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The Views of Relatives of Patients Applying to the Family Health Centre in Kütahya on Traditional and Complementary Non-Medical Practices: A Descriptive Study

Kütahya İlinde Aile Sağlığı Merkezine Başvuran Hasta Yakınlarının Tıp Dışı Geleneksel ve Tamamlayıcı Uygulamalara İlişkin Görüşleri: Tanımlayıcı Araştırma

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ABSTRACT Objective: This study aims to examine knowledge-behaviours of patient relatives, who applied to the Gaybi Efendi Family Health Centre (FHC) in Kütahya, towards traditional-complementary practices. **Material and Methods:** Study sample consists of the relatives of the patients who are treated at Gaybi Efendi FHC in Kütahya. In this descriptive cross-sectional study, a face-to-face questionnaire was applied to 330 patients' relatives, the study was conducted between October and December 2019. In the relevant dates, individuals who received service from the relevant institution in three months formed the population, those who agreed to participate in the study formed the sample. **Results:** The majority of participants included in the study were students, homemakers. 71.7% of the participants were women, 87.7% of them did not receive training in traditional-complementary medicine, 60.7% of them reported that traditional-complementary practices could be used without consulting a doctor, 51.6% of them said that traditional-complementary practices could be used for simple diseases, 42.1% of them said that traditional-complementary practices delay getting medical treatment, 36.4% of them said scientific evidence is necessary in traditional-complementary practices. University graduates, students and women were found to be more sensitive to the thought that scientific evidence is needed for traditional practices ($p<0.05$). **Conclusion:** It was found out that the groups with low education, with extended families, males had insufficient correct information about traditional practices and they need training. The problem arose that those without social security tended to these practices without consulting a doctor, and the misdirection of low-income people to these practices revealed the necessity of multidisciplinary planning on the subject.

Keywords: Non-medical; disease; traditional; complementary practices; treatment

ÖZET Amaç: Bu çalışmanın amacı, Kütahya'da Gaybi Efendi Aile Sağlığı Merkezine (ASM) başvuran hasta yakınlarının, tıp-dışı geleneksel-tamamlayıcı uygulamalara yönelik bilgi-davranışlarını incelemektir. **Gereç ve Yöntemler:** Çalışmanın örneklemini, Kütahya'da Gaybi Efendi ASM'ye başvuran hastaların yakınları oluşturmaktadır. Tanımlayıcı tipteki bu kesitsel çalışmada, 330 hasta yakınına tıp-dışı geleneksel-tamamlayıcı uygulamalar konusunda bilgi-davranışları, sosyodemografik anketleri yüz yüze uygulanmıştır. Çalışma, 2019 Ekim-Aralık aylarında yapılmıştır. İlgili tarihlerde 3 aylık süreçte ASM'ye başvuranlar evreni, gönüllüler örneklemi oluşturmuştur. **Bulgular:** Hasta yakınlarının çoğunluğunu öğrenci ve ev hanımları oluşturuyordu. Katılımcıların %71,7'i kadın olup, %87,7'si geleneksel-tamamlayıcı tıp eğitimi almamışlardı. Yüzde 60,7'si geleneksel-tamamlayıcı uygulamaları doktora danışmadan kullanmaktaydı. Katılımcıların %51,6'sı geleneksel-tamamlayıcı uygulamalar basit hastalıklarda kullanılabilir demiştir, %42,1'i geleneksel-tamamlayıcı uygulamalar tedavi almayı geciktirir demiştir, %36,4'ü geleneksel-tamamlayıcı uygulamalarda bilimsel kanıt gerekli demiştir. Üniversite mezunlarının, öğrencilerin ve kadınların geleneksel-tamamlayıcı uygulamalarda bilimsel kanıt gereklidir düşüncesi fazlaydı ($p<0,05$). **Sonuç:** Düşük eğitimlilerin, geniş ailedekilerin, erkeklerin, tıp-dışı geleneksel-tamamlayıcı uygulamalarla ilgili doğru bilgilerinin yetersiz olduğu, eğitimlere gereksinimleri olduğu saptanmıştır. Sosyal güvencesizlerin, doktora danışmadan bu uygulamalara yönelmesi sonucuna varılmıştır. Düşük gelirlilerin, bu uygulamalara yanlış yönelmesi konuyla ilgili multidisipliner planlamalar gereklidir.

Anahtar Kelimeler: Tıp dışı; hastalık; geleneksel; tamamlayıcı uygulamalar; tedavi

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According to the World Health Organization, traditional medicine is the whole of knowledge, skills and practices (explainable or not) based on theories, beliefs and experiences specific to different cultures, used in the prevention, diagnosis, improvement or treatment of physical and mental diseases as well as in maintaining good health.[1,2]

Traditional and complementary medicine views can be classified as "strongly opposed", "supporting these practices", "between these two views".[3] The clinical applicability was published in the Traditional and Complementary Medicine Regulation on Clinical Trials and the official gazette dated March 9, 2019, numbered 30109.[4]

There is little research on traditional, complementary practices in Turkey. It was reported that the rate of using traditional, complementary approaches was between 42.29% and 70%.[5]

Today, in China, 95% of hospitals use traditional and modern medicine together; in Japan, modern medicine workers also deal with traditional, complementary medicine; in Cuba, 60% of the population uses traditional medicine, and in European Union countries, homoeopathy is practised at high rates.[1]

Traditional, complementary practices are expected to be beneficial to the health and quality of life of individuals. In practice, it is necessary to adhere to the ethical principle of doing no harm.

It is a problem that traditional medicine practitioners contain widespread and variable information, and most traditional treatment methods also lack scientific research-based evidence. Traditional practices vary according to culture, society and beliefs. This study aims to examine the knowledge and behaviours of patient relatives, who applied to Gaybi Efendi Family Health Centre (FHC) in Kütahya, towards non-medical traditional and complementary practices.

MATERIAL AND METHODS

DATA SET AND SOURCE

The data of the study were obtained by the survey method. The questionnaire form prepared to obtain the data of the study consists of 2 parts including questions to determine the demographic characteristics, family structure and economic conditions of the individuals, and also to determine their views on traditional and complementary practices.

POPULATION AND SAMPLE

The sample of the study, which was planned in descriptive cross-sectional type, consists of 330 relatives of patients who were treated at Gaybi Efendi FHC located in the city centre of Kütahya. The reason for choosing this FHC is its reflecting the Kütahya tradition and culture of Gaybi Efendi neighbourhood located in the centre of Kütahya. With a population of 10,097 living in the large region has been discussed. Since it was studied according to the principle of choosing a doctor and providing a wide range of data using diversity sampling method. In the research population, where the population is 100,000,000, 385 people were considered sufficient for a=0.05 significance level and d=0.05 sampling error p=0.5 q=0.5, and it was calculated in this way. The survey application of the study was carried out between October and December 2019. The sample consisted of voluntary participants, patient relatives who received service from the relevant FHC between these months.

ETHICAL DIMENSION

The study was carried out by obtaining an informed consent form and obtaining the ethics committee approval from Kütahya Health Sciences University (date: 18.12.2018, no: 4135). Questionnaire forms prepared by the researchers based on the literature were applied to the volunteers participating in the study by face-to-face survey method. The study complied with the principles of the Declaration of Helsinki.

DEPENDENT VARIABLES

Sociodemographic data.

INDEPENDENT VARIABLES

Responses to the survey questions of the relatives of the patients are the independent variables.

INCLUSION CRITERIA

It consists of 330 relatives of patients treated at Gaybi Efendi FHC located in the city centre of Kütahya. In-

dividuals who agreed to participate in the study, did not have mental problems, could read and write, were not visually impaired, did not have hearing impairment and individuals over the age of 18 were recruited. Participants who came to the relevant FHC in October-December were included.

EXCLUSION CRITERIA

Individuals who did not accept participating in the study, who were illiterate, visually impaired, with hearing impairment and mental problems and under the age of 18 were excluded.

LIMITATIONS

The study's findings are limited to the opinions of the relatives of the patients who received service from the FHC at the relevant date.

DATA ANALYSIS

Descriptive statistics and chi-square analysis were used.[6,7]

RESULTS

In Table 1, the study sample consists of 330 relatives of the patients. 71.7% of the participants were females. The education level of 47.3% of the participants was university, 61.1% of the participants reported that they read books, 87.7% of the participants had not received training on traditional-complementary medicine.

In Table 2, 60.7% of the participants believe that traditional, complementary practices should not be used without consulting a doctor, and 41.4% of the participants stated that traditional, complementary

TABLE 1: Sociodemographic characteristics of the participants.

		Frequency	Percent
Gender	Female	236	71.7%
	Male	93	28.3%
Marital status	Married	146	44.5%
	Single	171	52.1%
	Widowed	11	3.4%
Educational status	Primary school	87	27.3%
	High school	81	25.4%
	University	151	47.3%
Profession	Civil servant	48	16.2%
	Worker	56	18.9%
	Retired	22	7.4%
	Homemaker	77	26.0%
	Student	93	31.4%
Do you have habits about reading books/newspapers/magazines?	Yes	198	61.1%
	No	116	35.8%
	I do not know	10	3.1%
Economic situation	Low	35	10.7%
	Moderate	234	71.8%
	Good	57	17.5%
Social security	Yes	289	88.9%
	No	36	11.1%
Have you received training on traditional and complementary medicine?	Yes	40	12.3%
	No	286	87.7%
Family structure	Extended family	48	14.7%
	Nuclear family	265	81.0%
	Broken family	14	4.3%

practices are not as effective as medical treatments, 66.4% of the participants think that more scientific evidence is needed for traditional, complementary practices, 42.1% of the participants think that traditional, complementary therapies delay getting the right medical treatment.

The explanations of Table 3, Table 4 and Table 5 are interpreted together.

In Table 3, Table 4 and Table 5, it is more common among the participants to say that women prepare the body for non-medical traditional, complementary practices compared to men, thus a better response to medical treatment. In addition, it was found that women were more sensitive to the thought that more scientific evidence is needed for non-medical traditional, complementary practices than men ($p<0.05$).

A statistically significant relationship was found between the education level of the individuals and the thought that more scientific evidence should be needed before applying non-medical methods ($p<0.05$). As the education level of individuals increases, the number of those who say that there is a need for scientific evidence in the use of non-medical traditional, complementary methods also increases.

A statistically significant relationship was found between marital status and the statement, "More scientific evidence should be obtained before non-medical traditional and complementary methods can be used therapeutically" ($p<0.05$).

A significant statistical relationship was found between the statement "More scientific evidence should be obtained before non-medical traditional and complementary methods can be used therapeutically" and the profession ($p<0.05$). It was observed that this thought was more common among students.

It was found that those who have the habit of reading need more scientific evidence for traditional, complementary methods than those who do not ($p<0.05$).

A significant relationship was found between the economic status of individuals and the statement

TABLE 2: Descriptive statistics on traditional and complementary practices.

		Frequency	Percent
Traditional and complementary methods can be used without consulting a doctor.	Yes	67	20.9%
	No	195	60.7%
	I do not know	59	18.4%
Traditional and complementary methods are as effective as medical treatment.	Yes	75	23.1%
	No	134	41.4%
	I do not know	115	35.5%
Traditional and complementary methods prepare the body to defend itself and thus better respond to medical treatment.	Yes	108	33.5%
	No	92	28.6%
	I do not know	122	37.9%
Traditional and complementary methods can only be used for simple diseases that can be treated. Not for diseases that cannot be treated.	Yes	166	51.6%
	No	60	18.6%
	I do not know	96	29.8%
Traditional and complementary methods should only be used as a last resort where medical treatment is inadequate.	Yes	110	34.3%
	No	117	36.4%
	I do not know	94	29.3%
More scientific evidence must be obtained before traditional and complementary. methods can be used therapeutically.	Yes	211	66.4%
	No	32	10.1%
	I do not know	75	23.6%
Traditional and complementary methods delay people from getting the right medical treatment.	Yes	133	42.1%
	No	84	26.6%
	I do not know	99	31.3%

TABLE 3: Distribution of views on traditional and complementary practices by sociodemographic characteristics.[1]

		Traditional and complementary methods can be used without consulting a doctor			Traditional and complementary methods are as effective as medical treatment			Traditional and complementary methods prepare the body to defend itself and thus better respond to medical treatment			Traditional and complementary methods can only be used for simple diseases that can be treated, not for diseases that cannot be treated		
		Yes	No	I do not know	Yes	No	I do not know	Yes	No	I do not know	Yes	No	I do not know
Gender	Female	50	137	41	57	90	84	83	57	90	121	41	68
	Male	16	58	18	18	43	31	24	35	32	44	19	28
Educational status	Primary school	18	47	20	26	26	34	26	24	35	42	17	26
	High school	16	50	13	18	34	28	28	21	31	47	10	22
	University	31	94	24	29	70	51	53	44	52	74	32	44
Marital status	Married	31	89	20	37	59	47	39	44	59	72	28	43
	Single	34	106	39	37	74	68	67	48	63	93	31	53
Profession	Civil servant	10	35	3	9	26	13	21	15	11	25	8	15
	Worker	11	32	10	10	21	23	11	18	25	24	10	20
	Retired	8	11	3	7	7	8	7	5	9	9	5	7
	Homemaker	14	44	16	26	26	24	25	21	30	43	14	19
	Student	18	55	20	17	42	34	34	25	34	49	16	27
Do you have habits about reading books/newspapers/magazines	Yes	39	124	30	43	85	67	66	54	73	102	37	54
	No	25	64	25	30	44	41	35	34	46	58	22	35
Economic status	Low	8	18	9	9	14	12	9	12	14	17	9	9
	Moderate	47	140	42	54	92	86	81	57	92	122	41	68
	Good	12	36	8	12	27	17	18	23	15	27	10	18
Social security	Yes	59	180	47	67	127	94	98	90	98	125	55	79
	No	7	13	12	8	5	20	10	2	21	13	5	15
Have you received training on traditional and complementary medicine?	Yes	15	21	4	15	16	9	18	11	10	17	12	11
	No	52	174	54	60	117	105	90	81	111	149	48	84
Family structure	Extended	16	21	10	14	13	20	14	13	20	21	10	16
	Nuclear	48	166	46	59	115	89	90	75	97	138	49	75
Is it correct to use traditional and complementary medicine methods instead of the drugs used for your disease?	Yes	40	40	21	54	24	23	65	13	23	50	22	28
	No	11	100	7	10	86	24	24	66	29	71	22	27
	I do not know	16	55	30	11	24	67	19	13	69	44	16	41

TABLE 4: Distribution of views on traditional and complementary practices by sociodemographic characteristics.[2]

		Traditional and complementary methods should only be used as a last resort where medical treatment is inadequate			More scientific evidence must be obtained before traditional and complementary methods can be used therapeutically			Traditional and complementary methods delay people from getting the proper medical treatment		
		Yes	No	I do not know	Yes	No	I do not know	Yes	No	I do not know
Gender	Female	76	90	63	162	21	43	97	60	68
	Male	34	27	30	48	11	32	35	24	31
Educational status	Primary school	30	25	28	43	11	29	34	25	22
	High school	24	31	25	56	8	14	36	17	25
	University	52	59	39	109	13	27	60	41	49
Marital status	Married	55	45	41	82	19	39	64	34	39
	Single	55	71	52	127	13	36	68	49	60
Profession	Civil servant	17	16	15	38	4	6	23	10	15
	Worker	15	15	24	27	5	22	20	14	20
	Retired	9	6	6	10	3	8	4	9	7
	Homemaker	31	28	15	48	8	17	38	17	16
	Student	27	41	25	64	10	17	34	25	33
Do you have habits about reading books/ newspapers/ magazines?	Yes	71	71	50	136	18	36	76	51	63
	No	37	42	36	67	11	36	51	26	35
Economic status	Low	6	18	11	19	7	9	11	15	8
	Moderate	81	76	72	151	19	57	99	52	75
	Good	23	23	10	41	5	9	23	16	16
Social security	Yes	99	109	77	193	28	61	123	70	87
	No	10	8	15	17	2	14	10	12	11
Have you received training on traditional and complementary medicine?	Yes	12	18	10	29	3	8	16	14	10
	No	98	99	83	182	29	66	117	70	88
Family structure	Extended	15	14	18	24	2	19	17	13	16
	Nuclear	92	97	72	179	28	53	112	67	78
Is it correct to use traditional and complementary medicine methods instead of the drugs used for your disease?	Yes	34	43	23	62	11	24	38	38	21
	No	46	50	24	88	16	16	65	25	29
	I do not know	29	24	47	61	5	34	30	21	48

"Traditional, complementary methods can only be used as a last option when medical treatment is insufficient" ($p<0.05$).

Among the participants, the view that traditional, complementary methods should not be used without consulting a doctor was more common among those with social security than those without social security. In addition, the view that traditional, complementary methods cannot be as effective as medical treatment is more common among those with social security than those without social security. It was also found that those with social security were more sen-

TABLE 5: Chi-square analysis results for views on traditional and complementary practices.

	Traditional and complementary practices can be used without consulting a doctor	Traditional and complementary practices are as effective as medical treatment	Traditional and complementary practices prepare the body to defend itself and thus better respond to medical treatment	Traditional and complementary practices are used for simple curable diseases and cannot be used for incurable diseases	Traditional and complementary practices should be used as a last resort when medical treatment is inadequate	More scientific evidence must be obtained before traditional and complementary practices can be used therapeutically	Traditional and complementary practices delay getting the right medical treatment
Gender	0.658	0.399	**0.041***	0.746	0.266	**0.004***	0.727
Educational status	0.652	0.139	0.874	0.487	0.545	**0.013***	0.690
Marital status	0.221	0.468	0.157	0.879	0.237	**0.031***	0.328
Profession	0.301	0.141	0.300	0.911	0.119	**0.031***	0.145
Do you have habits about reading books/ newspapers/ magazines?	0.286	0.598	0.793	0.891	0.552	**0.038***	0.620
Economic status	0.692	0.813	0.107	0.809	**0.042***	0.133	0.131
Social security	**0.010***	**0.002***	**0.001***	0.104	0.074	**0.029***	0.247
Have you received training on traditional and complementary medicine?	**0.017***	**0.047***	0.151	0.139	0.496	0.681	0.407
Family structure	**0.026***	0.118	0.748	0.598	0.318	0.005*	0.698
Is it correct to use traditional and complementary medicine methods instead of the drugs used for your disease?	**0.000**	**0.000**	**0.000**	**0.043**	**0.000**	**0.004**	**0.000**

Note: The values in the table are the significant p value obtained from the chi-square test. *and bold: Indicates statistically significant values.

sitive to the idea that scientific evidence is needed for traditional, complementary methods compared to those without social security ($p<0.05$).

A statistically significant relationship was found between the individuals' traditional and complementary medicine education status. And the statements "non-medical traditional and complementary methods can be used without consulting a doctor" and "non-medical traditional and complementary methods are as effective as a medical treatment" ($p<0.05$). It is more common for those who do not have traditional, complementary practice training to not use these practices without consulting a doctor, and those who do not have training on the subject are more likely to think that traditional practices are as effective as medical treatment.

A statistically significant relationship was found between the family structure of individuals, and the statement "Traditional and complementary methods other than medicine can be used without consulting a doctor" ($p<0.05$). It is more common for those living in a nuclear family than those living in an extended family that these methods should not be used without consulting a doctor.

A significant relationship was found between the statement "It is correct to use traditional and complementary medicine methods instead of the drugs used for your disease", and the statement "Traditional methods should not be used without consulting a doctor" ($p<0.05$).

A significant relationship was found between the statement "It is correct to use traditional and complementary medicine methods instead of the drugs used for your disease" and the statement "Non-medical traditional methods are not as effective as a medical treatment" ($p<0.05$).

A significant relationship was found between the statement "It is correct to use traditional and com-

plementary medicine methods instead of the drugs used for your disease" and the statement "More scientific evidence is needed" ($p<0.05$).

A significant relationship was found between the statement "It is correct to use traditional and complementary medicine methods instead of the drugs used for your disease" and the statement "These methods delay people to receive the right treatment" ($p<0.05$).

DISCUSSION

In the present study, almost half of the participants believe that "Traditional non-medical complementary practices should not be used without consulting a doctor." In their 2012 study, Özyazicioğlu et al. found that 60-80% of those who used the traditional, complementary approach hid their practices from their doctors.[8] Belek, stated in his 2016 study that reasons such as inequalities in health services, poverty, and inability to access services create distrust in going to a doctor.[9] Thearle's 1998 study and Huang's 2010 study found that 60-80% of cancer patients hide from their doctors while using traditional methods.[10,11]

In the current study, the majority of the participants think that "Non-medical traditional, complementary practices are not as effective as a medical treatment." In Gürün's 2016 study, people stated that traditional, complementary practices were safer because they were natural.[12] And individuals believed that traditional practices had fewer side effects. He also stated that people want to have a say in their own treatment, experience insecurity in the patient-doctor relationship, and fear the side effects of drugs. In Turkey, individuals prefer traditional, complementary methods for reasons such as chronic diseases and desperation in cancer.

In this study, to the question "Non-medical traditional, complementary practices prepare the body to defend itself so that medical treatment can be better responded to", more than half of the respondents answered saying no or did not know. In the Białoszewski study, it was stated that the rate of those who applied at least one herbal product in addition to using drugs was 20%.[13] In Özyazicioğlu et al.'s study, 42.29% of mothers of children receiving treatment from the hospital stated that they used traditional, complementary approaches.[8] The Turkish Medical Association reported in 2012 that approximately one hundred thousand people died in the world annually due to traditional, complementary practices. Nur reported in her 2010 study that people think that using the plant and the drug together is more effective.[14]

In the study, more than half of the participants stated that traditional, complementary practices could be used for simple diseases that can be treated but not for diseases that cannot be cured. Thearle's 1998 study and Huang et al.'s 2010 study stated that 40-60% of patients had tried and used traditional methods at least once.[10,11]

In the study, 66.4% of respondents think that scientific evidence is needed for traditional, complementary practices in the current study. Zuzak et al. reported that the countries with the highest frequency of use of traditional practices were Italy, Germany, Norway, England, and Turkey.[15] In addition, he stated that these approaches are used by 36-87% in Turkey. In addition, Zuzak et al. reported that individuals apply traditional methods with their own cultural transfer without informing the physician.[15] Wolf stated a lack of standard and reliable information on traditional products' definitions, names, and contents.[16] Ulukol listed the reasons for evidence-based studies: To identify and disseminate useful and effective initiatives, prevent the use of ineffective or harmful approaches, and ensure that the health service provided is more effective and of high quality.[17] Therefore, healthcare professionals need to find reliable scientific evidence.

In the present study, the majority of people say no to the statement "Traditional, complementary practices delay people's getting the right medical treatment" and say "I don't know". Unlike our findings, Tütüncü stated that the use of traditional, complementary products might delay medical treatment, and serious side effects may occur.[5] Ulukol said that individuals are moving away from modern treatment due to complementary practices.[17] In addition, Ulukol stated that individuals might experience a decrease in effect due to the interaction of cancer drugs with the traditional, complementary products they used and reported that they might suffer from increased side

effects and increased toxicity as a result of the use of drugs with traditional methods.[17]

In the study, women are more likely than men to use traditional, complementary methods without consulting a doctor. Also, women are more sensitive to the opinion that "Medical treatment may not be as effective as the treatment", and women also think that it can generally be used for simple diseases that can be treated, that medical treatment may not be the last option when it is insufficient, and more evidence is needed. Similar to this study, Kav reported that more women use traditional methods.[18] Unlike this study, Sağkal Midilli et al. reported in their 2013 study that there was no difference between knowing traditional methods according to gender.[19]

In this study, as the level of education increases, the number of people who say that scientific evidence is needed in traditional, complementary practices also increases. Akyürek et al. reported that as the level of education decreases, the rate of using traditional practices increases.[20] Sağkal Midilli et al. reported in their 2013 study that there was no difference between knowing traditional methods according to education level.[19]

In the current study, unmarried individuals were found to be more sensitive to the need for scientific evidence to use traditional methods than married ones. In a 2012 study by Çöl Araz et al., 71.1% of individuals stated that scientific evidence is needed in using these methods.[21] In Çetin's study, no difference was found between sociodemographic characteristics and using traditional methods.[22]

In the present study, it was observed that the students' view that "more scientific evidence should be obtained before using traditional, complementary methods" was more common than other groups. In their 2019 study, Ayraler et al. reported that the rate of people who view traditional, complementary methods negatively is 11.4%.[23] İlhan et al. reported in their 2019 study that the rate of individuals who do not use traditional, complementary practices is 71.20%.[24] And they stated that the rate of those who say that traditional practices are not beneficial is 4.20%. In Aktaş's study, it was reported that the average score of the students' attitude scale towards complementary medicine was 31.38±4.40, moderate.[25]

In the study, individuals with a reading habit were found to be more sensitive to the notion that scientific evidence is required for traditional, complementary methods than those who do not. In Solmaz's study, it was determined that 20% of male students read for 30 minutes a day, and 8.7% of girls read for 30 minutes a day.[26]

In the study, the idea that "traditional, complementary practices can be used as a last option" is more common in individuals with moderate economic status. Akyürek et al., stated that there is a relationship between the low economic level of individuals and the use of traditional, complementary methods.[20] In Aktaş's 2017 study, it was reported that there was no relationship between the financial status of individuals and their traditional, complementary method attitude scores.[25]

In the study, the view that "traditional methods should not be used without consulting a doctor" was found to be more common among individuals with social security. Again, the idea that "traditional practices are not as effective as a medical treatment" was found more common in those with social security. Those with social security were more sensitive to the idea that scientific evidence is needed for traditional methods. Akyürek et al. reported in their 2005 study that those with low socio-economic status used traditional methods more.[20] In their 2013 study, Sağkal Midilli et al. reported that those with social security know more about traditional methods.[19]

Akbulut and Bayramoglu et al. reported that rural areas use traditional practices more.[27] Somer and Lutz emphasized that with the 2014 Regulation on Traditional and Complementary Medicine Practices in Turkey, physicians who will perform these practices must have received certified training.[28] However, it is discussed in the literature whether it is mandatory to carry out the practices included in the regulation from an ethical point of view or not. In the present study, it was found that those who did not receive traditional practice training were more sensitive to the fact that conventional practices should not be used without consulting a doctor. Those who did not receive training on the subject were found to be highly sensitive to the idea that "traditional methods are not as effective as a

medical treatment". They expressed the suggestion of providing the opportunity to make applications.

In the study, individuals in nuclear families are more likely to think that "traditional methods should not be used without consulting a doctor" than extended families. In the 2020 study of Gürsoy et al., they stated that the majority of those who know traditional practices are in the traditional family structure.[29]

In the study, it was found that the opinion that traditional methods should not be used without consulting a doctor was more common among the participants who thought that the use of traditional applications was incorrect. Also, it was found that the thought that traditional methods are not as effective as medical treatment was more common among the participants who thought that the use of traditional applications was not correct. What is more, in the present study, it was found that participants who believe that the use of traditional practices is not correct are more sensitive to the idea that scientific evidence is needed. Doğru and Şahbaz, stated that they had come a long way in their 2019 studies with the regulation on traditional practices.[30] However, they stated that a common terminology on the subject should be developed. They reported that traditional applications should be studied to be reliable. They suggested that effective service delivery should be ensured. They emphasized that the deficiencies related to the subject should be eliminated. They advocated the establishment of quality standards. They suggested efficient and safe use of resources. Also, they expressed the creation of awareness in society. They recommended the creation of guidelines. They stated that access to the service should be facilitated. In addition to these, they emphasized the need to increase scientific evidence.

LIMITATION OF THE STUDY

One of the greatest limitations of this study is that the subjects consisted of one area and limited participant in Turkey. Therefore, it is not possible to generalize its results to other groups throughout the country.

CONCLUSION

According to the study results, it was found that family structure is important in traditional practices. It has emerged that the people living in the extended families should be made aware of the issue. The importance of receiving traditional method education has emerged. It has emerged that awareness of the case should be created among those who do not have social security. Those with middle incomes reported that they consider traditional practices as a last option. Supporting those in need related to the subject according to their income level has come to the fore. Individuals who do not have the habit of reading have been found insensitive to the need for evidence for their traditional practices, and the importance of reading habit has emerged. Students were found to be the group that stated the most evidence requirement, and in this context, training on the subject-specific to the needs of individuals in each profession and education group can be recommended. In addition, as a result of this study, unmarried individuals reported a need for scientific evidence on the subject. According to this result, it has been seen that there is a need for planning to raise awareness in married individuals. As a result of the study, as the level of education increases, the number of those who say that scientific evidence is needed in traditional practices is also higher. The importance of education has emerged. It can be recommended to integrate the training on the subject into formal education programs. It has been concluded that women have more sensitive and accurate information about traditional methods, and the importance of raising the awareness of men about traditional practices has emerged. It has been concluded that multidisciplinary fields should handle the issue carefully, raise awareness in all sectors of society, and teach the right information.

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Conflict of Interest

No conflicts of interest between the authors and / or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.

Authorship Contributions

All authors contributed equally while this study preparing.

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