A STUDY ON PROBLEMS OF SELECT BRANDED AYURVEDIC HEALTHCARE PRODUCT USERS WITH SPECIAL REFERENCE TO AVINASHI

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Abstract

Ayurveda is a classical system of medicine originating from the Vedas, founded around 5000 years ago in India, and currently recognized and practiced in India and many subcontinent countries. It is one of the oldest medical systems in the world. Ayurveda is science of life (Ayu +Veda) that takes an integrated view of the physical, mental, spiritual and social aspects of human beings, each impinging on the others. The objective of the research work is to study about the brand awareness and problems faced by respondents in using selected ayurvedic healthcare products. Tools used for the analysis are Mean score analysis, percentage analysis and chi-square test. It is concluded that most of the respondents Most of the respondents are influenced by the television to buy the Ayurvedic healthcare products respectively.

Keywords: Ayurveda, consumers, brand, problems, healthcare products.

I. INTRODUCTION

Ayurveda was referred to in the Vedas (*Rigveda* and *Atharvveda*) and around 1000 B.C. the knowledge of Ayurveda was comprehensively documented in Charak Samhita and Sushrutha Samhita. According to Ayurveda, health is considered as a prerequisite for achieving the goals of life - *Dharmas* (duites), *Arth(Finance)*, *Kama(Action)* and *Moksha* (Salvation). All objects and living bodies are composed of five basic elements, called the Pancha Mahabhootas, namely: *Prithvi* (earth), *Jal* (water), *Agni* (fire), *Vayu* (air) and *Akash* (ether). The philosophy of Ayurveda is based on the fundamental harmony between universe and man, a healthy balance between macrocosm and the microcosm. Ayurveda believes in the theory of Tridosha: Vata (ether + air), Pitta (fire) and Kapha (earth + water). These three 'Doshas' are physiological entities in living beings. The mental characters of men are described by Satva, Rajas and Tamas. Ayurveda aims to keep these structural and functional entities in a state of equilibrium which signifies good health (Swastha). Any imbalance due to internal or external factors causes disease and the

treatment consists of restoring the equilibrium through various techniques, procedures, regimen, diet and medicine.

The treatment in the Ayurveda system is holistic and individualized having two components; preventive and curative. The preventive aspect of Ayurveda is called Svasth-Vritt and includes personal hygiene, regular daily and seasonal regimen, appropriate social behaviour and Rasayana Sevana, i.e., use of rejuvenative materials/food and rasayana drugs. The curative treatment consists of three major categories of procedures, Aushadhi(drugs), Anna(diet) and Vihara (Life style as described in Ayurveda). Ayurveda largely uses plants as raw materials for the manufacture of drugs, though materials ssof animal, marine origin, metals and minerals are also used. Ayurvedic medicines are safe and have little or no known adverse side-effects.

II. STATEMENT OF PROBLEM

The study deals with the problems of select branded ayurvedic healthcare product users with special reference to Avinashi taluk at Tirupur district. Consumers taste and preferences are changing, leading to radical transformation in life style and patterns. The generic growth is likely to be driven by changing life styles and by strong surge in income, which in turn will be supported by favorable demographic patterns. Now a day's branded products are increasingly used by peoples. They select their branded products in the single or multi brands. Buying decision of the respondents is influenced by different factors. And peoples get high confuse in the time of purchase of ayurvedic products. Few consumers get some health problem when using some branded ayurvedic products.

III. REVIEW OF LITERATURE

Gaur and Waheed (2002) has written "A Study of buying behaviour for branded fine rice" conducted a study on buying behaviour for branded fine rice in Chennai and Coimbatore city. The study indicated that retailers were ranked as the prime source of information and the family members as the next important source of information about the branded fine rice. Rice mandy formed the major source of purchase for Chennai (73.00%) and Coimbatore (70.00%) households. Quality and image of the brand were ranked as first and second factors influencing brand preference in both Chennai and Coimbatore cities.

P.Guru Ragavendran, G. Devakumar, Santhosh Upadhyay (2009) in their article "A Study on Brand Awareness of Shampoo Products for CavinKare Pvt. Ltd" in the present work, a study was carried out to estimate the current brand awareness and to suggest methods for improving the same. In this process, the socio economic stratum of women consumers was identified using socio economic classification grid during personal interview at individual households. The data was collected from the target audience of 18-35 years age at 30 different places in target population through questionnaire. Pareto analysis was used to know the quality problems of major attributes. Quality Function Deployment was deployed to relate the consumer voice and technical descriptors for quality improvements in the shampoo brand. The results

revealed that, the major consumer expectations were quality, benefits offered and packaging of shampoo product. Based on the results obtained, measures were suggested to improve the brand awareness from 8% to 12.6% in target population. Suggestion towards improving sales by 45.39% on focusing the lagging quality attributes of shampoo has been made.

Seyed Fathollah, Amiri Aghdaie (2012) has written a paper on, "An Analysis of Impact of Brand Credibility and Perceived Quality on Consumers' Evaluations of Brand Alliance", the purpose of this study was to analyse the effects of brand credibility and perceived quality on consumers' evaluation of brand alliance. This study could be considered as an applied research from purpose perspective and descriptive-survey with regards to the nature and method (type of correlation). Respondents to the questionnaire were randomly selected shoppers at one of the branches of Refah chain stores in Isfahan city. The study identified that credibility of constituent brands (i.e., brand A and brand B the allied brands) positively affect co-brand credibility, co-branded product perceived price and purchase intention. Results also show that perceived quality of constituent brands affect co-branded product perceived quality and perceived price. Furthermore, only perceived quality of one of constituent brands (brand B) has positive influence on cobranded product purchase intention whereas the perceived quality of the other brand (brand B) has no effect.

Ritu Narang (2006) in a study titled "A Study on Branded Men's wear" was taken up in the city of Lucknow with an intention to explore the purchase behavior of the buyers of branded men's wear. The objectives of this research are to study the purchase behavior of the buyers of branded men's garments, to study the impact of advertising on the purchase decision of buyers, to study the impact of promotional activities on purchase behavior of buyers. The research type was exploratory as it was conducted to develop a concept about the purchasing behavior of buyers of branded men's garments and the impact of advertising on their purchase decision. This study concluded that most of the times buyers visit the showrooms of branded garments with the purpose of shopping. The purchasing of branded garments is not impulsive. However, compared to women, male buyers visit the showroom for passing the time; The number of people visiting the showroom with a brand in mind is same as the number of people visiting the showroom with no brand in mind; Advertising has maximum impact in creating brand awareness.

Lalitha et al., (2008) made a study entitled "Brand Preference of Men's wear". Scope of the study focuses on the brand preference regarding shirts and pants of select consumers living in twin cities of Hyderabad and Secunderabad. The objectives of this study were to know the reason why customers prefer branded shirts and pants to unbranded ones, to find out the influence of advertisement for branded clothing for the purchase behavior of the respondent and to know the factors influencing customers while choosing branded shirts or pants. It is concluded that educational qualifications, employment status, age group, convenience of shops, and advertisement are influencing factors for purchasing the branded shirts and pants by the respondents. 94percent of the respondents are highly educated and purchased branded ready wears. Age group of 20-50 years is income earning people and spending on the branded wears. The study reveals

that the advertisements play a limited role to choose the brand among readymade dresses available in the market. 54 percent of the customers are buying branded ready wear because of quality and status symbol.

IV. NEED FOR THE STUDY

Today, ayurveda has been widely used in modern medicine systems. This was triggered by a number of research-conducted scientific research and has proved how effective the role of plants or herbs on human health. Probably, ayurveda is the only science where blood cancers or leukemia are cured, without side effects. Pediatric leukemia is recovering amazingly faster, often few weeks time for perfect control. Advanced nations are spending billions of dollars in research for a cure. However, recurrence of most types of cancers is a general phenomenon. Scientists can research how ayurvedic acts selectively, inducing cell death in only the malignant cells and not affecting neighboring healthy cells.

V. OBJECTIVES

- 1. To study the brand awareness level of the respondents towards selected ayurvedic products.
- 2. To study the problems faced by respondents in using selected ayurvedic products.

VI. HYPOTHESIS

H₀: There is no significant relationship between nature of family respondent's family and problems on selected ayurvedic healthcare products.

H₀: There is no significance relationship between educational status of respondents and problems on selected ayurvedic healthcare products.

H₀: There is no significance relationship between number of members in respondent's family and problems on selected ayurvedic healthcare products.

VII. METHODOLOGY

Area and sample selection: The study has been conducted in Avinahi taluk from Tirupur district. Sample Size: The study was conducted towards ayurvedic healthcare product users. The size of the respondents is 50. Sampling Technique: Convenient sampling method has been adopted. Data collection tool: Interview schedule. Period of Study: The data has been collected through structured interview schedule of ayurvedic products users from February 2018 to April 2018.

Tools used for analysis: The following are the tools applied.

- 1. Mean score
- 2. Percentage analysis
- 3. Chi-square test.

VIII. ANALYSIS AND INTERPRETATION

- 1. Mean score.
- 2. Percentage analysis
- 3. Chi-Square test

Objective 1: To study the brand awareness level of the respondents towards selected ayurvedic products.

8.1 Mean score analysis

TABLE: 8.1
SOURCE OF INFORMATION INFLUENCED CONSUMERS TO BUY AYURVEDIC
HEALTHCARE PRODUCTS

Variables	High	Influential	Moderately	Least	Not at all	
variables	Influential	imuenuai	Influential	Influential	Influential	Total
Ayurvedic Shops	12	29	7	2	0	50
Friends & Relatives	9	22	16	3	0	50
Family Members	11	26	8	4	1	50
Doctors	30	12	7	1	0	50
Television	36	9	3	2	0	50
Radio	2	4	6	20	18	50
Display	0	0	10	24	16	50
Banners	0	0	5	28	17	50
Media advertisements	20	12	10	8	0	50
Websites	23	13	6	5	3	50
Word of mouth	20	18	8	4	0	50

Source: Primary Data

From the above table 8.1 described that the respondents details about source of information influenced consumers to buy ayurvedic healthcare products. 5 point scale was used for this table. (5) High influential, (4) Influential, (3) Moderately influential, (2) Least influential and finally (1) Not at all.

Table 8.2

Variables	High Influential	Influential	Moderately Influential	Least Influential	Not at all Influential	Total	Mean	Rank
Ayurvedic	12	29	7	2	0			
Shops	(24)	(58)	(14)	(4)	(0)	50	4.02	4
Friends &	9	22	16	3	0			
Relatives	(18)	(44)	(32)	(6)	(0)	50	3.74	8
Family	11	26	8	4	1			
Members	(22)	(52)	(16)	(8)	(2)	50	3.84	7
Doctors	30	12	7	1	0			

www.ijcrt.org	© 2018 IJCRT	Volume 6	, Issue 2 A	pril 2018	ISSN:	2320-2882

	(60)	(24)	(14)	(2)	(0)	50	4.4	3
Television	36	9	3	2	0			
Television	(72)	(18)	(6)	(4)	(0)	50	4.58	1
Radio	2	4	6	20	18			
Kadio	(4)	(8)	(12)	(40)	(16)	50	2.04	9
Display	0	0	10	24	16			
Display	(0)	(0)	(0)	(48)	(32)	50	1.88	10
Banners	0	0	5	28	17			
Bailliers	(0)	(0)	(10)	(56)	(34)	50	1.76	11
Media	20	12	10	8	0			
advertisement	(40)	(24)	(20)	(16)	(0)	50	3.88	6
Websites	23	13	6	5	3			
websites	(46)	(26)	(12)	(10)	(6)	50	3.96	5
Word of mouth	20	18	8	4	0			
word of filoutii	(40)	(36)	(16)	(8)	(0)	50	4.08	2

Source: Primary Data

The study observed from the above data table shows that the sources of information that influenced respondents to buy the Ayurvedic healthcare products. It has been inferred that television are highly influenced that respondents to buy the Ayurvedic healthcare products. This variable is ranked in first place with the highest mean score of 4.58 per cent. Consequently, word of mouth, doctor, ayurvedic shops, websites, media advertisements are influenced highly to buy the Ayurvedic products, these variables are ranked in second, third, fourth, fifth and sixth place with the mean score of 4.08, 4.4, 4.2, 3.96 and 3.88 respectively. Further it has been observed that family members in the respondents family, friend and relatives of the respondents, radio talkies and display and banners of the Ayurvedic healthcare products. These variables are ranked in seventh, eighth, ninth and tenth place with the mean score of 3.84, 3.74, 2.04, 1.88 and 1.76 per cent respectively.

Thus it has been concluded that 4.58 per cent of sample respondents are influenced by the television to buy the Ayurvedic healthcare products respectively.

Objective 2: To study the problems faced by respondents in using selected ayurvedic products. **8.3 Percentage analysis**

TABLE: 8.3
PROBLEM FACED BY THE RESPONDENTS WHILE
USING THE AYURVEDIC HEALTHCARE PRODUCTS

Sl. No	Problem Faced	Problem Faced No. of the Respondents			
1.	Yes	11	22		
2.	No	39	78		
	Total	50	100		

Source: Primary Data

The above data table indicates that the problems faced by the respondents while using the ayurvedic healthcare products. It has been inferred that majority of i.e., 78 per cent of sample respondents have said that they not facing the problems while using the ayurvedic healthcare products. Rests of 22 per cent of sample respondents have said that they facing the problems while using the ayurvedic healthcare products.

Hence it has been concluded that majority of i.e., 78 per cent of sample respondents have said that they not facing the problems while using the ayurvedic healthcare products.

TABLE: 8.4
RESPONDENTS OPINION ON PROBLEMS CREATE BRAND OF
AYURVEDIC HEALTHCARE PRODUCTS

Sl. No	Brand	No. of the Respondents	Percentage
1.	Patanjali	6	12
2.	Himalaya	0	0
3.	Dabur	0	0
4.	Baidhyanath	2	4
5.	Hamdard	3	6
	Total	11	100

Source: Primary Data

The above table shows that the 12 per cent of sample respondents are said that Patanjali brand ayurvedic healthcare products are create more problems. Followed by, 6 per cent of sample respondents are said that they use Hamdard products, 4 per cent of sample respondents have said that they use Baidhyanath products.

Thus it has been concluded that 12 per cent of sample respondents have said that Patanjali brand ayurvedic healthcare products create more problems.

8.5 Chi-Square test

Chi-square test either as a test of goodness of fit or as a test to judge the significance of association between attributes, it is necessary that the observed as well as expected frequencies must be grouped in the same way and the theoretical distribution must be adjusted to give the same total frequency as we find in case of observed distribution.

 $X^2=E(Oij-Eij)2/Eij$

Where,

O = observed frequency

E =expected frequency

Respondent's details

Table No: 8.5

Observed frequency

Nature of family		Nuclear family Joint family		Total	
Respondents	Yes	7	4	11	
opinion on	No	21 18		39	
Problems	Total	28	22	50	

Table No: 8.6

Expected frequency

Nature of family		Nuclear family	Joint family	Total	
Respondents	Yes	6.16	4.84	11	
opinion on	No	21.84 17.16		39	
Problems	Total	28	22	50	

Source: Primary Data

Table No: 8.7

Observed frequency

,			Up to				/
Educational	status	Illi terate	school	Diplo <mark>ma</mark> /	Post	Professionals	Total
1 8			level	degr <mark>ee</mark>	graduate	21	
Respondents	Yes	0	4	5	1	1	11
opinion on	No	4	9	11	8	7	39
Problems	Total	4	13	16	9	8	50

Source: Primary Data

Table No: 8.8

Expected frequency

Educational	Educational status		Up to school level	Diploma/ degree	Post graduate	Professionals	Total
Respondents	Yes	0.88	2.86	3.52	1.98	1.76	11
opinion on	No	3.12	10.14	12.48	7.02	6.24	39
Problems	Total	4	13	16	9	8	50

Source: Primary Data

Table No: 8.9

Observed frequency

No. of members in		2 members	3-4 members	5-6 members	More than 6	
respondents family		only			members	Total
Respondents	Yes	1	7	3	0	11
opinion on	No	9	13	8	9	39
Problems	Total	10	20	11	9	50

Source: Primary Data

Table No: 8.10

Expected frequency

No. of members in		2 members 3-4 members		5-6 members	More than 6			
respondent	s family		only				members	Total
Respondents	Yes		2.2		4.4	2.42	1.98	11
opinion on	No		7.8	1	15.6	8.58	7.02	39
Problems	Total		10		20	11	9	50

Source: Primary Data

Nature of family and problems on selected ayurvedic healthcare products.

$$X^2$$
=E (Oij-Eij)2/Eij = 0.3336
 $V = (v-1) (c-1) = (2-1) (2-1) = 1$
 $V=1, X^2$ 0.05 = 3.84

The calculated value of X^2 is lesser than the table value. The hypothesis is accepted. Hence there is no significance relationship between nature of family and problems on selected ayurvedic healthcare products.

Educational status of respondents and problems on selected ayurvedic healthcare products.

$$X^2$$
=E (Oij-Eij)2/Eij = 3.550
 $V = (v-1) (c-1) = (2-1) (5-1) = 4$
 V =4, X^2 0.05 = 9.49

The calculated value of X^2 is lesser than the table value. The hypothesis is accepted. Hence there is no significance relationship between educational status of respondents and problems on selected ayurvedic healthcare products.

Number of members in respondent's family and problems on selected ayurvedic healthcare products.

$$X^2$$
=E (Oij-Eij)2/Eij = 5.518
 $V = (v-1) (c-1) = (2-1) (4-1) = 3$
 V =3, X^2 0.05 = 7.81

The calculated value of X^2 is lesser than the table value. The hypothesis is accepted. Hence there is no significance relationship between number of members in respondent's family and problems on selected ayurvedic healthcare products.

IX. FINDINGS

Most of the (4.58 per cent) sample respondents are influenced by the television to buy the Ayurvedic healthcare products respectively. 78 per cent of sample respondents have said that they not facing the problems while using the ayurvedic healthcare products and 12 per cent of sample respondents have said that Patanjali brand ayurvedic healthcare products create more problems.

X. SUGGESTIONS

Increase the advertising for ayurvedic products. Because many branded ayurvedic products are available in the market. Second suggestion is advertising is easily reached to the peoples through TV, radio, newspaper etc. Third is, ayurvedic products are easily available in urban areas but rural areas side increases the shops. Rural area peoples are maximum not aware about ayurvedic products so create awareness for that peoples. Fourth is, need full knowledge about ayurvedic products sellers for clarifying the doubt about product for buyers and sometimes particular products advertising is reached the peoples but products not available or not reached in the market so first distribute the products in all shops then give advertising about product. Finally, reduce the price for some ayurvedic products brands.

XI. CONCLUSION

The research was based on problems of select branded ayurvedic healthcare product users in Avinashi taluk. Most of the (4.58 per cent) sample respondents are influenced by the television to buy the Ayurvedic healthcare products respectively. 78 per cent of sample respondents have said that they not facing the problems while using the ayurvedic healthcare products and 12 per cent of sample respondents have said that Patanjali brand ayurvedic healthcare products create more problems.

XII. REFERENCES

- 1. Cobb-Walgren, C.J., Ruble, C.A., and Donthu, N., (1995) "Brand Equity, Brand Preference, and Purchase Intent" Journal of Advertising, 24, 3, 25-40.
- 2. Crimmins, J.C., (1992). Better measurement and management of brand value, Journal of Advertising Research, 32, 11-19.
- 3. De Chernatony, L., and McWilliam, G., (1989). Clarifying how marketers interpret brands. Journal of Marketing Management, 9 (2), 173–88.
- 4. Simon, C, J., and Sullivan, M.W., (1993). The measurement and determinants of brand equity: A financial approach, Marketing Science, 12, 28–52.
- 5. Acharya Y. T., Charak samhita with Ayurveda Deepika Commentary of Chakrapani, Reprint edition, Varanasi (India), Chaukhamba Surbharati Prakashan, 2016; p. 5.

- 6. Devbahadur R., Shabdakalpadrumah (Vol. II), 2015 edition, Varanasi (India), Chaukhamba Surbharati Prakashan, 2015; p.584-5. J'
- 7. Tripathi B., Charaka samhita (Vol. II), 2016 edition, Varanasi (India), Chaukhamba Surbharati Prakashan, 2016; p. 1342.
- 8. https://www.karnataka.gov.in/ayush/siddha%20system.pdf
- 9. http://www.allayurveda.com/discover.asp
- 10. http://www.ayurvedicbazaar.com/ayurvedic_books.php

