

The Study of Knowledge and Behaviors on Using Herbs in Households: A Case Study of Moo 15, Tambon Thung Sai, Amphoe Sai Thong Watthana, Khampangphet Province

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Abstract

This research was a cross-sectional design. The objectives were to study about the knowledge of herbs in household and investigate behaviors of using herbs in household at Moo 15, Tambon Thung Sai, Amphoe Sai Thong Watthana, Khampangphet province. The research sample was selected using a purposive sampling technique. 100 randomized were respondents and data were collected by conducting face-to-face interviews and by subjects answering structured questionnaires. The data was analyzed by using a frequency distribution including percentage. The result showed that most of subjects had low knowledge of herbs in their households. Hence, the results showed that most of subjects often using herbs in the household (65.00%). Home was a source of herbs in household (66.00%). Primary healthcare was a purpose of using herbs in household (47.37%). Ease to find was a reason for using herbs in the household (45.00). Leaf and whole plant were the parts of used herbs in households (39.00%). Raw plant materials were preferred to use for healing (60.00%) and skin disorder was health problem that herbs in the household were applied (41.00%). Promotion knowledge and behaviors on using herb in household remain necessary for peoples in this area.

Keywords: Knowledge, Behavior, Herbs, Herbs in Households.

1. Introduction

Thailand is a country with various bodies of knowledge on using herbs for many purposes. "Thai Herbs" have unique characteristics that reflect the Thai culture from the past until the current time. These herbs are used as ingredients in Thai cuisine, as a healing remedy and depending on their usage of traditional treatment, applying the herbs to preserve the health of the community. [1].

The Royal Thai Government and the prime minister have given importance to Thai herbs, by giving the Ministry of Public Health and relevant ministries including civil society and private organization to make a national economic and social development master plan for the development of

herbs on plan number one 1 during 2012–2017. The plan is driven through 4 strategies: 1) to promote the potential of Thai herbs according to the needs of market demands in domestic and international markets, 2) to develop the Thai industry to be able to market herbs to international quality, 3) to promote the use of herbs as traditional medicine treatments and promote the health of people in community by using them, and 4) to strengthen government and policies to keep the Thai herbs sustainable for the country and to be able to development a plan in which Thailand is leading country exporting good quality raw herbal material and herbal products.

The term "Herbs in the household" are traditional medicine herbs that are planted at Thai

homes such as basil, turmeric, lemongrass, galangal, etc. Thai herbs in the household have various properties as food or medicinal purposes that relieve common ailments depending on the local wisdom in using these herbs as traditional medicine treatments. There are varieties of research related to knowledge of Thai herbs, and there are found different levels of knowledge and verities of behaviors [2-6].

According to this, when people in community have knowledge of herbs using in their healthcare, it will reduce the use of drug, and antibiotics drug on inappropriately way. This will make the health care system to be more stable and sustainable [1]. Therefore, this study aimed to explore the knowledge of herbs in households and investigate the behaviors on using herbs in households at Moo 15, Tambon Thung Sai, Amphoe Sai Thong Watthana, Khampangphet province. Moreover, this information can be further applied to the healthcare planning, and the types of treatment for people who live in Moo 15, Tambon Thung Sai, Amphoe Sai Thong Watthana, Khampangphet province.

2. Methods

This research was a cross-sectional design. The respondents were selected by using a purposive sampling technique. 100 randomized were respondents from peoples who were living in Moo 15, Tambon Thung Sai, Amphoe Sai Thong Watthana, Khampangphet Province, Thailand. Inclusion criteria were to: 1) welcoming and willing to give the information 2) respondents are living at home during the research process 3) respondents have ever used herb as a medical treatment. The data was collected from the respondents by completing face-to-face interviews and structured questionnaires.

The questionnaire consisted of two parts, a 20-items test on knowledge of herbs in households and six items knowledge test of using herbs in household for medicinal purposes. Data were

analyses by means of the frequency distribution, namely, number, percentage.

3. Results

Table 1: Number and percentage of general data

General data	Number	Percentage
Gender		
Male	38	38.00
Female	62	62.00
Age		
20 – 30 years	21	21.00
30 – 40 years	48	48.00
40 – 50 years	26	26.00
> 50 years	35	35.00
Education level		
Primary school	51	51.00
Secondary school	29	29.00
Vocational/high Certificate	4	4.00
Bachelor’s degree	16	16.00
Occupation		
Farmer	41	41.00
Employee	35	35.00
Merchant	8	8.00
Government employee	5	5.00
Salary		
3,000 – 5,000 bath	70	70.00
5,000 – 10,000 bath	18	18.00
10,000 – 15,000 bath	5	5.00
>15,000 bath	7	7.00
Information resources		
Neighborhood	37	37.00
Internet	25	25.00
Family	38	38.00

From the Table 1, most of participants were female (62.00%), age between 30 – 40 years (48.00%), graduated from primary school (51.00%), employee was an occupation (41.00%), had salaries between 3,000 – 5,000 bath, and (70.00%) the neighborhood was an information resources (38.00%).

Moreover, the Table 2 showed that most of the subjects had low knowledge level about herbs and their used in their household.

Table 2: The percentage knowledge level of herbs in households.

Knowledge level	Percentage
Low	55.00
Average	42.00
High	3.00

Table 3: The percentage of behaviors on using herbs in households.

Behaviors	Percentage
1. Frequency of using herbs in households	
Always	21.00
Often	65.00
Sometime	6.00
Never	8.00
2. Source of herbs in households	
Home	66.00
Herbs Store	22.00
Grocery Store/Market	12.00
3. Purposes of using herbs in households	
Common illness	43.00
Cooking	24.00
Maintain health	33.00
4. Reason for using herbs in households	
Cheap	38.00
Easy to find	45.00
Safe	17.00
5. Part of herbs which was used in households	
Root	23.00
Peel and flower	27.00
Fruit and seed	11.00
Leaf and whole plant	39.00

Table 3: The percentage of behaviors on using herbs in the households. (Cont.).

Behaviors	Percentage
The way of using herbs in households for healing	
Raw	60.00
Washed before use	23.00
Processed before use	17.00
Herbs in the households were applied for?	
Respiratory problem	28.00
Digestive problem	31.00
Skin disorder	41.00

The results showed that most of subjects use herbs often in the households (65.00%), home was a source of herbs in the households (66.00%), relieved common illness by using herbs in the households (47.37%), stated that it was easy to find was a reason for using herbs in households (45.00%), leaves and whole plant were the part of used herbs in households (39.00%), used raw herbs for healing in households (60.00%), and used herbs to treat skin disorders in households (41.00%) (See Table 3).

4. Discussion

4.1 Knowledge of herbs in households

The first aim of this study was to explore the knowledge of herbs in households. The findings indicated that the majority of participants had low knowledge on how to use herbs as medicinal purposes in the households. This results are similarity to a previous study Muengchang et al. (2017) [6], which most of participants had low knowledge on how to use herbs for self-health care. However, the findings of this current study were different from the results of a previous study from Srisawat et al. (2013) [2], which the participants had gain more knowledge.

Moreover, the results of this research contrast with the study of Chunngam et al. (2013) [3],

which found that most of participants are most likely to have more knowledge on identifying Thai herbs (97.00%), knew their healing property (61.00%), and knew how to use them (70.00%).

4.2 Behaviors on using herbs in households

The second aim of this study was also to examine the behaviors on using herbs in households. The result found that most of the participants have often used herbs in their households. This finding was similarity with the study of Bhunyabhadh et al. (2012) [4] showing most of participants used herbs in their household for primary health care. Furthermore, the findings found that most of participants planted herbs at their home for treating themselves from common illnesses because of suitable and available for using in their family. The findings were also similarity with the study from Chaimay et al. (2012) [4]. The previous study revealed that most of participants used herb in households (52.63%). In addition, the results found that participants who had illness were more likely to use herb in primary health care about 2 times (OR : 2.05, 95% CI : 1.05-3.99) by using leaf and whole plant for healing their illness. Moreover, the results of this current study were similarity to the study of Oratai et al. (2015). [7] The previous study found that the most of plant part had been used were leaf and whole plant due to their harvesting and soft nature of material for the preparation of herbal remedies [7-8].

5. Conclusion

This study has explored the knowledge and consumption behaviors on using Thai household herbs as medical treatments in the Moo 15, Tambon Thung Sai, Amphoe Sai Thong Watthana, Khamphang Phet province. The result of knowledge gaining towards the usage of herbs showed that only a few participants had high knowledge level in using herbs as a medical treatment, specifically for the management of certain diseases. Among the participants of this study the result showed significant

differences on the knowledge of herbs and there medicinal purposes at low levels. This study also contributed towards the understanding of the usage of herbs as a medical treatment in Kamphaeng Phet which could offer great potential to improve health for people in the community.

6. Acknowledgement

Thanks for the Research and Development Institute, Kamphaeng Phet Rajabhat University and the Faculty of Science and Technology, Thailand provided funding.

7. References

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