

A COMPARATIVE ANALYSIS OF THE APPLICATION OF CROSS CULTURAL PRACTICES MODEL BETWEEN PATIENTS SEEKING TREATMENT IN WESTERN MEDICINE AND TRADITIONAL ASIAN MEDICINE

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Abstract: *The usage of Traditional Asian medicine has been acknowledged in complementing it with western modern medicine especially in Malaysia. Therefore, this study aimed to assess the views on the comparison of the application of cross-cultural practices model between patients seeking Western medicine and Traditional Asian medicine treatments among Malay, Chinese and Indian. A semi-structured interview was conducted among six patients receiving Western medical treatments and Traditional Asian medical treatments. Data from the interview were analysed through three types of practices from Lawrence's (2004) model for cross-cultural practices in comprehending the patients' perspectives on both treatments. Results of the study showed that patients who had received treatments from Western medicine and Traditional Asian medicine agreed that both medications were effective in treating their illnesses. Moreover, the decisions to have chosen such treatments were influenced by their family members, friends' recommendations, and visitations from the medical institutions. Factors such as the the prescription of medication, daily supplements and procedure of the treatment were the major causes in deciding the chosen treatment. Given that different races in Malaysia gave positive feedbacks on both types of treatments, this suggests medical practitioners and authorities to boost their strategies in the incorporation of traditional and modern medicines as aligned with the Malaysia's Traditional and Complementary Blueprint 2018-2022.*

Keywords: *Western medicine, Traditional Asian medicine, perception, Malaysia, patients.*

Introduction

This section discusses the research objective, research questions and the problem statement of the comparative analysis of the application of Cross-Cultural Practices Model between patients seeking treatment in Western medicine and Traditional Asian medicine.

Research Objective

To study the comparison of the application of Cross-Cultural Practices Model between patients seeking Western medicine and Traditional Asian medicine based on three main races which are Malay, Chinese and Indian.

Research Questions

1. What are the differences in reflective practices between patients seeking treatments in Western medicine and patients seeking treatments in Traditional Asian medicine?
2. What are the differences in socio-cultural practices between patients seeking treatments in Western medicine and patients seeking treatments in Traditional Asian medicine?
3. What are the differences in critical practices between patients seeking treatments in Western medicine and patients seeking treatments in Traditional Asian medicine?

Problem Statement

Medicine is very important in a person's life as it helps in preventing any forms of sickness and giving alternatives for a person to get better in their health. There are two main types of medicines which are Western and traditional medicine. Western medicine has been practised as modern medicine in Malaysia for many years now (Thomas et al., 2011). Many people who seek this kind of treatment would go all their way to the hospitals and clinics. Nevertheless, traditional medicine has its own followers as there are people who still seek help from traditional medicine practitioners and consider it important despite the existence of Western medicine in this era (Park et al., 2022). 15]. Moreover, a few hospitals have also incorporated traditional medicine into treatment of patients in their hospitals (Meng et al., 2020).

People who are still sceptical about the usage of drugs in modern medicine would, instead, seek the help of traditional medicine due to its natural properties. (Meng et al., 2020). Moreover, Malaysian Ministry of Health has recognised the importance of traditional Asian medicine earlier this year and tried to combine its usage along with Modern Western Medicine in the Traditional and Complementary Blueprint 2018-2022 as pointed out in (Sani, n.d.). Hence, the incorporation of traditional medicine and modern medicine is expected based on the request by people nowadays.

This study intends to fill the gap of previous research on modern Western and traditional Asian medicine in which this research will gather feedback from patients to study the application of Cross-Cultural Practices Model between patients seeking treatment in Western medicine and Traditional Asian medicine.

Although there are some studies done on the traditional medicine, however, the studies either focus on a type of traditional Asian medicine such as the traditional Malay medicine (Raja et al., 2015) and not all traditional medicines in three major races in Malaysia which are Malay, Chinese and Indian. No studies were done to look at the application of Cross-Cultural Practices Model between patients seeking treatment in Western medicine and Traditional Asian medicine.

Theoretical Framework

Overview of the framework



Figure 2.1: The Model for Cross-cultural Practices (Lawrence, 2004)

Lawrence (Lawrence, 2007) indicated that cross-cultural interaction can shape a peaceful and interactive experience for people. However, the rise of cross-cultural anxieties and disagreement in the media have proven that people need a better education or engagement in communication when communicating with different cultures to avoid any form of negative reaction or dispute. Thus, in 2004, a researcher named Jennifer Lawrence has come up with a model for cross-cultural practices where this model is used to investigate cross-cultural engagement between different races based on their cultural perspectives, beliefs, religions. This model also explains the cross-cultural practices in three ways which are reflective practice, socio-cultural practice and critical practice. These practices will be explained in a table below.

Table 1: Types of Practices in The Model for Cross-cultural Practices (Lawrence, 2004)

Types of Practices	Explanation
Reflective Practice	<ul style="list-style-type: none"> Highlights on the ability to observe, to watch and listen to new knowledge. Creatively applying current and past experiences to reasoning to unfamiliar events while observing. Whether the practice(s) may affect an individual's own practice or not. Allow people to reflect on their own cultural identity by reflecting on what they have observed.
Socio-cultural Practice	<ul style="list-style-type: none"> Focuses on how people seek help, participate either in groups or pairs, social interaction, asking and offering feedback, declining a request and expressing disagreement. This practice is conducted to see whether people are socially and culturally appropriate when interacting with people from a different cultural background. Feedbacks received can be in a positive or negative manner.
Critical Practice	<ul style="list-style-type: none"> Individual's capabilities for a self-awareness of their own belief systems and cultural practices. Individual's capabilities for language critique which include his/her capacities for reflexive analysis of the educational process itself.

Justification of the framework

The task given for this study is to observe and interview patients from different races. Hence, the framework will help this study to observe the patients' reflective perspective in terms of their views on Western and Traditional Asian medicines as this framework explains the reflective practice which involves the cultural engagement through an observation. The socio-cultural practice and critical practice will be applicable during the interview session where researchers came out with a list of interview questions and the patients' responses are expected to cover both practices.

Methodology

Rationale for using Qualitative Approach

For this research, a basic interpretive qualitative approach is followed. Qualitative research is used when the researcher intends to find an in-depth understanding of certain social phenomena occurring in a natural setting (Creswell et al., 2018). Furthermore, Anney (Anney, 2014) stated that basic interpretive qualitative research provides descriptive statements to get a better understanding of a study using data collected in a variety of ways, such as interviews, observations, and document review. The existing practices from the framework used are being analysed to get a better understanding of the patients' views on the treatments that they have received. For this study, the approach is to analyse patients' views or beliefs on Western and Traditional Asian medicines.

Research Design

The research design is a qualitative approach, and it is divided into two parts. Firstly, the researchers conducted interview sessions with patients undergoing treatments using Western and patients undergoing treatments in Traditional Asian medicine and after getting consents from all parties concerned the sessions were audio recorded. Then, the researchers listened and transcribed the audio recordings to analyse the interviewees' responses. These research methods are conducted as to answer the three (3) research questions mentioned earlier. The data analysis was carried out and explained in a later section below.

Research Instrument

One of the instruments that is used in this study is Lawrence's Model of Cultural Practice (2007) which has been explained in the section earlier. Hence, two sets of interview questions that involve Western and Traditional Asian medicine are created. These interview questions comprise of a demographic question and ten questions regarding the patients' observation and opinions on Western and Traditional Asian medicine.

Sampling

For this study, two types of samplings are used to help the researchers to answer the research questions. Firstly, six (6) patients are chosen randomly and divided into two categories; patients who have received Western medical treatments and patients who have received Traditional Asian medical treatments. Each category is comprised of three different races which are Malay, Chinese and Indian and the researchers will analyze the patients' observation and opinions on the two types of medicines.

According to (Gentles et al., 2015), data from various sources are more comprehensive due to the fact that researchers will gain different perspectives that provide stronger findings and discussions compared to only using one source. Thus, the researchers have decided to have

multiple patients from three main races in Malaysia; Malay, Chinese and India for both treatments as the patients' cultural beliefs and perspectives could have an influence in the medical treatments chosen. Although there are vast numbers of ethnic groups in Malaysia, these three communities were chosen as they make up 99% of the total Malaysian population as of 2021 (Federal et al., n.d.).

In addition, another sampling method used is interview audio transcriptions between the researchers and patients and used as a reference in analysing the data. Transcriptions of audio will help researchers gain a better understanding and avoiding any misunderstanding during the interview session to avoid data collection error (Rosenthal, 2016).

Description of Participants and Research Sites

The descriptions of all patients are based on the information disclosed by the patients during the interview session. Some details vary due to patient confidentiality. Table 2 and table 3 show the description of the patients who have received medical treatment from practitioners in Western and Traditional Asian medicine.

Table 2: Description of the patients receiving Western medicine

Patients receiving Western medicine

Patient W1	Type: Malay male patient Age: 25 years old Working status: Employed Reason(s): Fractured bone Treatment venue: Hospital Shah Alam, Selangor
Patient W2	Type: Chinese female patient Age: 22 years old Working status: MSU student Reason(s): Allergic reaction Treatment venue: Hospital Shah Alam, Selangor
Patient W3	Type: Indian female patient Age: 51 years old Working status: Unemployed Reason(s): Hyperthyroidism and high blood pressure Treatment venue: Hospital Tapah, Perak

Table 3: Description of the patients receiving Traditional Asian medicine

Patients receiving Traditional Asian medicine

Patient A1	Type: Malay male patient Age: 25 years old Working status: Employed – Brand and Communication Executive Traditional treatment: Malay traditional massage for a fractured arm Treatment venue: Urutan Tradisional Kak Jah, Kulim, Kedah
Patient A2	Type: Chinese female patient Age: 21 years old Working status: Employed – Business Development Officer Traditional treatment: Acupuncture Treatment venue: Chinese Traditional Medicine Faculty, Nilai INTI International University, Negeri Sembilan
Patient A3	Type: Indian male patient Age: 23 years old Working status: Manipal International University student Traditional treatment: Ayurveda Treatment venue: Sri Amma Ayur Centre, Pulau Pinang

Data Collection Procedure

The data collection procedure is divided into two parts. Firstly, relatives or friends were contacted, as well as medical institutions and permission was requested to conduct an interview session for this study. Then, the researchers visited the hospitals and traditional medical institutions to observe the patients' observations and opinions on the Western medicine and Traditional Asian medicine. The researchers also conducted a semi-structured interview session where the questions are based on the three research questions. McIntosh and Morse [6, p. 4] mentioned in their study that, "The goal of conducting a semi-structured interview is to obtain information that researchers already have in mind which in a research setting, it refers to either the researchers' hypothesis or research questions.". Moreover, semi-structured interviews presents open-ended questions to the participants, allowing for further probing in the responses given to provide more in-depth and rich data (Jamshed, 2014). Thus, the researchers have decided to conduct a semi-structured interview session. Both observation and interview sessions were conducted using the guideline from the framework used in this research.

Findings and Discussions

This section discusses the findings on the of six interview sessions with patients who have received medical treatment from practitioners of Western medicine and Traditional Asian medicine. The observation was based on the theoretical framework of Model for Cross-Cultural Practices (Lawrence, 2004) which comprises three significant practices; reflective practice, socio-cultural practice and critical practice. The findings will be discussed following the research questions.

RQ1: What are the differences in reflective practices between patients seeking treatments in Western medicine and patients seeking treatments in Traditional Asian medicine?

The reflective practice was ascertained by asking patients to answer the following questions: How effective is this treatment to your body? Does this drug intend to cure your underlying condition or give a relief from your symptoms? Patient W1, Patient W2 and Patient W3 had similar opinions where they agreed that Western medicine had cured their underlying condition and given relief to their symptoms in a short period of time. These patients also viewed that few signs of progress had been made when they took the medication. The following are answers given by the patients during the interview sessions.

After 3 weeks, they are progress based on my X-ray reading. The medication really improves my arm's condition.

(Patient W1)

I think it's both. It giving you underlying condition and give you relief. For example, when I have the allergic, it's really painful and it's giving me relief when they inject me some sort of virus that give me relief and make the allergic go away in two hours.

(Patient W2)

So far no any bad symptoms and allergic to medicine but sometimes I feel tired easily.

(Patient W3)

Similarly, for Traditional Asian medicine, all patients agreed that the treatment had been miraculously effective in helping them to relieve the pain that they had experienced. During the interview, Patient A1 and Patient A3 were initially in doubt with the effectiveness of traditional treatment. However, their opinions changed after they had undergone the treatment. In contrast, Patient A2 was adopting the 'reflective in action' practice as she believes that the treatment is able to cure internal and external illness.

I wouldn't exactly classify it as a drug but the fact that it helps relieve the pain, I could actually perform my physiology exercises more effectively and promote better full recovery

(Patient A1).

The treatment is effective and the medicine did relived my pain

(Patient A2).

Yes it does. Even though it's painful, but it works!

(Patient A3)

Reflective practice was also applied to the patients' knowledge about the existence of Western medicine. The patients were asked the question: How do you discover the existence of this treatment? Patient W1, Patient W2 and Patient W3 agreed that the existence of Western medicine was discovered by the influence of family members who trust the Western treatment compared to traditional treatment, friends' recommendations and other people's opinions about the medical treatments and from practitioners of Western medicine.

It's quite common that most people would seek for the western way to treat fractured bones. So basically, I found out based on what I see & heard from other people.
(Patient W1)

I think it started with my family because my family is a big believer on Western treatment compared to the traditional treatment.
(Patient W2)

By friend and family recommendation
(Patient W3)

Whereas, when the same question was asked to the patients who went to seek Traditional Asian medicines, the answers were as below:

It was initially for demo purpose as we were there for a visit...
(Patient A1)

..Through relatives
(Patient A2)

The elders in my village that time suggested it & brought me there.
(Patient A3)

Patient A1 seeking Traditional Asian medicine was also asked the following question: Would you have decided to seek for this line of medication if you weren't there for a visit? And he answered that "*I would not otherwise recommended by a friend. But after trying it, I definitely would*".

In conjunction with the 'reflection on action' practice, Patient 3 mentioned that he studied about the bone treatment after receiving the treatment. He stated that he was feeling uncertain about the effectiveness of traditional treatment in curing his broken arm. However, his uncertainty was resolved after receiving a medical treatment from a practitioner in traditional medicine. Hence, he holds an opinion that both Western and traditional treatment have few similarities but with different approaches.

According to Patient A3: "...After that, I studied a bit about injured bones treatment & I realize traditional & modern treatment are actually using the same methods, but with different approach. While hospital are using bandage & plaster to make sure the bones are staying still so it can self heal, traditional practice are using bamboo & cloth with ointment to achieve that. After all, bones treatment is all about time. With enough time, it will self heal the injury. From the analysis above, there were similarities in reflective practices of both treatments, in which patients were more reflected in seeking Western and Traditional medicines due to their observations before and after the application of the practices as they tend to use their past experiences in seeking treatments.

RQ2: What are the differences in socio-cultural practices between patients seeking treatments in Western medicine and patients seeking treatments in Traditional Asian medicine?

Socio-cultural practice is taken from cross-cultural communication theory where it specifies in regard to socio-cultural competencies of seeking help and information, engaging in a group, making social contact, seeking and offering feedback, expressing disagreement and refusing a request (Lawrence, 2007).

In terms of Western medicine, socio-cultural practice was applied as this study discovered a few reasons for patients to seek help from practitioners of Western medicine. Patient W1, Patient W2 and Patient W3 had expressed their views that they were influenced by their family members, other people's help and testimonials. In addition, Patient W2 also added that the easy access to Western medicine and the establishment of Western medicine were also one of her reasons for choosing Western medicine. The following excerpts further show the remarks obtained from the patient during their interview sessions. They were asked the question of "Why have you decided to seek this line of medical treatment?".

A stranger helped to call the ambulance & the ambulance decided to dispatch me to the nearest public hospital which is the Shah Alam Hospital.

(Patient W1)

I think most of the prominent reason is why I seeking this treatment is because of my family obviously. Secondly because Western treatment, I think it can easily be obtained than traditional treatment where you have to spend, you have to actually search for someone that you trust before you receive the traditional treatment. And additionally, traditional treatment is not that established compared to Western treatment.

(Patient W2)

Because I've seen a lot of testimonials from people so I decided to seek this treatment.

(Patient W3)

In contrast, this study had also identified a few reasons for patients to seek help from practitioners in traditional medicine. Patient A1 mentioned that friends' recommendation would be one of the reasons to seek help from practitioners in traditional medicine as a lack of exposure and understanding towards traditional treatment still exist. He also added that he became aware of the existence of the treatment by visiting the traditional medicine institution and receiving a demonstration made by the traditional medicine practitioner. As a result, the success of the treatment had managed to ease his illness which was sprained ankle.

On the other hand, Patient A2 discovered the existence of traditional treatment through his relatives. He also mentioned that the traditional treatment is comparable to the Western treatment in his opinion. This can be strengthened with the statement made by Patient A3 where he stated that traditional treatment had helped him to heal more quickly than Western medicine. "I didn't really trust traditional medicine practice before the incident, but then after the session & my arm healed, it changed my point of view. It's really great.. I healed faster compared to modern treatment".

The patients were also asked questions on their views concerning traditional/alternative treatments, and the following are their responses.

The society lacks exposure and understanding to traditional treatments as there are not many practitioners around these days. We often just go to the doctor's which are.. practising the western medicines.

(Patient A1)

My views on traditional treatments are that they compatible with modern treatment but it's is advisable to research since the severity may vary.

(Patient A2)

From the findings above, both Western and Traditional Asian medicines had the similar opinions in socio-cultural practices as all patients received positive feedbacks for each treatment. Correspondingly, patients sought help and feedbacks, as well as participated in social interaction through family members, friends and experts especially medical practitioners from medical institutions in seeking Western and Traditional Asian treatments.

RQ3: What are the differences in critical practices between patients seeking treatments in Western medicine and patients seeking treatments in Traditional Asian medicine?

Critical practice “encompasses twin capacities: people’s capabilities for a self-awareness of their own belief systems and cultural practices (critical self-awareness) and their capabilities for language/power critique, including ‘their capacities for reflexive analysis of the educational process itself’ (critical discourse awareness)” (Lawrence, 2007)

In terms of Western medicine, critical practice was applied as this study disclosed the patients’ beliefs in Western medicine. This is because Patient W1, Patient W2 and Patient W3 pointed out that practitioners of Western medicine had done their research on human anatomy and are able to cure patients in a short period of time. They also added that their beliefs in Western medicine were influenced by their family members. Their answers to the question “*In your opinion, why do you believe in Western medicine?*” are as shown below.

The Western medicine did a deep research on human anatomy to understand what's good and bad for our body. Hence, I prefer to seek western treatment.

(Patient W1)

I believe in Western medicine because of my family background. my parents believe in Western medicine compared to traditional medicine.

(Patient W2)

Western medicine can cure patient in a short duration and we can get the result of disease in quick.

(Patient W3)

The critical practice was also applied in the patients’ observation of the information and consultation given by practitioners in Western medicine. They are given the question: *In your opinion, do you think Western practitioners have delivered good information and consultation on Western medicine to the patients?*

Patient W1, Patient W2 and Patient W3 agreed that practitioners in Western medicine had delivered cohesive consultations on Western medicine. Patient 1 stated that his doctor had provided him with ample information that helped speed up his recovery. “Yes, I think they

deliver good information and consultation because they provided me with endless information and consultation which really helped me to speed up my recovery”.

Whereas Patient W2 mentioned the procedure of the treatment and the drug prescribed for her. *“the doctor, before she diagnosed that I have allergic, she first take the temperature of my body. And she diagnosed me very well in terms of what else the conditions that I have like fever or any sickness. So after that, after everything has been diagnosed thoroughly, then she proceeded to give me IU drip for like three hours and after that prescribed me with the correct medicine”.*

Patient W3 also had the same opinion where she mentioned that practitioners in Western medicine had prescribed her with a correct medication and the vitality of conducting a medical test. *“Yes because they always inform us what type of medicine they will give and will make a test. This test will decide whether the medicine can cause side effects or not.”*

As for the traditional Asian treatment, the information and consultation that the practitioners had delivered to the patients contributed to their beliefs. This is because all patients agreed that the traditional practitioners had delivered necessary information to patients. Patient 3 had also explained his observation on this matter by comparing the traditional treatment consultation with the Western treatment. Based on his experience, he stated that hospitals only provide medical prescription with a limited consultation to the patients. Besides, Patient A3 also gave a critical observation about the traditional treatment where he stated that though the information and consultation provided are better than modern hospitals, traditional treatment has some shortfalls as this practice has no uniformity and no legal bodies or authority is assigned to certify these practitioners.

Frankly, it's more than what modern hospitals provide actually. While hospitals provide only the medicine prescription with little consultation, traditional practitioner give a lot of "pantang larang" to their patients... The problem with traditional practice is, there is no uniformity on standardize practice between the practitioner... unlike modern practice, there is no legal bodies or authority to license or approve a practitioner, thus anyone can simply claim that he is a traditional practitioner. The problem with that is, when a complication or bad effect occur to a patient after the treatment, no one can take any action whatsoever to defend the patient.

(Patient A3)

In this case, results exhibited similarities in applying critical practices among all patients especially in their capabilities for a self-awareness of their own belief systems and cultural practices in choosing both Western and Traditional treatments. This has caused patients to select which treatment that they felt best in curing their illnesses as they had critically thought and be educated with the information and knowledge gained from each treatment.

Conclusions

This study observes the perceptions of cross-cultural practices between Western and Traditional Asian medicines among patients in Malaysia. Qualitative methods were used to capture an in-depth understanding on the patients’ perspectives on the type of treatments that they received. It was observed that all the patients’ illnesses were cured regardless of the different medicine treatments. For Western medicine, results demonstrated that the patients were able to be cured in a short period of time as there are plenty of research done on Western medicine treatments

to illnesses. Patients tend to choose this type of treatment as they were able to gain plenty of information and consultation about their illnesses.

Traditional Asian medicine treatments, on the other hand, were found to be a bit lacking in terms of the information and consultation as patients were only given necessary information about the treatment that they received. Despite that, patients seeking such treatment were given consultation on daily supplements taken with their meals. Additionally, herbs were recommended by Traditional Asian medicine practitioners in promoting a speedy recovery. Regardless of the differing views on the effectiveness of the medicines and its consultations from the practitioners, it was worth to note that the main purposes of patients seeking either Western medicine or Traditional Asian medicine treatments were based on suggestions and recommendations from family members, friends and even through visitation to the medical institutions. Therefore, it can be proven that all patients had observed the effectiveness of traditional treatment and modern treatment and applied the reflective practice in making their decisions. Hence, it can be concluded that the socio-cultural practices exist in both Western and traditional Asian treatment.

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