methodology of this study can be utilised as a model for future studies in the field of health sciences. There is a significant lack of research on TCM within the African context. Further studies are recommended to be conducted among diverse groups of the population in different African countries. Despite this study being conducted with a qualitative approach, I believe the qualitative approach is not the only way to investigate rural populations' opinions of the use of TCM. Further studies are also recommended to be conducted using other approaches, such as quantitative or mix-methods approaches. In my opinion, the applications of diverse research approaches will strengthen the trustworthiness of this study. This study adopted a single case study design. Therefore, the findings lacked comparison. Further studies are also suggested to be conducted in other regions and countries.

Conflict of interest

The author declares no conflict of interest.

References

1. Guo A, Bowling JM, Bartram J, Kayser G. Water, sanitation, and hygiene in rural health care facilities: A cross-sectional study in Ethiopia, Kenya, Mozambique, Rwanda, Uganda and Zambia. *The American Journal of Tropical Medicine and Hygiene* 2017; 97(4): 1033–1042. doi: 10.4269/ajtmh.17-0208.

2. Ogunkola IO, Adebisi YA, Imo UF, *et al.* Rural communities in Africa should not be forgotten in responses to COVID-19. *The International Journal of Health Planning and Management* 2020; 35(6): 1302–1305. doi: 10.1002/hpm.3039.
3. Mellor JW. High rural population density in Africa—What are the growth requirements and who participates? *Food Policy* 2014; 48: 66–75. doi: 10.1016/j.foodpol.2014.03.002.
4. Tlou B. Underlying determinants of maternal mortality in a rural South African population with high HIV prevalence (2000–2014): A population-based cohort analysis. *PLoS One* 2018; 13(9): e0203830. doi: 10.1371/journal.pone.0203830.
5. Hu Z, Venketsamy R. Traditional Chinese medicine to improve rural health in South Africa: A case study for Gauteng. *Health SA Gesondheid* 2022; 27: a1871. doi: 10.4102/hsag.v27i0.1871.
6. World Health Organization. WHO global report on traditional and complementary medicine 2019. Geneva: World Health Organization; 2019.
7. Hu Z. Exploring teaching, learning, assessment and practices of the acupuncture programme to improve children’s health [Unpublished PhD thesis]. Pretoria: University of Pretoria; 2022.
8. Hu Z, Venketsamy R. Implementation example of TPACK model in health sciences education: Exploring of the students’ views on clinical simulation in the acupuncture programme at a South African university. *Journal for the Education of Gifted Young Scientists* 2022; 10(2): 251–263. doi: 10.17478/jegys.1092471.
9. Tarkang EE, Zotor FB. Application of the Health Belief Model (HBM) in HIV prevention: A literature review. *Central African Journal of Public Health* 2015; 1(1): 1–8. doi: 10.11648/j.ca-jph.20150101.11.
10. Creswell JW. *Research design: Qualitative, quantitative and mixed methods approaches*. 4th ed. Thousand Oaks: SAGE Publications; 2014.
11. Maree K (editor). *First steps in research*. 3rd ed. Pretoria: Van Schaik Publishers; 2020.
12. Gustafsson J. *Single case studies vs. multiple case studies: A comparative study*. Halmstad: Halmstad University; 2017.
13. Yin RK. *Case study research and applications: Design and methods*. 6th ed. Thousand Oaks: SAGE Publications; 2017.
14. Kruger CA, Hu Z, Venketsamy R, Razlog R. Exploring health sciences students’ experiences of interprofessional education to improve quality learning outcomes. *Journal for the Education of Gifted Young Scientists* 2022; 10(3): 385–398. doi: 10.17478/jegys.1126020.
15. Cohen L, Manion L, Morrison K. *Research methods in education*. 8th ed. New York: Routledge; 2018.
16. Kim BH, Kim MH, Kang SH, Nam HJ. Optimizing acupuncture treatment for dry eye syndrome: A systematic review. *BMC Complementary and Alternative Medicine* 2018; 18: 145. doi: 10.1186/s12906-018-2202-0.
17. World Health Organization. WHO traditional medicine strategy: 2014–2023. Geneva: World Health Organization; 2013. p. 1–76.
18. Wardle J, Adams J, Magalhaes RJS, Sibbritt D. Distribution of complementary and alternative medicine (CAM) providers in rural New South Wales, Australia: A step towards explaining high CAM use in rural health? *The Australian Journal of Rural Health* 2011; 19(4): 197–204. doi: 10.1111/j.1440-1584.2011.01200.x.