

A SURVEY TO DETERMINE THE PERCEPTIONS OF
PARENTS IN THE CENTRAL DURBAN AREA
TOWARDS PAEDIATRIC HOMEOPATHY

By:

SHEROMANI HARRIPERSHAD

Mini-dissertation submitted to the Faculty of Health Sciences at the Durban
University of Technology in partial compliance with the requirements for a
Master's Degree in Technology: Homeopathy.

I, Sheromani Harripershad, declare that this dissertation represents my own
work in both conception and execution.

Sheromani Harripershad

Date

Approved for Final Submission

Supervisor: _____
Dr. C.M. Hall
M. Tech. Hom (TN); B.S.C (PU for CHE)

Date

Co-supervisor: _____
Dr. I.M.S Couchman
M. Tech. Hom (TN)

Date

Durban
2009

DEDICATION

I dedicate this dissertation to my parents Dhaneshwar Harripershad and Usha Devi Harripershad for their love, continuous support, encouragement and wisdom. Your hard work and endless sacrifices have made it all possible. I thank you for treading this journey with me and being my pillar of strength. I am eternally indebted to you both.

Dad, Thank you for teaching me that hard work, dedication and a positive attitude always brings success and for always going that extra mile for me.

Mum, Thank you for giving me strength, inspiring me and having unwavering faith in me that I have been able to achieve my dreams.

Last but certainly not least Mother Durga, nothing is possible in this world without your blessing and strength. 'Jai Mata Di'

ACKNOWLEDGEMENTS

To God, Almighty who has guided, protected and given me strength, courage, wisdom and blessing me with the beautiful profession of homeopathy.

Dr Cornè Hall, my supervisor, and Dr Ingrid Couchman, my co-supervisor, thank you for all your time, dedication, consistent efforts, advice and encouragement throughout the course of my studies and the completion of my dissertation. I really do appreciate the support and guidance you'll have given me during the times of stress.

Dr Madhu Maharaj, for her advice, support and caring attitude throughout the course.

Dr David Naude, for his assistance with various aspects of this research. Your time and effort are greatly appreciated.

Dr Ashley Ross, for his guidance and constant support throughout my studies.

Dr. Jabulile Ngobese for the translation of the questionnaire into Zulu, and your guidance and knowledge as a clinician and lecturer.

To Dr Richard Steele and Dr Anton de Waard for your guidance as clinicians.

Dr Nicolas Nell, thank you for your assistance with the statistics. Your caring attitude, time and effort are greatly appreciated.

My wonderful friends and colleagues, thank you for being a part of my life and for your love, support, encouragement and advice.

To my brothers, Jitesh and Sudhish, for their assistance, support and encouragement, throughout my studies.

To all the parents, thank you for your time and participation in this survey.

To all my lecturers whose names are not mentioned, thank you for your time, knowledge and assistance during my years of study.

ABSTRACT

Introduction

The aim of this study was to determine the knowledge and perceptions of parents towards homeopathy. Parents with children below 5 years, who attended a registered Crèche or Educare within the central Durban area (Appendix H – ‘Register’ and Appendix I ‘Map’) were approached.

Objective

The objective of the study was to determine the knowledge, attitudes and parent’s experience with paediatric health care provision towards homeopathy. The awareness of parents with regard to the benefits of homeopathic treatment for children as a possible alternative was also determined.

Methodology

A survey method in the form of a questionnaire was employed to investigate the perceptions of parents towards homeopathy in the treatment of their children. The target population for this survey was parents, whose children were below 5 years of age and attended a registered Crèche or Educare in the central Durban, Berea, Musgrave and Morningside areas (Appendix I – ‘Map’). The data accumulated was evaluated and analyzed statistically using the SPSS version 17.1.

Results

A total of 300 questionnaires were distributed and a total of 140 (46.6%) questionnaires were returned. With regards to legitimacy of homeopathy most parents (72.1%) perceived homeopathy to be a legitimate form of medicine. 70.92% of all respondents were aware that homeopathy has a scientific basis. It was encouraging to note that 10.64% of the sample consults with a homeopath when their child is ill or indisposed. The majority of respondents (77.14%) indicated that homeopathic treatment should be available in hospitals and clinics. Only 3.57% felt that it should not be incorporated in hospitals and clinics. This indicates that most respondents perceive that integrated medicine is needed in a hospital setting. The majority of respondents (90.71%) felt that there should be more awareness of homeopathy. Despite the lack of knowledge, a large number of respondents indicated that homeopathy should be available for most medical conditions.

Conclusion

This study reveals that most respondents had a positive view of homeopathy in general and were enthusiastic to learn more about homeopathy. Although people are aware that homeopathy exists, a lack of knowledge and understanding of its methods and principles prevents them from seeking homeopathic treatment.

A need to provide basic homeopathic education to the public exists. Education initiatives should aim to differentiate homeopathy from other alternative therapies, to dispel the confusion and to eliminate misconceptions about homeopathy. This study indicates that by educating the public on paediatric homeopathy, more individuals would be likely to seek homeopathic treatment for their children.

TABLE OF CONTENTS

<u>Acknowledgements</u>	i
<u>Abstract</u>	iii
<u>Table of Contents</u>	vi
<u>List of Figures</u>	xvi
<u>List of Tables</u>	xix
<u>Definition of Terms</u>	xxi
 <u>CHAPTER 1</u>	 1
1. Introduction	1
1.1 The study	4
1.2 The aim of the study	5
1.3 Objectives	6
 <u>CHAPTER 2</u>	 7
2. Review of the related literature	7
2.1 Overview	7
2.2 Homeopathic treatment for children	8
2.3 Limitations of conventional drugs	10

2.4 The history, laws and principles of homeopathy	11
2.5 Homeopathic training and professional status in South Africa	14
2.6 Scope of homeopathic treatment for children	15
2.7 Perception surveys	16
2.7.1 The role of surveys	16
2.7.2 Surveys done on perceptions towards homeopathy in South Africa	16
2.8 International surveys on perceptions towards paediatric homeopathy and complementary and alternative medicine	21
2.9 Conclusion	26
2.10 Myths and misconceptions regarding homeopathy	27
<u>CHAPTER 3</u>	30
3. Materials and method	30
3.1 Objective	30
3.2 The participants	30
3.2.1 Inclusion criteria	30
3.2.2 Exclusion criteria	31
3.3 The sample	31

3.4 Study design	31
3.5 Methodology	33
3.5.1 The questionnaire	33
3.5.2 Focus group	34
3.5.3 Administration of the questionnaire	36
3.6 Confidentiality	36
3.7 Data storage	37
3.8 Data analysis	37
3.8.1 Statistical analysis	37
3.8.1.1 Non-parametric tests	38
3.8.1.2 Pearson's Chi Square test	38
3.8.1.3 Cramer's V, Phi, Lambda and Kendall	39
Tau Coefficients	
3.8.1.4 Dendrograms	40

<u>CHAPTER 4</u>	41
4. Results	41
4.1 Introduction	41
4.2 Overview of results chapter	42
4.2.1 Descriptive data	42
4.2.1.1 Demographics (Question 1 – 10)	42
4.2.1.2 Knowledge of homeopathy (Question 11 – 19)	42
4.2.1.3 Experiences with health care provision (Question 20 – 32)	42
4.2.2 Analysis	43
4.2.2.1 Correlation analysis	43
4.2.2.2 Cluster analysis	43
4.2.3 Comments	43
4.3 Abbreviations	44
4.4 Descriptive statistics	45
4.4.1 Part 1: Personal information (Questions 1 -10)	45
4.4.2 Part 2: Knowledge of homeopathy (Questions 11 – 19)	63
4.4.3 Part 3: Experiences with health care provision (Question 20 – 32)	87

4.5.3.3	Question 14: Perceptions of what conditions would be considered for treatment by homeopathy?	126
	Dendrogram using Wards Linkage	
4.5.3.4	Question 15: Perceptions of statements regarding homeopathy?	128
	Dendrograms using Wards Linkage	
4.5.3.5	Question 21: Statements applicable to health care provider?	130
	Dendrogram using Wards Linkage	
4.5.3.6	Question 26: Reasons for consulting a homeopath?	132
	Dendrogram using Wards Linkage	

<u>CHAPTER 5</u>	133
5. Discussion	133
5.1 Introduction	133
5.2 Response rate	133
5.3 Part One: Personal Information	134
5.3.1 Question 1: Gender	134
5.3.2 Question 2: Age	134
5.3.3 Question 3: Ethnicity	135
5.3.4 Question 4: Home language	135
5.3.5 Question 5: Occupational status	135
5.3.6 Question 6: Health status of parents	136
5.3.7 Question 7: Number of children	136
5.3.8 Question 8: Age of children	137
5.3.9 Question 9: Health status of children	137
5.3.10 Question 10: Medication status of children	138
5.4 Part Two: Knowledge of homeopathy	139
5.4.1 Question 11: Legitimacy of homeopathy	139
5.4.2 Question 12: Mode of practice of homeopathy	139

5.4.3 Question 13: Procedures performed by a homeopath	143
5.4.4 Question 14: Conditions treated by a homeopath	145
5.4.5 Question 15: Statements regarding knowledge of homeopathy	147
5.4.6 Question 16: Duration of the homeopathic consultation	150
5.4.7 Question 17: Nature of homeopathic study	151
5.4.8 Question 18: Level of education of homeopaths	151
5.4.9 Question 19: Awareness of training programmes in South Africa	152
5.5 Part Three: Experience with health care	153
5.5.1 Question 20: Primary health care provider of child	153
5.5.2 Question 21: Opinions of childcare provider	154
5.5.3 Question 22: Prior experience with homeopathy	156
5.5.4 Question 23: Have consulted a homeopath before	157
5.5.5 Question 24: What made you consult a homeopath for your child before?	158

5.5.6 Question 25: Where did you first hear about homeopathy?	159
5.5.7 Question 26: Reasons for not consulting a homeopath?	160
5.5.8 Question 27: Would you consult a homeopath in the future for your child?	161
5.5.9 Question 28: Reason for not consulting a homeopath in the future for your child?	161
5.5.10 Question 29: should homeopathic treatment be offered for most medical conditions?	162
5.5.11 Question 30: Should homeopathic treatment be available in hospitals and clinics?	163
5.5.12 Question 31: Should there be more awareness of homeopathy?	163
5.5.13 Question 32: Which of the following best reflects your view of homeopathy?	164

<u>CHAPTER 6</u>	165
6. Conclusions and recommendations	165
6.1 Conclusions	165
6.2 Recommendations	168
<u>REFERENCES</u>	171
<u>LIST OF APPENDICES</u>	180

LIST OF FIGURES

Figure 4.1 Question 1: Gender	46
Figure 4.2 Question 2: Age	47
Figure 4.3 Question 3: Ethnicity	49
Figure 4.4 Question 4: Home language	51
Figure 4.5.1 Question 5: Occupational status	53
Figure 4.5.2 Question 5: Occupational status by gender	54
Figure 4.6 Question 6: Health status of respondents	55
Figure 4.7 Question 7: Number of children of the respondents	56
Figure 4.8 Question 8: Age of children	58
Figure 4.9 Question 9: Health status of children	59
Figure 4.10 Question 10: Medication status of child	61
Figure 4.11 Question 11: Do you consider homeopathy to be a legitimate form of healthcare	64
Figure 4.12.1 Question 12: Respondents perceptions of mode of practice of homeopath	68
Figure 4.12.2 Question 12: Component of homeopathic practice	70
Figure 4.13.1 Question 13: What kind of procedures would you expect a homeopath to perform on his / her patient? Individual summaries	73
Figure 4.13.2 Question 13: What kind of procedures would you expect a homeopath to perform on his / her patient?	75
Composite graph with procedure summaries	
Figure 4.14 Question 14: For which of the following conditions and	76

symptoms would you consider homeopathic treatment for your child?	
Figure 4.15 Question 15: Do you agree with each of the following statements regarding homeopathy?	78
Figure 4.15.1 Question 15: Respondents that disagreed	80
Figure 4.15.2 Question 15: Respondents that were not sure	81
Figure 4.16 Question 16: The average homeopathic consultation lasts approximately?	82
Figure 4.17 Question 17: Which of the following subjects do you think a homeopath will study?	84
Figure 4.18 Question 18: What level of qualification do you think a homeopath graduates with in South Africa?	85
Figure 4.19 Question 19: Are you aware of the homeopathic training institution at the Durban University of Technology – DUT and the University of Johannesburg – UJ	86
Figure 4.20 Question 20: At present who is your child's primary healthcare provider?	87
Figure 4.21 Question 21: In your opinion, how applicable is each of the following statements for your healthcare provider(s) with respect to the treatment of your child?	89
Figure 4.22 Question 22: Have you ever consulted a homeopath for your child?	90
Figure 4.23 Question 23: In the past, how many times have you consulted with a homeopath for your child?	95
Figure 4.24 Question 24: What made you decide to consult a homeopath for your child?	96

Figure 4.25 Question 25: Where did you first hear about homeopathy?	97
Figure 4.26 Question 26: If you have never consulted a homeopath for your child what reason(s) would you give?	98
Figure 4.27 Question 27: If you never consulted a homeopath for your child, would you be likely to do so in the future?	100
Figure 4.28 Question 28: If you answered yes to 27 above, for which reason might you consider consulting a homeopath, for your child?	101
Figure 4.29 Question 29: Do you think homeopathic treatment should be offered for most medical conditions?	102
Question 30: Do you think homeopathic treatment should be available in hospitals and clinics?	
Question 31: Do you think there should be more awareness of homeopathy?	
Figure 4.30: Question 32: Which of the following best reflects your view of homeopathy?	105

LIST OF TABLES

Table 4.1 Question 1 Gender	45
Table 4.2 Question 2 Age	47
Table 4.3 Question 3 Ethnicity	48
Table 4.4 Question 4 Home language	50
Table 4.5 Question 5 Occupational status	52
Table 4.6 Question 6 Health status of respondents	54
Table 4.7 Question 7 Number of children of the respondents	56
Table 4.8 Question 8 Age of children	57
Table 4.9 Question 9 Health status of child	59
Table 4.10 Question 10 Medication status of child	60
Table 4.11 Question 11 Do you consider homeopathy to be a legitimate form of healthcare?	63
Table 4.12 Question 12 Do you think a homeopath does the following?	65
Table 4.13 Question 13 Correlation of personal information (Part 1) and General knowledge of homeopathy (Part 2)	108
Table 4.14 Question 14 Correlation of personal information (Part 1) and your experience with health care provision (Part 3)	114
Table 4.15 Question 15 Correlation of Question 11 (Whether homeopathy is a legitimate form of medicine) and Questions 12 – 19	117
Table 4.16 Correlation of Question 20 (health care provider) and Question 21 (Statement regarding health care provider)	121
Table 4.17 Question 12: Do you think a homeopath does the following?	123

(Dendrogram)

Table 4.18 Question 13: What kind of procedures would you expect a homeopath to perform on his / her patient? (Dendrogram)	125
Table 4.19 Question 14: For which of the following conditions and symptoms would you consider homeopathic treatment for your child? (Dendrogram)	126
Table 4.20 Question 15: Do you agree with each of the following statements regarding homeopathy? (Dendrogram)	138
Table 4.21 Question 21: In your opinion, how applicable is each of the following statements for your healthcare provider(s) with respect to the treatment of your child? (Dendrogram)	130
Table 4.22 Question 26: If you have never consulted a homeopath for your child what reason(s) would you give? (Dendrogram)	132

DEFINITION OF TERMS

Allopathic medicine

A therapeutic system in which a disease is treated by producing a second condition that is incompatible with or antagonistic to the first (Stedman's, 2005).

Complementary and Alternative Medicine (CAM)

CAM is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine. These include homeopathic medicine, naturopathic medical, traditional Chinese medicine, ayurveda, meditation, prayer, osteopathic manipulations, chiropractic, massage, reiki, therapeutic touch, dietary supplements and herbal products (National Institute of Health, 2009).

Complementary medicine

Is used together with conventional medicine (National Institute of health, 2009).

Constitutional

Constitutional homeopathic prescribing, also called classical prescribing, is a holistic system of medicine that has been practiced for more than 200 years. Unlike acute homeopathic prescribing, constitutional prescribing refers to the selection and administration of homeopathic preparations over a period of time for treatment

related to what practitioners call miasmatic disorders, those caused by an inherited predisposition to a disease. As in acute prescribing, constitutional prescribing is holistic in that it is intended to treat the patient on the emotional and spiritual levels of his or her being as well as the physical. Constitutional prescribing is also aimed at eventual cure of the patient, not just suppression or relief of immediate symptoms (Constitutional, 2009).

Potentization

A multi-step process developed by Hahnemann by which the medicinal power (potency) of a homeopathic medicine is released or increased, involving serial dilution with succussion, or using trituration or fluxion (Swayne, 1998).

Potentized

When a homeopathic remedy is diluted and shaken (potentized), the stronger it's therapeutic effect. The substance is chemically more dilute and the more the substance was potentized, the deeper and longer lasting its effect (Ullman and Reichenberg-Ullman, 1995:47).

Succussion

Is a process of vigorous shaking of the solution at each stage of dilution that is used in the preparation of homeopathic remedies (Leckridge, 1997:265).

Trituration

It is a process of potentization, by which preparation of medicine takes place by the use of a solid vehicle like sugar of milk, by grinding in definite order according to Pharmacopoeia (Kayne, 1997).

Vital force

Is the energy force within the body responsible for health and healing of the body and when a disease-causing agent attacks a human being, it is the vital force, which resists it, trying to restore order and harmony (De Schepper, 2001:12).

CHAPTER 1

INTRODUCTION

The science and art of homeopathy embody what many people envision as a 21st century medicine. Homeopathy is a medical approach that respects the wisdom of the body. As we enter the 21st century, a new type of comprehensive health care will emerge, one in which various natural healing practices and conventional medical treatments play an integral role. It will emerge not only because people will realize that it is the rational alternative, but also because it is necessary for physical, mental and spiritual health. Medicine is at its very best when it incorporates the scientific method and the art of healing. Homeopathic medicine embodies such a system. Though homeopathic medicine is a profound and powerful means to stimulate a person's healing processes, it complements other health and medical care. Sound nutrition, exercise, stress management, emotional and mental balance, and effective conventional medical care together comprise a comprehensive health care system that fulfills the varied needs of our complex society (Ullman, 1991).

Homeopathy is growing in popularity all over the world because its medicines are gentle, non-toxic and harmless. A growing number of parents today are concerned about the side effects of conventional drugs, especially in the treatment of babies and young children. This makes homeopathy safe to use when many other types of treatments may not be recommended, such as in case of newborns, children and during pregnancy (Sevak, 2002).

There is a growing perception that homeopathy is “safe” for children especially those suffering with “developmental” problems and “low immunity.” Many children have been helped with this alternate form of healing (Nanduri, 2005).

Early and proper homeopathic treatment of children can contribute to sound development and lead to a healthier adulthood (Herscu, 2005).

Homeopathy is one of the fastest growing medical modalities in the world today. In spite of this growing interest much confusion still exists regarding the true origins, scientific validity, applicability and efficacy of homeopathy. Even in this day and age of effective mass communication, internet, journals, etc., misconceptions about the basis, fundamental principles and philosophy of homeopathy exist which tend to equate homeopathy with eastern philosophy, “natural and traditional medicine such as herbalism and the likes” (Prinsloo, 2000).

Homeopathic medicines have wide applications for paediatric complaints. Since conventional medications, taken singularly or in combination with other drugs, have known and unknown complications in infants and children, it is generally worthwhile to seek safe, effective alternatives for paediatric problems first. Homeopathic medicines may not only help to improve the health of infants and children, but will probably also help them to become healthy adults (Ullman, 1991).

In a study done by the National Health Service 2006, 70% of general practitioners (GPs) increasingly welcomed the contribution complementary therapies can make and felt they should be freely available. In recent years, GPs have been discouraged from overprescribing medicines such as inhaled steroids for asthma

and hayfever and are encouraged not to overprescribe antibiotics for colds and coughs (National Health Service, 2006).

Concerns about long-term damage to the growing child, together with the worry of antibiotic resistant strains of bacteria, make homeopathy a safer option (The Society of Homeopaths, 2005).

Modern medicine does not claim to cure chronic disease but merely to control the symptoms, using drugs which the patient must take for the rest of their lives. Many of the medications have side effects which are uncomfortable, harmful or even fatal for the patient. Modern medicine has become enormously expensive and overly reliant on technology. Not surprisingly, both patient and practitioner are looking for an alternative (De Schepper, 2001).

Perception studies conducted so far in South Africa have revealed that there is a degree of ignorance or misunderstanding of homeopathy, and that varied opinions on its application and efficacy exist among the general public (Small, 2004; Maharajh, 2005; Paruk, 2006). The lack of extensive data regarding public perceptions of homeopathy in South Africa means that homeopaths have much work to do in the research field to investigate the level of knowledge of homeopathy amongst the population of South Africa. Through further research, marketing strategies can be formulated to create greater awareness of homeopathy amongst the general public. Therefore, this study evaluates the knowledge and perceptions of parents towards homeopathy as a form of treatment for their children. A survey to determine the perceptions of parents towards paediatric homeopathy has not been conducted in this country before.

The homeopathic approach is growing in popularity as an alternative treatment for children and babies as an alternative to mainstream medicine (Lipschutz-Robinson, 1996).

Findings of this study can aid in creating a better understanding and awareness of homeopathy amongst parents. Information in the form of a pamphlet was given to parents at the end of the study (Appendix G).

Uncertainty regarding the understanding of homeopathy and the use of homeopathic medicines exists to a large degree amongst the South African public. A possible reason for this being the lack of availability of definitive data regarding what is actually known about homeopathy amongst the general public.

By elucidating the perceptions of parents towards homeopathy, this study contributes to the work of encouraging co-operation between homeopaths and parents, for the benefit of children. This gives the homeopathic profession in South Africa an excellent opportunity to be integrated into the health care system.

1.1 The study

This study aimed to determine the perceptions that existed amongst parents with children below 5 years of age and attending a registered Crèche or Educare (Appendix H) in the Durban area (Appendix I – ‘Map’). Parents with children below 5 years were chosen for this study, since Von Bardeleben (2009), investigated the perceptions of homeopathy amongst parents of children aged 3 to 7 years old at pre primary schools. Parents were identified as a target group because of the

limitations of allopathic drugs in the paediatric population. It was presumed that their opinions on the subject would provide a useful indicator of the general knowledge and understanding that currently exists towards homeopathy, and provide a basis for future homeopathic education initiatives in this and other target groups. It was hoped that the information gathered will be used in a concerted effort by the homeopathic profession to develop an education initiative aimed at providing homeopathic education to the South African public.

The aim of the study

The aim of this survey was to determine the knowledge and perceptions of parents towards homeopathy as a form of treatment for their children that were below 5 years.

1.2 Objectives

1.3.1 The first objective

To assess the extent of parent's knowledge regarding homeopathy.

1.3.2 The second objective

To determine the attitudes of parents towards homeopathy.

1.3.3 The third objective

To determine parent's experience with paediatric health care provision in general.

1.3.4 The forth objective

To determine the awareness of parents with regard to the benefits of homeopathic treatment for children as a possible alternative to orthodox medicine.

CHAPTER 2

REVIEW OF THE RELATED LITERATURE

2.1 Overview

Since the science of homeopathy was introduced more than 200 years ago by Samuel Hahnemann, it has been used for the treatment of new-born, neonate, infants and children (Shah, 2006). The popularity of complementary and alternative medicine has increased enormously in most countries during the past two decades. Homeopathy is one of the fastest growing complementary and alternative therapies and has been gaining much interest (Prinsloo, 2000).

In the context of South Africa, Paruk (2006) conducted a study among pregnant females towards the use of homeopathy during pregnancy. This study revealed the lack of knowledge of homeopathy among pregnant females and the need for co-operation between conventional and complementary practitioners. It is evident that the lack of awareness, poor knowledge and ineffective communication leads to much skepticism with regards to homeopathy.

It is crucial that in an ever changing and dynamic country like South Africa health care professionals are knowledgeable and are able to educate parents about homeopathy as an alternative treatment for children.

2.2 Homeopathic treatment for children

The main reason why parents bring their children to homeopaths is that homeopathic medicines are much safer since there are no side effects compared to conventional medicines. The second reason is that children respond well to homeopathic medicines because they have a strong vital force. A child's life can be changed both physically and psychologically, with the correct homeopathic remedy (Ullman, 2004).

Homeopathy is an option for parents who are keen to choose a system of medicine for their children that is gentle and flexible but very effective. Homeopathy works by stimulating the child's own immune system so that illness is resolved naturally from within. Younger patients tend to respond better to homeopathy, since their levels of vitality are correspondingly higher than those of the average adult. Homeopathy does not separate emotional reactions and physical symptoms, since they are both equally valid as part of the total expression of the child's individual way of coping with his encounter with the world (The Society of Homeopaths, 2005).

Homeopathy is a safe system of medicine for children. Primarily, any medicine administered to children must be free from harmful effects. Unlike some orthodox medicine, homeopathic remedies do not harm the body. Homeopathy is also considered child friendly as the homeopathic pills are sweet in taste as they are made of lactose and therefore readily accepted by children. Homeopathic therapy is superior to traditional treatment of administering medicine since no injectables are required (Sevak, 2002).

Homeopathic treatment is tailored to the needs of each individual and only the minimum amount of stimulation needs to be given in order to begin the self-healing process. Children are susceptible to many ailments and have a tendency to fall ill, but their recovery is fast. It is considered inappropriate to suppress the common childhood ailments, because the body of the growing child is learning resistance to disease by means of earaches, fevers and other minor illnesses as these enhance the immune system (The Society of Homeopaths, 2005). When a person gets something done for him, he does not learn to do it himself. Likewise, on a physiological and immunological level, when drugs are given to treat a symptom or infection, the body does not learn to heal as well on its own (Ullman, 1991).

Homeopathy helps in building resistance in children who habitually have recurring infection due to lowered resistance. Homeopathic treatment being based on the constitutional approach treats the disease at the root level. Childhood illnesses therefore are part of the growing up process and a child who copes well with these challenges will be laying the basis of healthy maturity (The Society of Homeopaths, 2005).

Homeopathy is a natural system of medicine that utilizes minute doses of carefully selected ingredients made from plants and mineral sources as well as many other natural substances, to enhance the body's natural healing processes. Its strength lies in its marked effectiveness as it takes a holistic approach towards the sick individual through promotion of inner balance at mental, emotional, spiritual, and physical levels. Homeopathy treats the patient as a whole and not just the disease.

Homeopathy believes in a Holistic, Totalistic, and Individualistic approach (Sevak, 2002).

2.3 Limitations of conventional drugs

Most conventional drugs are not tested on children. The safety and effectiveness of giving drugs to children have not been established. When it comes to calculating doses or anticipating side effects, children are often considered little adults (Ullman, 1992).

Conservative use of conventional drugs with newborns, infants and children is recommended, since their bodies are still developing, the organs and glands are learning how to function together, and the immune and defense reactions are in the process of maturation. It is now acknowledged that pregnant women should avoid medications during pregnancy, and yet when children are born, it is forgotten that their bodies are still in the process of growth and development, a delicate state that can be significantly affected by many commonly used medications (Ullman, 1991).

Examples of medications used which can cause suppression in the body: Aspirin given to suppress children's fever has been found to lead to Reyes Syndrome, a potentially fatal neurological condition. Antihistamines, decongestants and nasal sprays inhibit the elimination of nasal discharge, which is a natural defense of the body. Children are frequently given cough suppressants while a cough is a natural defence of the body in its effort to clear a breathing passageway (Ullman, 1991).

Although some conventional drugs are more dangerous than others for children, there is little controversy about the fact that we must use drugs with greater caution in the treatment of infants and children than in the treatment of adults (Ullman, 1991).

2.4 The history, laws and principles of homeopathy

Homeopathy is a system founded by the German physician Dr. Samuel Hahnemann (1755-1843). Homeopathy is a safe, gentle, and effective system of medicine that powerfully stimulates the body's vital force to cure illness (Vithoulkas, 1987:15). Hahnemann formulated the laws and principles upon which homeopathy is based, and according to which homeopathic physicians practice today (De Schepper, 2001:26-43).

The practice of homeopathy is governed by the following laws: (1) The law of similars, (2) Single remedy, (3) Provings, (4) Minimum potentized dose, (5) Hering's Law, and (6) Individualization (De Schepper, 2001:43).

The Law of Similars forms the basic principle of homeopathy, "similia similibus curentur", or let "like cure like". This means that any substance that can produce symptoms of disease in a healthy person when given in large doses can cure those same symptoms in a sick person when given in very small doses and when diluted (De Schepper, 2001.26-27).

A fundamental principle of homeopathy is that of prescribing a single remedy at a time. The use of a single remedy allows unambiguous evaluation of any beneficial or adverse effects that may be produced following administration of the remedy to the patient (Vithoulkas, 1998:217). The homeopathic remedy works by stimulating the vital force. The symptom picture of the remedy matches as closely as possible to the symptom picture of the patient's illness and it does not make sense to confuse the vital force by stimulating it with two or more remedies, each with its own energy. Therefore, only one remedy should be prescribed at a time (De Schepper, 2001:29-32).

Provings are experiments conducted to determine what a homeopathic substance is able to cure (Ullman, 1991:9). Provings investigate the effects of repeated doses of homeopathic medicines in healthy volunteers (provers) in order to reveal their properties and therapeutic capabilities (Swayne, 1998:170-171). Provings are extremely important to gain vast information about major remedies and their effects, not only on all the tissues, organs and functions of the body, but even on the mind, the emotions and the energy level. The proving of remedies is a great undertaking, a fascinating adventure, for we never know what we will find. A properly conducted proving produces a living monument of value for all time (De Schepper, 2001:32-38).

Homeopathic remedies have very little, if in fact any original substance left in them (Ullman and Reichenberg-Ullman, 1995:35). These minute potencies are prepared through a series of dilution, succussion and trituration (Swayne, 1998:169). This step-by-step process makes the remedy powerful, but at the same time harmless.

The remedies are extremely dilute, have no side effects and are very safe to use (Ullman and Reichenberg-Ullman, 1995:35).

Hering's Law is extremely useful to homeopathic practitioners in order to measure the progress of chronic disease states, and is described below (Leckridge, 1997:32).

The direction of cure is said to have four axes:

1. From most important organs to less important organs.
2. From inside out.
3. From top to bottom.
4. Disappearance of symptoms in reverse order of their appearance

(Leckridge, 1997:32).

According to De Schepper (2001:42), "the homeopath does not treat disease, he treats sick individuals, and no two patients with the same disease are ill in exactly the same way". Accuracy of homeopathic prescribing is dependent upon the similarity between the characteristics of the medicine and the individual characteristics of the patient's illness. Homeopathic prescriptions are thus individualized to the patient (Swayne, 1998:23).

2.5 Homeopathic Training and Professional Status in South Africa

Homeopathic registration in South Africa allows practitioners privileges and rights similar to those of medical practitioners. Homeopathic practitioners are recognized

as primary contact professionals, with the same status as allopathic practitioners.

The main route to qualification and registration involves a five-year full-time course leading to the degree, Master of Technology (Homeopathy) (M. Tech. (Hom)).

Graduates of this programme are required to register with the appropriate statutory body, namely, the Allied Health Professions Council of South Africa (AHPCSA).

This body was established in terms of the Allied Health Professions Act, 1982 (Act 63 of 1982). This body has equivalent legal status to the body that medical graduates register with, namely, the Health Professions Council of South Africa (HPCSA) (HSA, 2007).

From August 2005 it became compulsory for homeopaths who dispense their own medication to obtain a Compounding and Dispensing Certificate issued by the Pharmacy Council of South Africa, and then obtain the relevant license from the Department of Health (HSA, 2007).

The M. Tech. (Hom) degree is offered at the Durban University of Technology and the University of Johannesburg. The degree extends over five years of which the first three provide a thorough grounding in traditional medical subjects with special emphasis on diagnostic skills. These subjects include Chemistry I, Biochemistry I, Physics I, Biology I, Pharmacology I, Anatomy I and II, Physiology I and II,

Pathology I and II and Diagnostics I and II. In the final two years, emphasis is placed on the practical application of homeopathic, herbal and naturopathic principles, including aspects such as preventative medicine, community health care, nutrition, physical exercise and related therapies. Subjects include Auxiliary Therapy I, Materia Medica I, II and III, Clinical Homeopathy I and II, and

Homeopharmaceutics I. The student is guided to consider the patient as a whole and relate all peculiarities, reactions and modalities to the homeopathic method of treatment (Department of Homeopathy, D.U.T., 2009).

2.6 Scope of homeopathic treatment for children

The scope of homeopathic treatment includes almost any illness. Children respond well to homeopathic treatment. Complaints that are successfully treated using homeopathy in children include: colds, coughs, ear infections, teething, colic, allergies, chest infections, tonsillitis, asthma, diarrhoea, constipation, eczema, bed wetting, sleep disorders, slow development, growth disorders, worms, attention deficit hyperactivity disorder (ADHD), behavioural disorders and many more. Many parents take their children for homeopathic treatment when their children fail to respond to antibiotics / other drugs or the parents do not want their children to be reliant on medication. Homeopathy is an excellent immune system booster and makes children less susceptible to illness (Anello, 2007).

2.7 Perception surveys

2.7.1 The role of surveys

A survey is a method of collecting information from people about their ideas, feelings, plans, beliefs and their social, educational and financial background. It usually takes place in the form of questionnaires and interviews. It is used to help policymakers, programme planners, evaluators, researchers and surveys are most appropriate when information comes directly from people (Fink and Kosecoff, 1985). The data they provide are descriptions of attitudes, values, habits and background characteristics (Fink and Kosecoff, 1985).

2.7.2 Surveys done on perceptions towards homeopathy in South Africa

Small (2004) investigated the perception of homeopathy amongst Grade 12 learners in Durban, South Africa. Data analysis confirmed the initial perception that a great deal of ignorance about homeopathy exists amongst the public, namely, 76% of respondents had never heard of homeopathy. Only 3.7% of respondents had ever been treated homeopathically. More than 80% of respondents with no previous experience of homeopathy showed interest in learning more about it. This serves to again highlight the degree of lack of knowledge regarding homeopathy, and emphasizes the need for a concerted effort by the profession to undertake public education initiatives (Small, 2004).

Maharajh (2005) investigated the perceptions of general practitioners (GPs) and pharmacists in the greater Durban region towards homeopathy. Results showed that 68.42% of pharmacists and 57.73% GPs had some knowledge of homeopathy. 81.2% of all respondents felt that improved communication and co-operation would be beneficial to patients. It was determined that there is little or no communication between homeopaths and GPs/pharmacists, despite acknowledgement that communication would be beneficial for patients. It was concluded that there is a need for change in the health care system in South Africa, working relationships need to be forged between organizations and health professionals, and clear standards need to be defined for the homeopathic profession (Maharajh, 2005).

Turner (2005) investigated the perceptions of veterinarians towards homeopathy and the utilization of homeopathy by veterinarians in KwaZulu-Natal. The study showed that 60% of the respondents use homeopathy and 79.4% think that homeopathy has a role to play in veterinary medicine. 76% of veterinarians who do not use homeopathy said that they might use homeopathy in the future. This study showed that the level of interest in homeopathy amongst veterinarians has increased with more veterinarians using homeopathy than before, even if they do not have sound knowledge of homeopathic theory or philosophy. It was concluded that veterinarians perceive that homeopathy has a role to play in veterinary medicine (Turner, 2005).

De Villiers (2006) investigated the level of awareness of homeopathy and its contextualization in pharmacy front shop assistants in the KwaZulu Natal area. The study confirmed the initial perception that there is a poor level of knowledge regarding homeopathy even though 51% of respondents had received training on

homeopathic over the counter products by company representatives. 91.8% of respondents indicated that they perceived homeopathy to be effective, and 95.9% of respondents perceived that they needed further training and were interested in learning more (De Villiers, 2006).

Paruk (2006) investigated the perceptions that exist amongst pregnant women towards the use of homeopathy during pregnancy. Results of this study shows that, although all participants had heard of homeopathy, the main reasons for not having sought homeopathic treatment were identified as being due to a lack of knowledge of homeopathy, and uncertainty regarding its methods. Despite the lack of knowledge of homeopathy, almost all respondents were of the opinion that homeopathy should be made available for the treatment of most medical conditions and be offered in hospitals and clinics. It was concluded that provision of basic homeopathic knowledge to the public would prompt individuals to seek homeopathic treatment in the future (Paruk, 2006).

Macquet (2007) investigated the perceptions and awareness of homeopathy at the Durban University of technology (D.U.T) Homeopathic Day Clinic (H.D.C) amongst students. This study showed that far more needs to be done to market homeopathy amongst tertiary education students as levels of homeopathy were fairly poor in the study. 49% of respondents had never heard of homeopathy before and 48% had. With regards to the H.D.C, 29% were aware of it showing that it is reasonably well marketed on the D.U.T campus. However 49% said they would be interested in attending the H.D.C now that they know it exists. 68% wish to know more of homeopathy. It is evident from Macquet's study that a marketing research

programme is necessary to further educate the students at D.U.T of homeopathy (Macquet, 2007).

Thorvaldsen (2007) investigated the perceptions of 3rd year medical students at the University of Cape Town and the University of KwaZulu Natal towards homeopathy. The majority of the respondents (96%) had heard of homeopathy, with a substantial percentage (21%) being familiar or very knowledgeable about it. Only 4% of the respondents had never heard of homeopathy, which shows that awareness of complementary medicine is growing. 68% of respondents indicated an interest in learning more about homeopathy and 92% of the respondents felt it is important for a medical doctor to know about alternative forms of treatment. 79% of respondents said that improved communication between homeopaths and allopaths is important. It was concluded that homeopathy has the potential to become more widely accepted amongst the medical fraternity (Thorvaldsen, 2007).

Allopi (2008) investigated the perceptions of nurses in eThekweni towards homeopathy. The study showed that 19% of the total number of respondents had never heard of homeopathy while 10% indicated that they were quite familiar with the homeopathic profession. With regards to legitimacy of homeopathy most nurses working in the private hospitals (60.1%) perceived homeopathy to be a legitimate form of health care as compared to nurses working in public hospitals (39.9%). Generally, both groups considered communication and co-operation with homeopaths to be very poor. The majority of respondents (70.06%) perceived that homeopathy does have a role to play in a hospital setting. This study revealed that respondents had a positive view of homeopathy in general, and were open to learning more about it, and to cooperate with homeopaths (Allopi, 2008).

Naicker (2008) investigated the perceptions of medical specialists and interactions with homeopathy. This study showed that 70.7% respondents had heard of homeopathy but had no contact with it. Only 7.3% of respondents reported to have never heard of it. 14% had consulted with a homeopath and 8% had referred patients to a homeopath. 61.3% of respondents perceived homeopathy to be a legitimate form of health care. 76.7% of Medical specialists believed that homeopathy can be used in conjunction with conventional medicine and only 12.7% felt otherwise. This study revealed that although the overall perception of homeopathy was favourable, there is limited knowledge that Medical specialists have regarding homeopathy in the greater Durban area (Naicker, 2008).

Von Bardeleben (2009) investigated the perceptions of homeopathy amongst parents of children aged 3 to 7 years old at pre primary schools in the Pinetown district. More than half 56.1% had heard of homeopathy. Of the sample, 22.7% had previously taken their child to a homeopath for treatment, and the level of satisfaction with homeopathic treatment was 48.6%. Over half (51.2%) thought that homeopathy had a valid scientific basis. The majority (65.6%) thought homeopathic treatment should be available in hospitals and clinics. While 40% saw homeopathy as preventative medicine, 37.6% saw it as supportive and 35.7% as first choice treatment. It was concluded from this study that more than half of the public surveyed (56.1%) were aware of homeopathy but levels of understanding and knowledge were lower than expected even where there had been partial experience with a practitioner (Von Bardeleben, 2009).

2.8 International surveys on perceptions towards paediatric homeopathy and complementary and alternative medicine

A study entitled “Patterns and perceptions of complementary/alternative medicine among paediatricians and patient’s mothers” was conducted by Cuzzolin *et al*, in 2003. This study aimed to review literature in the paediatric field and summarize what is known about ADRs and the risks of CAM. Some interesting aspects emerged: (1) the extent of CAM use in the paediatric field is increasingly sought by parents of children with chronic illnesses; (2) most are “natural” and thus “safe”; and (3) physicians often feel they know too little about CAM and wish to learn more for different reasons including “to decide whether the alternative method is safe and / or ineffective”. They concluded that paediatricians should be prepared to discuss CAM therapies, in an attempt to minimize risks and to refrain parental misconceptions and doubts. They suggest education interventions for parents should be conducted, to increase awareness with regards to CAM (Cuzzolin *et al*, 2003).

A study entitled “Use of complementary/alternative medicine among paediatric patients” was conducted by Madsen *et al*, in 2003. This study aimed to characterize the use of CAM among patients in the Department of Paediatrics, Odense University Hospital. CAM was divided into herbal medicine (herbal drugs or dietary supplements) (HM), alternative therapy (acupuncture) (AT) or chiropractic (CHI). Of all patients, 53% had tried CAM at least once and 23% had tried CAM within a month (15% HM, 7% AT and 2% CHI). The users were pre-school children. HM (Biostrath and Echinacea) was especially used to strengthen the immune system. Among AT, reflexological treatment was the most popular treatment. The most

frequent users of CAM were patients with asthma, eczema, allergy and gastrointestinal diseases. Results showed that more than 50% of the users experienced positive effects and 6% had side-effects from alternative medicine. Of the CAM users, 11% of the total population used CAM instead of conventional medicines. This study concluded that of the paediatric patients, 53% had tried complementary/alternative medicine, which was used as a supplement to conventional medicine (Madsen et al, 2003).

A study entitled “Parent-Paediatrician communication about CAM use for children” in the Washington DC area was conducted by Sibinga *et al*, in 2004. This survey aimed to determine communication with the paediatrician about CAM use at 4 paediatric practices, from July through November 1998. Overall, 53% of parents expressed the desire to discuss CAM with their paediatrician, increasing to 75% among those who used CAM themselves and 81% among those who used CAM for their child. Results of this study show that, within the bioenergetic group of CAM therapies, homeopathic remedies were the most commonly used and had the highest disclosure rate. Most parents in this sample expressed the desire to discuss CAM therapies with their paediatricians. Poor parent – paediatrician communication about CAM use may result partly from parent’s anticipation of how the topic will be received by their paediatrician. Studies have found that patients anticipate disinterest, disapproval, or ignorance from their physicians regarding CAM therapies (Sibinga *et al*, 2004).

A study entitled “Paediatric homeopathy in general practice: where, when and why?” was conducted by Ekins-Daukes *et al*, in 2005 in Britain. This survey aimed

to investigate the extent of homeopathic prescribing in primary care for childhood disease and assessed the attitudes of GPs towards the use of homeopathy in children. This study was performed in 161 representative general practices in Scotland. Results showed that during the year 1999-2000 22% of general practices prescribed homeopathic medicines to 190 children. The majority of such prescriptions were issued to children under 1 year of age. The most frequently prescribed homeopathic medicines were for common self-limiting infantile conditions such as colic (85%), cuts and bruises (52%), teething (49%), dermatological conditions (32%), earache (21%), influenza and upper respiratory tract infections (16%), cough (16%), vomiting (16%), irritability (15%) and diarrhoea (12%). A total of 259 completed questionnaires were returned by GPs giving a response rate of 75%. The majority of GPs who prescribed homeopathic medicines did so when conventional treatments had apparently failed (76%), while 94% also perceived homeopathy to be safe. The main disadvantages to homeopathic paediatric prescribing were reported as lack of training, lack of efficacy, difficulty in using and prolonged consultation times (Ekins-Daukes *et al*, 2005).

A study entitled “Homeopathy in the paediatric population in Canada” was conducted amongst the Paediatric Society by Spiegelblatt, in 2005. Canadians, including children, are being exposed to a wide variety of complementary and alternative medicine (CAM), health care products and services. According to Spiegelblatt (2005), homeopathy by virtue of its purported non-toxic nature, appeals to those with legitimate concerns about conventional medicine.

Spiegelblatt (2005) also investigated the use of homeopathy in children in England. This study demonstrated that 18% of children had used a complementary therapy.

Homeopathy was one of the most popular treatments for dermatological, ear, nose and throat, respiratory and emotional disorders.

In Britain, two paediatric studies showed 15% of children with asthma and 35% of children with atopic dermatitis who tried CAM used homeopathy.

In Montreal, Quebec, 1992, a study conducted in the paediatric ambulatory department, found that of the 11% who had used CAM, homeopathy ranked second in overall use (Spiegelblatt, 2005).

A study entitled “Why do parents take their children to Homeopaths?” in Norway was conducted by Steinsbekk *et al*, in 2006. This study aimed to explore why parents take their children to homeopaths, since there was a threefold increase in the proportion of children among patients visiting homeopaths in Norway from 1985 to 1998. The results showed that parents consulted a medical doctor to clarify how serious their child’s health condition was, and sought treatment from a homeopath if the symptoms were not dangerous. The reasons they sought an alternative, or rather complement, to conventional medical treatment were as follows: (1) they did not wish to give their child allopathic medication, (2) they wanted to find an alternative treatment to their child’s currently prescribed allopathic medication, (3) they had ceased conventional medication due to its side effects, (4) to obtain treatment whilst waiting for a problem to be assessed, or (5) they were not offered any treatment by their medical doctor. In this study it was concluded that parents took their child to a homeopath due to experiences with the medical encounter or treatment and due to recommendations or own personal experience (Steinsbekk *et al*, 2006).

A study entitled “The use of complementary and alternative medicine in children at a general paediatric clinic and parental reasons for use” in Netherlands was conducted by Vlieger *et al*, in 2006. This study aimed to determine the prevalence of and reasons for the use of complementary and alternative medicine (CAM) in paediatric patients, and to determine the parental need for appropriate information from their paediatrician. Results showed that a total of 581 out of 617 parents completed the questionnaire (94%). CAM was used by 177 (30%) patients. The most frequently used types of CAM were homeopathy (48%), phytotherapy (45%), nutritional supplements (28%) and manual therapies (28%). CAM was used most often in children with headache or chronic fatigue. The most frequently cited reasons for CAM use were a desire for the child to feel better and a preference for a ‘more natural’ therapy. Only 40% of parents had reported the use of CAM to their paediatrician. The majority (60%) found it important that the paediatrician be able to provide information on CAM. This study concluded that almost one-third of patients visiting a general paediatrician had used complementary or alternative medicine in the past year (Vlieger *et al*, 2006).

2.9 Conclusion

It is clear to see from the studies conducted in South Africa and those conducted internationally, that homeopathy is a growing field. However, there is still a lack of knowledge of homeopathy that limits its use. Further studies need to be conducted around the world to investigate where the lack of knowledge lies and in which particular groups. It is also evident from the international studies described above, that homeopathy is gaining recognition in the conventional field of medicine. Many parents are seeking for alternative treatment for their children and homeopathy was the highest amongst other complementary medicines. This study, therefore, bridges the gap in knowledge by assessing directly the perceptions and attitudes regarding homeopathy amongst parents in the paediatric population in South Africa. In addition, this study will contribute valuable information to the general body of knowledge with regards to homeopathy and the perceptions people have of it.

2.10 Myths and misconceptions regarding homeopathy

Myths and misconceptions regarding homeopathy are thought to originate from a basic lack of understanding and awareness of homeopathic principles, methods and uses.

Homeopathy is based on experimental pharmacological and clinical data and is not an unproved science. All the principles of homeopathy are based on sound logic and experimental data (Myths about homeopathy, 2006).

The pace of the reaction to a homeopathic medicine is not slow acting and depends on the nature of the illness, the vital force of the patient, and the accuracy of the prescription. Responses to acute illnesses are often very rapid. In chronic conditions, the response time may be longer. Many patients find initial relief within a few days to a week of taking the medicine (Ullman and Reichenberg-Ullman, 1995 and Ullman, 2003).

Possible confusion regarding the use of homeopathy for chronic conditions may have arisen as a result of the success of homeopathy in the treatment of chronic conditions. After years of allopathic treatment often an illness becomes chronic, the treatment will naturally take longer than in a case of using homeopathy right from the beginning, the recovery period is much lower (Myths about Homeopathy, 2006).

Homeopathy and vaccination have similar, not the same, concepts and very different practices. Vaccines work on the physical body, in that they stimulate the

immune system directly. Homeopathic remedies work differently, by affecting the energy patterns or vital force of a person and by so doing stimulate the body to heal itself. They are administered orally in a diluted dose as opposed to being introduced directly into the bloodstream, as in the case with vaccination, thereby bypassing the body's natural defence system and stressing it in a way that is not fully understood (Myths about homeopathy, 2006).

Placebo is defined as "A substance with no active biological properties knowingly or unknowingly used to exert a beneficial therapeutic effect (Swayne, 1998:213). The concept of placebo effect implies that any observed effects are not attributed to the substance that was administered, thus further implying that the substance has no pharmacological effects.

Homeopathy shines in chronic, as well as acute and in severe, as well as minor, physical, mental, and emotional disease. Although patients taking a collection of conventional medications may not present a clear enough symptom picture to find an excellent homeopathic match, a longstanding history of symptomology is no impediment to successful homeopathic treatment (Ullman and Reichenberg-Ullman, 1995 and Ullman, 2003).

The principles that govern homeopathy and herbalism are two therapies that are quite different. Herbalism is concerned with the known sphere of action of a plant based on its chemical constituents as well as its known healing qualities.

Homeopathy is based on a very different set of principles. Homeopaths generally prescribe one remedy at a time rather than the mixtures of plant tinctures that herbalists employ (Myths about homeopathy, 2006).

Often a homeopath will ask patients to abstain from certain substances for the duration of their treatment. This is not prescribed as a strict diet but rather due to the fact that certain aromatic or fragrant substances may antidote or alter the action of the homeopathic medicine. These substances include coffee, garlic, tea, tobacco, alcohol, camphor, eucalyptus and menthol (Myths about homeopathy, 2006).

CHAPTER 3

MATERIALS AND METHODS

3.1 Objective

The aim of this survey was to determine the knowledge and perceptions of parents towards homeopathy as a form of treatment for their children.

3.2 The participants

The target population for this survey was parents, whose children were below 5 years of age and currently attending a Crèche or Educare in the central Durban, Berea, Musgrave and Morningside areas (Appendix I – ‘Map’). The sample consisted of parents at registered Crèches and Educare.

3.2.1 Inclusion criteria

- Only facilities in the central Durban, Berea, Musgrave and Morningside areas was used in this survey and had to be registered with the Durban District Office – Social Welfare (Appendix H).
- Parents with children that are 5 years and younger.

3.2.2 Exclusion criteria

- Any Crèches or Educarees that are not registered with the Durban District Office – Social Welfare.
- Parents with children of 5 years and older.

3.3 The sample

A list of the registered Crèches and Educarees for the central Durban, Berea, Musgrave and Morningside areas (Appendix H), was obtained by giving a 'Permission letter' (Appendix A) to the Durban District Office Social Welfare. The areas selected were the central Durban, Berea, Musgrave and Morningside areas (Appendix I – 'Map').

A sample size of 300 parents was used. The sample size of 300 was chosen since this was the number of parents with children 5 years and younger at the facilities that were targeted. 300 questionnaires were distributed to parents who were willing to participate in this survey at the various facilities.

3.4 Study design

The research took the form of a self-administered, descriptive, quantitative survey. A survey method was employed to investigate the perceptions of parents towards homeopathy in the treatment of their children. A research instrument (questionnaire) was utilized to collect data.

The number of questionnaires returned was 140 (46.6%) which were completed correctly so none were rejected. Thus, data was collected from 140 questionnaires (46.6%). Questionnaires were distributed aiming for a minimum of 35% response rate. 35% response rate was determined by the statistician (Nel, 2008) for such a survey. 35% was also specifically chosen from Paruk (2006) and Khoosal (2007) because of its previous success in gathering data regarding perceptions towards homeopathy.

The Instructors of these facilities were contacted telephonically and informed about the study. Instructors who were willing to conduct the survey within their facility, amongst the parents were then approached in person and the purpose of the survey was explained to them. Instructors were briefed regarding the aims, format and process of data collection associated with this survey. Instructors were chosen strictly on a voluntary basis.

The principal of the facility was asked to sign a 'Letter of permission' (Appendix B). The researcher handed out the appropriate number of documents 'Participant information letter' (Appendix C), Informed consent form (Appendix D) and 'Questionnaire' (Appendix F) relative to the number of parents whose child was under 5 years.

3.5 Methodology

3.5.1 The questionnaire

The questionnaire (Appendix F) used in this research was adapted from (Maharajh, 2005), (Paruk, 2006) and (Khoosal, 2007), with their permission (Appendix E). The questionnaire was specifically chosen from Maharaj, Paruk and Khoosal because of its previous success in gathering data regarding perceptions towards homeopathy, and knowledge and understanding of homeopathy. It also provided information with regards to the participant's previous experience with homeopathy. The questionnaire was modified to suit parents with children under 5 years. The questionnaire consisted of open questions which allowed respondents to give their comments and closed questions allowed them to choose from the options given only. A qualitative element was included at the end of specific questions where parents could add in any comments related to them.

The questionnaire (Appendix F) comprised of 32 questions divided in 3 parts:

- Part 1a: Personal information of parent
- Part 1b: Personal information of child
- Part 2: General knowledge of homeopathy
- Part 3: Your experience with health care provision

The questionnaire needed to fulfill the following criteria:

- The questions needed to be at the correct level of understanding without scientific terms.
- The language and lay-out needed to be user friendly and understandable.
- The questions needed to be logical and meaningful and elicit the desired information.
- The questions needed to be relevant to the subject of research (Scheuren, 2004).

Factors that affected completion of the questionnaire:

- Length of the questionnaire.
- Time taken to complete the questionnaire, more time would have been utilized if participants made comments.
- Available parent time to complete the questionnaire (Scheuren, 2004).

3.5.2 Focus group

A focus group was conducted prior to distribution of the questionnaire, to determine the face validity and content validity of the questionnaire.

A focus group is a tryout of the questionnaire on a sample of people to reveal if instructions are understood and questions can be answered. This process improves the response rate as well as the reliability and usefulness of the questionnaire (Fink and Kosecoff, 1985).

- Face validity is the simplest type of validity. It is determined by agreement between researchers and those with a vested interest in the questionnaire (ie. the focus group), that 'on the face of it' the research instrument seems valid, unambiguous and easily interpreted by a lay person (Bernard, 2000:227-276).
- Content validity describes a questionnaire that is considered to be effective and well rounded enough to be able to assess a particular concept (Bernard, 2000:227-276).

The focus group consisted of 8 people who were recruited by the supervisor and researcher. It comprised of males and females of all race groups. The questionnaire was tested on 1 homeopathic intern, 1 chiropractic intern and 2 homeopaths chosen from the homeopathic staff of Durban University of Technology and 4 parents with children under 4 years. This group gathered to discuss the questionnaire, the factors that it covered, and to establish the reliability of the questionnaire as well as to rule out ambiguity and syntax difficulties. The conclusions from the focus group were recorded. Any queries, concerns or problems about the questionnaire were discussed with the research supervisors. Changes were agreed upon, and the questionnaire was modified accordingly. The questionnaires from the focus group were not included in the study and participants of the focus group were excluded from the main study. The first 10 questionnaires formed part of the pilot study, which was excluded from the study.

3.5.3 Administration of the questionnaire

After obtaining permission and making the relevant arrangements with the principal, the researcher went to the respective facilities and dropped off the relevant documents. Instructors of these facilities distributed the questionnaires to parents and it was explained that the responses were voluntary and confidential. Details of registered facilities were obtained from the Durban District Office – Social Welfare (Appendix H). Interested individuals were given a copy of each of the following: Participant information letter (Appendix C), Informed consent form (Appendix D) and the Questionnaire (Appendix F). Participants were assigned a sample number on their questionnaire. The researcher visited these facilities twice during the 8-week period to collect completed questionnaires from the Instructors. A cut-off period of 8 weeks after the initial set of questionnaires were dropped off was set. Only questionnaires received within the 8 weeks were included in the research.

3.6 Confidentiality

Participation in the research was voluntary.

Anonymity was maintained in the following way:

- Respondents were not asked to supply their names, addresses, or other information that would allow identification.
- There was and is no way of identifying respondents from their returned questionnaires.

The only identifying element on the questionnaires was a sample number indicating which Crèche or Educare it originated from.

3.7 Data storage

All the answered questionnaires will be kept in a safe location for a period of 5 years at the Durban University of Technology and then destroyed.

3.8 Data analysis

Once all the questionnaires were collected, the data was encoded and entered into a computer by the researcher onto an Excel spreadsheet. The data was then sent to a statistician who imported it into the SPSS® (Version 17.1) for Windows™ and Excel® XP™.

3.8.1 Statistical analysis

The captured data was analyzed in 3 ways (Nel, 2009):

Firstly, descriptive statistics were analyzed using frequency tables and graphs.

Secondly, correlation analysis was performed using non-parametric tests to determine whether there was any significant association between the factors collected in the responses. The tests used were Pearson's Chi Square Test, Phi coefficient, Kendall Tau coefficient and Cramer's V coefficient.

Thirdly, dendrograms were generated, using the hierarchical cluster method. This allows the identification of clustered themes within responses, so that it could be determined whether answering one component would be more likely to indicate an answer to another component. Dendrograms were used to analyze questions that had more than one possible answer.

3.8.1.1 Non-Parametric Tests

Non-parametric tests differ from parametric tests in that the test structure is not specified beforehand but is instead determined from data. The term non-parametric is not meant to imply that such tests completely lack parameters but that the number and nature of the parameters are flexible and not fixed in advance. Non-parametric tests are therefore also called distribution free. They are mathematical procedures for statistical hypothesis testing which, unlike parametric statistics, make no assumptions about the frequency distributions of the variables being assessed. One of the most frequently used non-parametric tests are the chi-square tests (Wikipedia, 2009).

3.8.1.2 Pearson's Chi Square Test

Pearson's chi-square test is one of a variety of chi-square tests; statistical procedures whose results are evaluated by reference to the chi-square distribution. It tests a null hypothesis that the relative frequencies of occurrence of observed events follow a specified frequency distribution. It is a non-parametric test of independence, determining whether one variable is affected by another variable. It

does not measure the degree of the relationship, but is used to estimate the likelihood that some factor other than chance accounts for the apparent relationship (Wikipedia, 2009). Chi-square is calculated by finding the difference between each observed and theoretical frequency for each possible outcome, squaring them, dividing each by the theoretical frequency, and taking the sum of the results. The computed chi square value is compared with a critical value in the chi square table, taking note of the 41 appropriate degrees of freedom and level of significance. If the computed value exceeds the critical value in the table, assumption of independence can be rejected (Wikipedia, 2009). The level of significance was set at 5% ($p \leq 0.05$) in this study.

3.8.1.3 Cramer's V, Phi and Kendall Tau Coefficients

Cramer's V test and Phi coefficient are correlation coefficients that indicate the relationship between two binary variables. Whereas Pearson's Chi-Square test indicates whether there is a relationship between variables, Cramer's V and Phi coefficients indicate the degree to which the relationship exists. Cramer's V is a variant of Phi coefficient that adjusts for the number of rows and columns of cross tabulations. It is more useful for larger tables. Cramer's V coefficient and Phi coefficient range from -1 to 1, with 0 indicating no relationship and -1 or 1 indicating a perfect relationship. Kendall Tau coefficient indicates the strength of relationship between variables that are measured at the ordinal level (Wikipedia, 2009).

The general rule of thumb for correlation coefficient interpretation is:

-1.0 to -0.7 strong negative association.

-0.7 to -0.3 weak negative association.

-0.3 to +0.3 little or no association.

+0.3 to +0.7 weak positive association.

+0.7 to +1.0 strong positive association (Simon, 2006).

3.8.1.4 Dendrograms

A dendrogram is a tree diagram frequently used to illustrate the arrangement of the clusters produced by a clustering algorithm. Data clustering is a common technique for statistical data analysis which is used to classify similar objects into different groups. It is used to partition a data set into subsets (clusters), so that the data in each subset shares some common trait. Data clustering may also be known as cluster analysis. Data clustering algorithms can be hierarchical or partitional. Hierarchical algorithms find successive clusters using previously established clusters, whereas partitional algorithms determine all clusters at once (Wikipedia, 2009).

The results appear in Chapter 4 and are discussed in Chapter 5.

CHAPTER 4

RESULTS

4.1 Introduction

Following the methodology described in Chapter 3, the study produced raw data in the form of completed questionnaires. Out of 300 questionnaires delivered to prospective parents, 140 (47%) were returned, completed correctly and acceptable for analysis.

The specific objectives of the analysis were as follows:

- (1) To describe the demographic characteristics of individuals who responded to the questionnaire.
- (2) To describe levels of general knowledge and attitudes of homeopathy according to the sample.
- (3) To describe respondents experiences of health care provision.
- (4) To determine any statistically significant correlations between any of the demographic factors and the general knowledge of homeopathy and their experiences of health care provision.
- (5) To identify clusters (if any) of view point correlates according to demographic or other factors.

The analysis of the data was done using SPSS® (Version 17.1) for Windows™ and Excel® XP™.

4.2 Overview of Results Chapter

4.2.1 Descriptive data

4.2.1.1 Demographics (Questions 1 – 10)

These comprised distribution tables and graphs for the parental demographic data (gender, age category, ethnic group, home language, occupational status and general health status) as well as the children's demographic data (no. of children, ages of children, health status of children, and medication status of children).

4.2.1.2 Knowledge of homeopathy (Questions 11 – 19)

These comprised descriptions of central tendency and distribution frequencies for the data relating to the current level of knowledge of the respondents.

4.2.1.3 Experiences with health care provision (Questions 20 – 32)

These comprised descriptions of central tendency and distribution frequencies for the data relating to the respondents' experience with health care provision.

4.2.2 Analysis

4.2.2.1 Correlation analysis

The Chi Squared Co-efficient and Kendall's Tau Correlation Co-efficient were calculated to determine the existence of correlations between demographic and attitudinal, knowledge or experience variables as given by respondents in the sample. Further, Asymmetric Measures (Phi, Cramer's V and Lambda) were used to measure the strength of the correlations. The Chi Squared co-efficient and Kendall's Tau correlation co-efficient were calculated to determine the existence of correlations between demographic variables, between general knowledge variables and between experience variables.

4.2.2.2 Cluster analysis

Cluster analyses were conducted to determine clusters of demographic and attitudinal or perceptual views.

4.2.3 Comments

This comprised a description of the comments made by respondents. Further discussion of these in light of the above statistical analysis follows in Chapter 5.

4.3 Abbreviations

Respondent = individual satisfying inclusion criteria who completed the questionnaire

H_0 = null hypothesis

H_1 = alternative hypothesis

S.D. = Standard deviation

Z = Standardised z value for statistical measurements

P = Two tailed probability of equaling or exceeding $z/2$

N.S. = No statistically significant difference

S = Statistically significant difference

If $p \leq 0.05$ then a significant difference was concluded (5% level of significance)

If $p > 0.05$ then no significant difference was concluded (5% level of significance)

4.4 Descriptive statistics

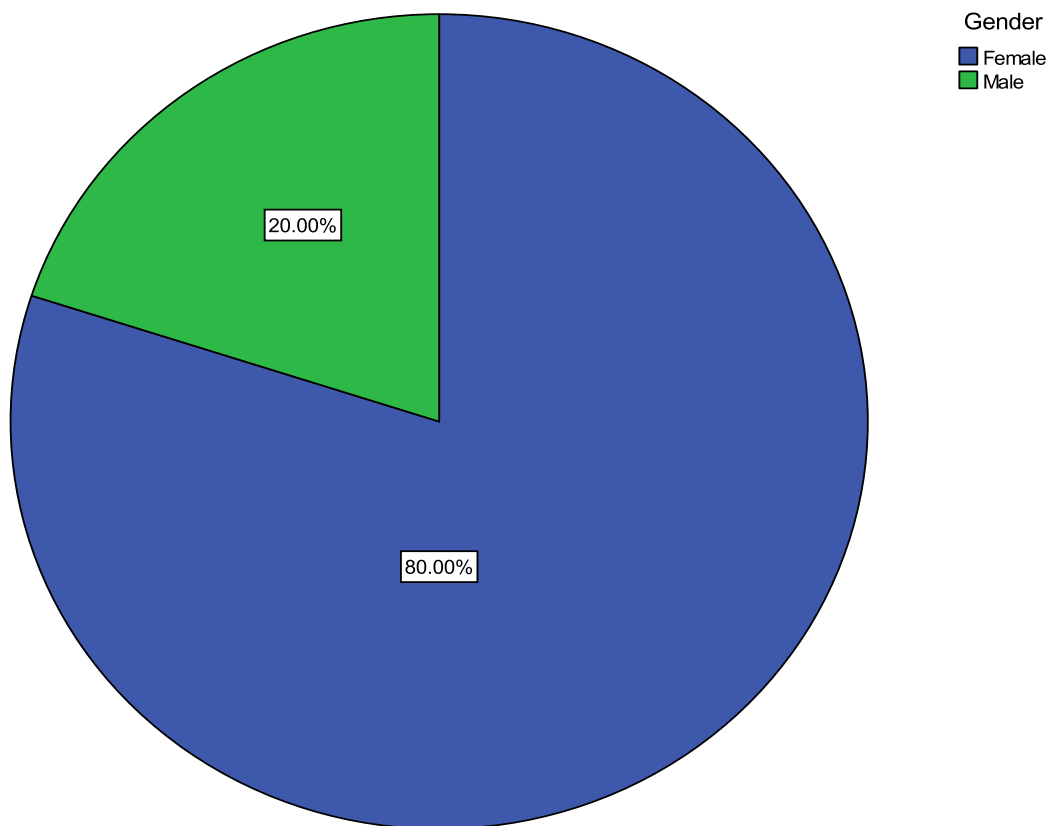
4.4.1 Part 1: Personal information (Questions 1-10)

In terms of Objective one described in the Introduction, the distributions of the demographic variables are described.

Table 4.1 Gender distribution of respondents

		Count	Column N %
Gender	Female	112	80.0%
	Male	28	20.0%

Figure 4.1 Chart showing gender proportions of the sample

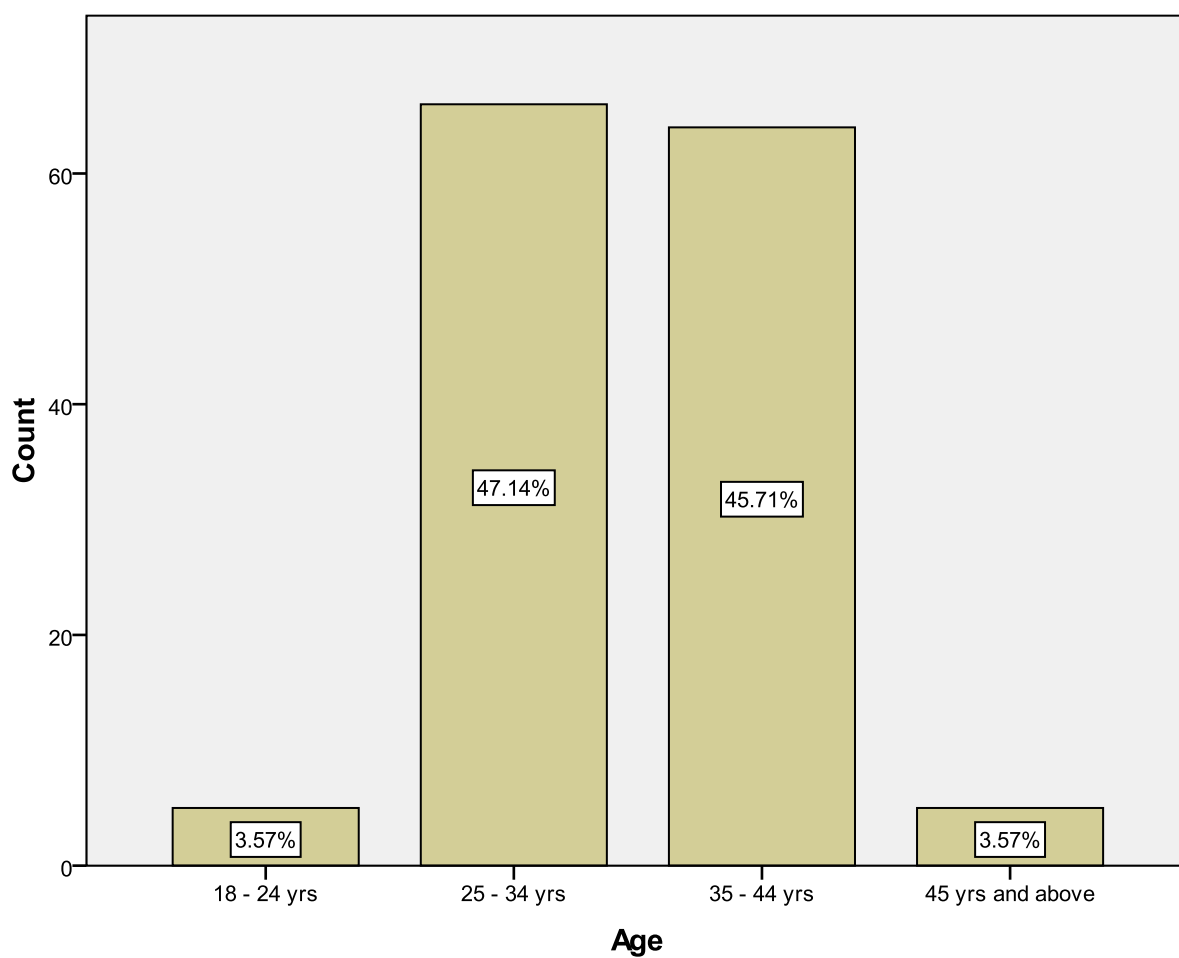


The observed gender breakdown supports the expectation that women are more likely to be involved in the day to day details of raising children. From the gender breakdown above, this would include answering surveys.

Table 4.2 Age distribution of respondents (by category)

	Count	Column N %
Age 15 - 17 yrs	0	.0%
18 - 24 yrs	5	3.6%
25 - 34 yrs	66	47.1%
35 - 44 yrs	64	45.7%
45 yrs and above	5	3.6%

Figure 4.2 Graph Showing Age Distribution of Sample

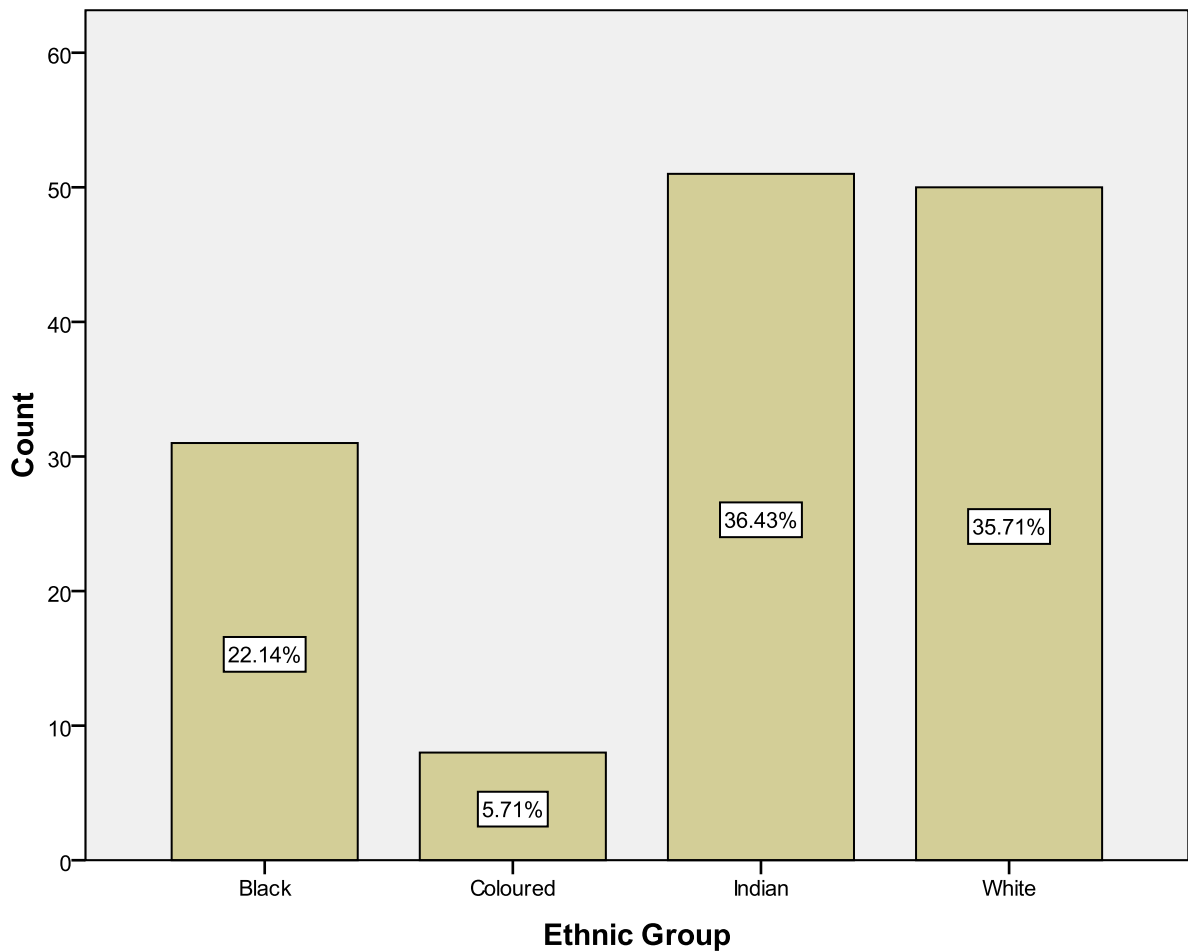


The age distribution of the sample is congruent with the expected range. 90% of the respondents were between the ages of 35 and 44, the ages between which one would expect parents to have young children. Interesting to note is the almost equal proportion of parents between 35 and 44. This may be explained by the fact that the survey was conducted in a fairly affluent suburb. It is expected that career and financial considerations would lead respondents to wait before having children. Smaller breakdowns in the age categories may have further illustrated this trend.

Table 4.3 Ethnic composition of sample

	Count	Column N %
Ethnic Group Black	31	22.1%
Coloured	8	5.7%
Indian	51	36.4%
White	50	35.7%
Other	0	.0%

Figure 4.3 Graph showing ethnic composition of sample

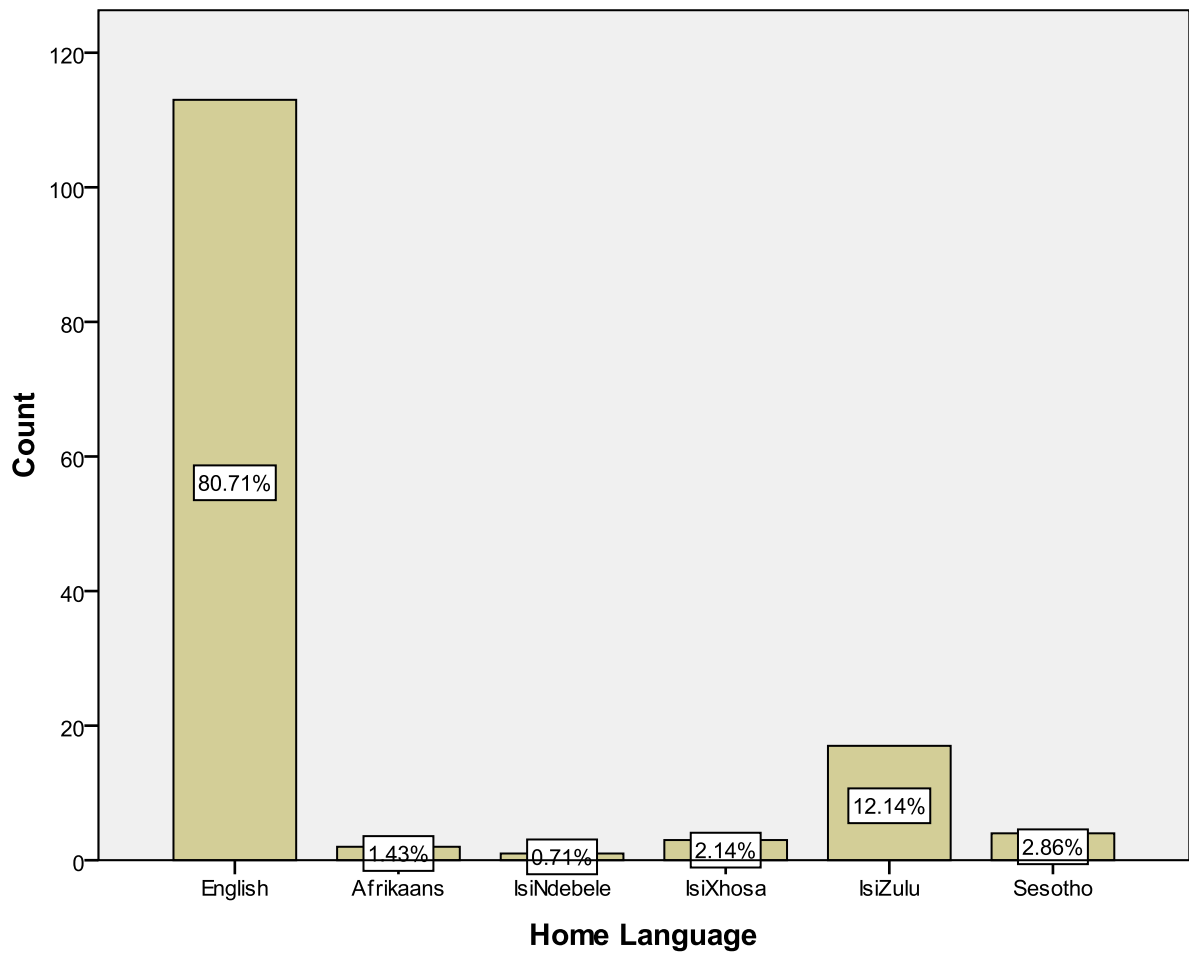


The ethnic composition of the sample reflects a change from a historically determined demographic (White only suburb) with a modern demographic (economically determined distribution). The ethnic composition is however not representative of the greater South African composition.

Table 4.4 Table showing home language spoken

	Count	Column N %
Home Language English	113	80.7%
Afrikaans	2	1.4%
IsiNdebele	1	.7%
IsiXhosa	3	2.1%
IsiZulu	17	12.1%
Northern Sotho	0	.0%
Sesotho	4	2.9%
Setswana	0	.0%
SiSwati	0	.0%
Tshivenda	0	.0%
Xitsonga	0	.0%
Other	0	.0%

Figure 4.4 Graph showing home language spoken

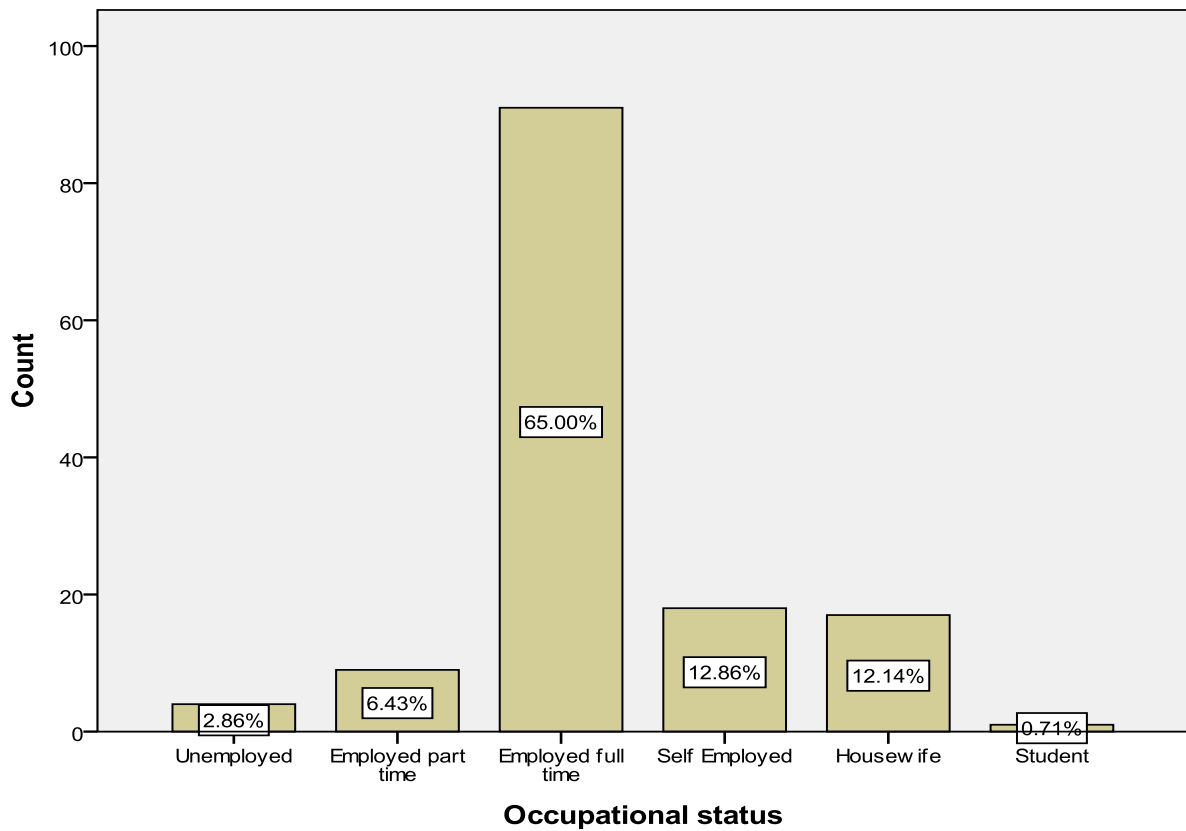


The home language spoken breakdown follows from the ethnic composition of the sample. The majority of respondents were English speaking and this can be linked to the demographic data.

Table 4.5 Table showing occupational status

		Count	Column N %
Occupational status	Unemployed	4	2.9%
	Employed part time	9	6.4%
	Employed full time	91	65.0%
	Self Employed	18	12.9%
	Housewife	17	12.1%
	Student	1	.7%
	Other	0	.0%

Figure 4.5.1 Graph showing occupational status



As expected in an affluent suburb, 65% of the respondents are employed full time, while 25% are either self employed or occupied in the home. Figure 4.5.2 below illustrates the occupational status by gender. Most of the women are employed full time, with the majority of the balance either self employed or housewives. Most of the men are employed full time.

Figure 4.5.2 Graph showing the occupational status of respondents by gender

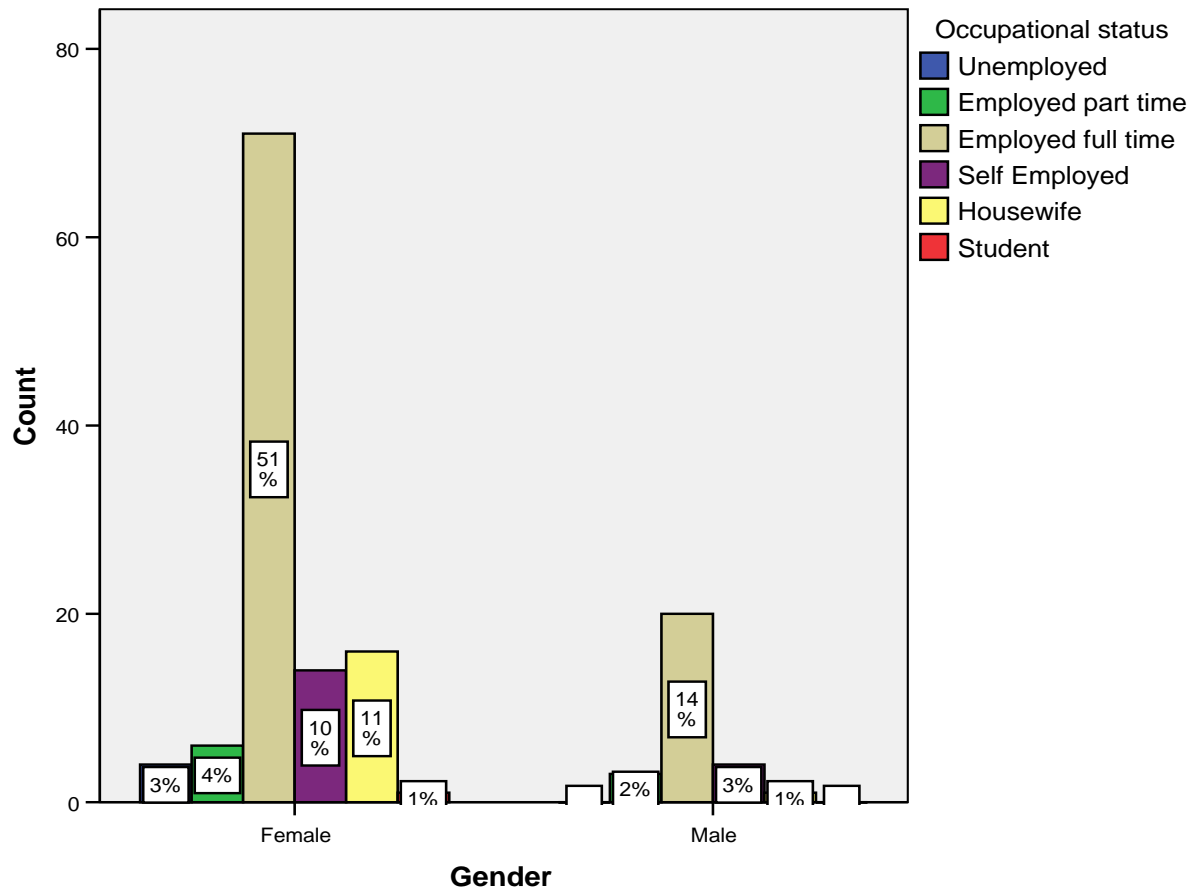
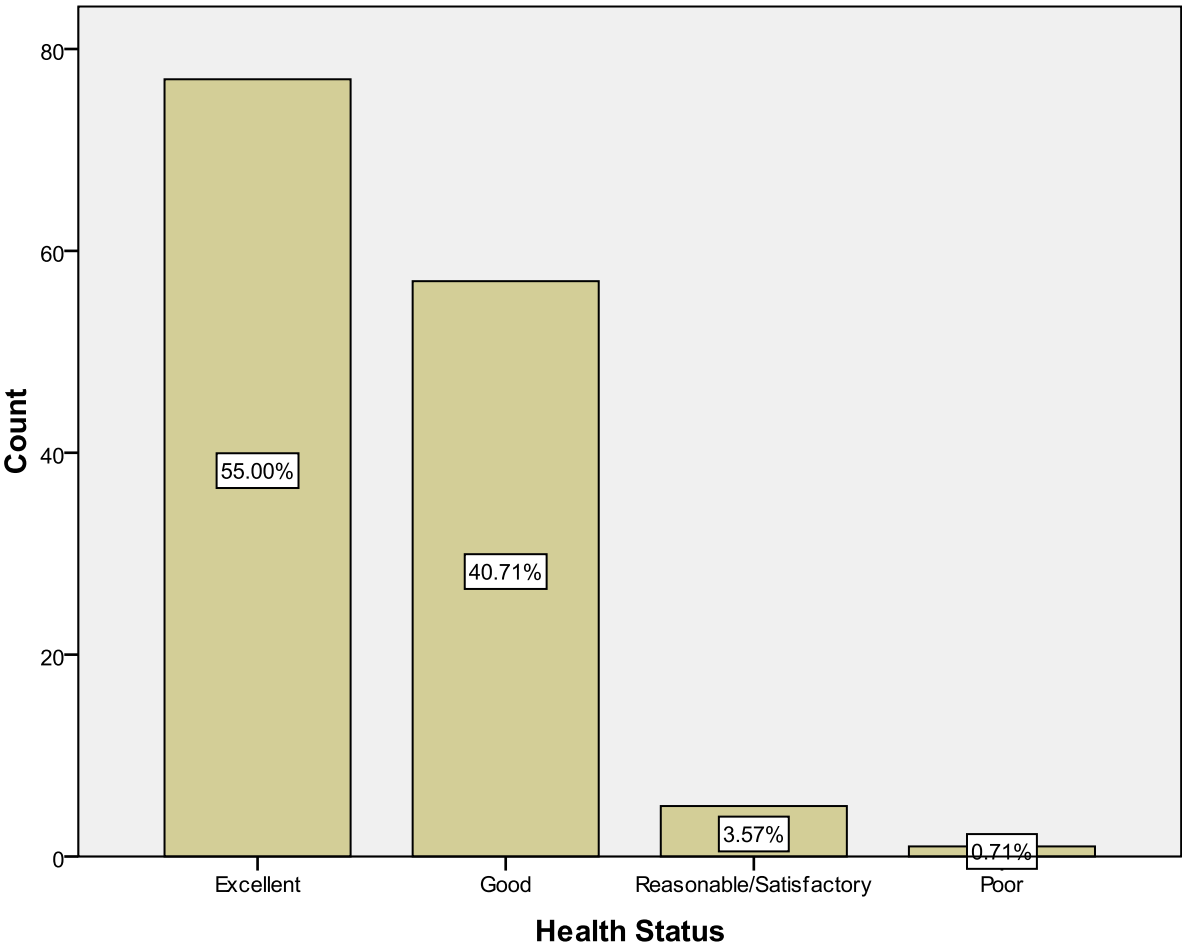


Table 4.6 Table showing general health status of respondents

	Count	Column N %
Health Status Excellent	77	55.0%
Good	57	40.7%
Reasonable/Satisfactory	5	3.6%
Poor	1	0.7%

Figure 4.6 Graph showing general health status of respondents

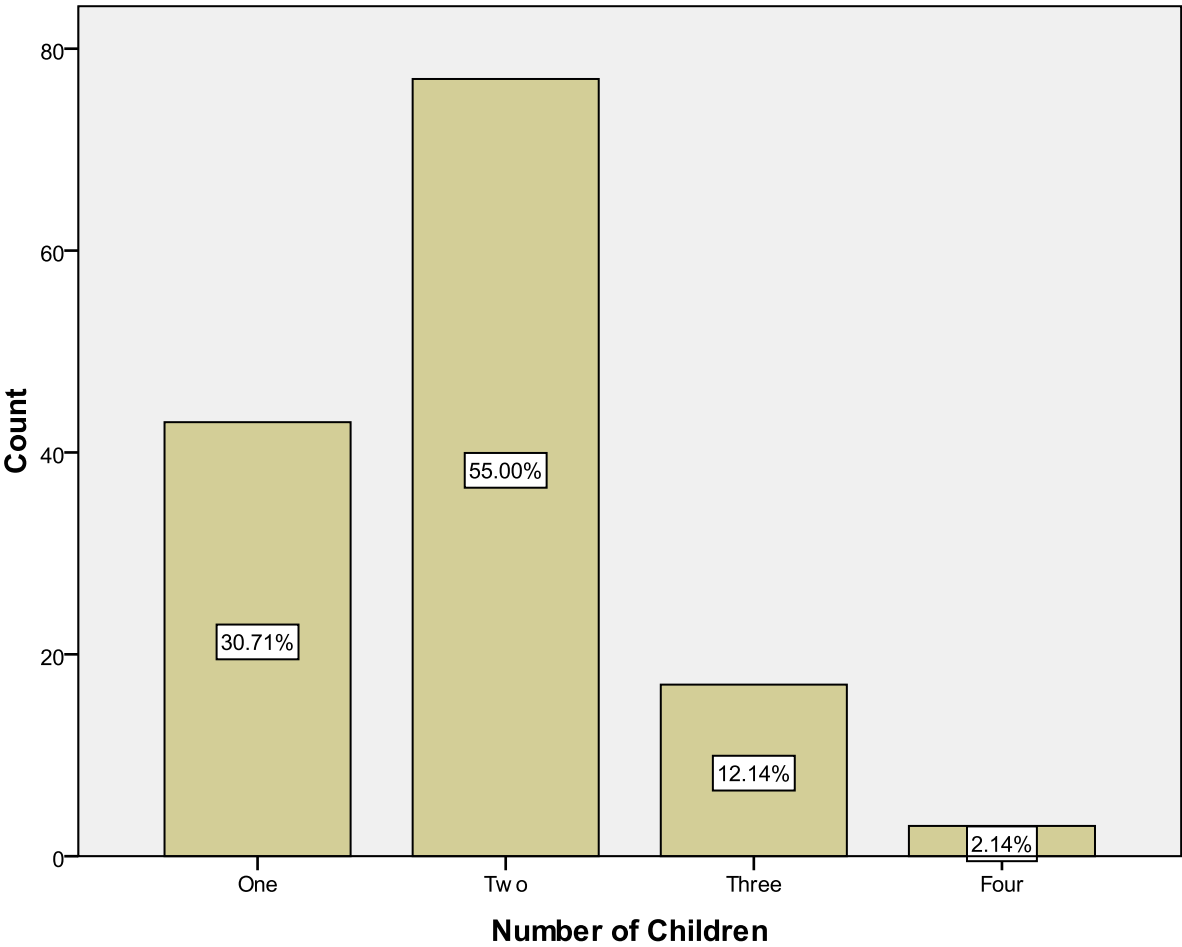


95% of the respondents have health which is good or excellent. This would be expected from the demographic status of the respondents. Socio-economic status is a fairly good predictor of health, particularly in the 3rd and 4th decade of life.

Table 4.7 No of children of the respondents

		Count	Column N %
Number of Children	One	43	30.7%
	Two	77	55.0%
	Three	17	12.1%
	Four	3	2.1%
	Other	0	.0%

Figure 4.7 Graph showing number of children of the respondents

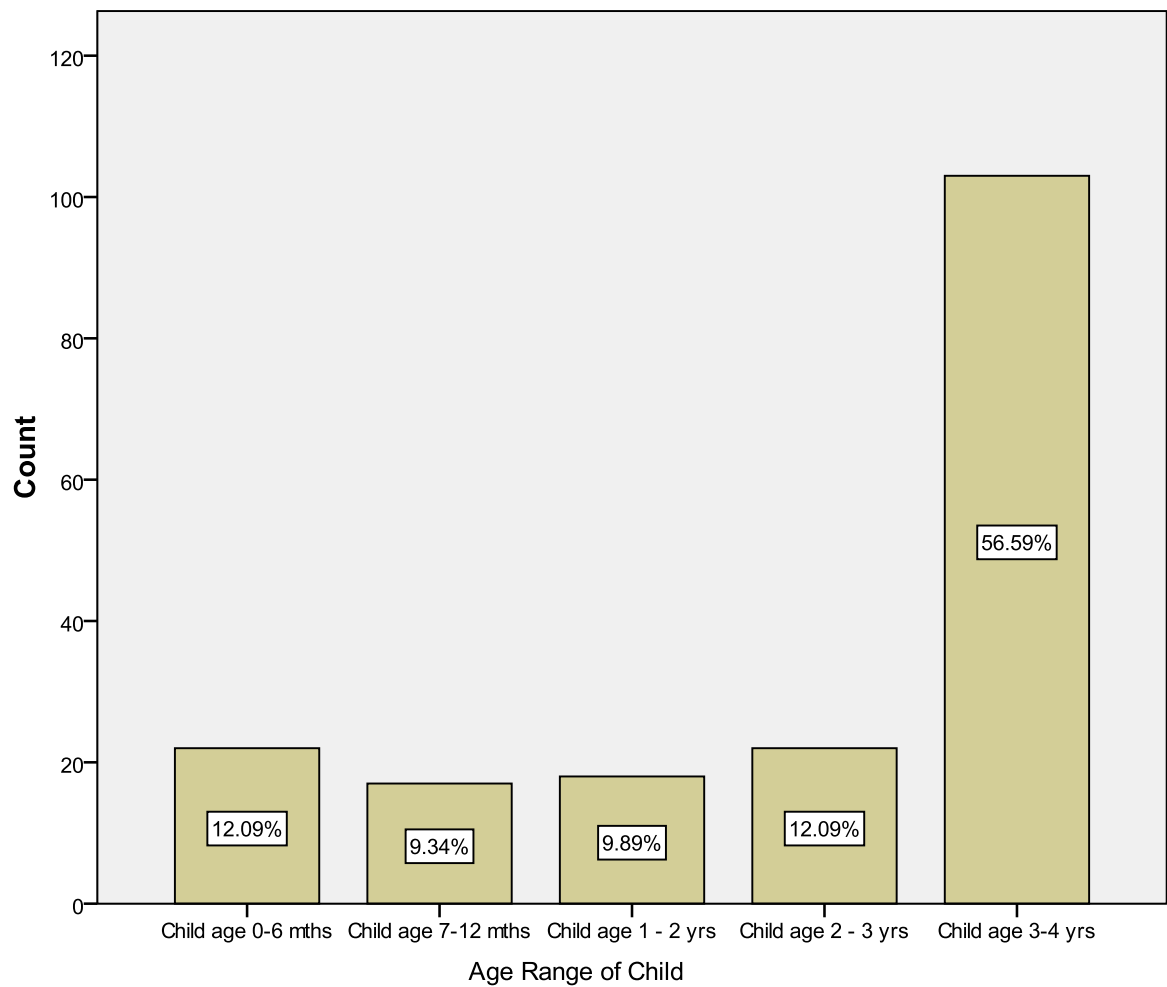


Most of the respondents have one or two children. This is in keeping with the ethnic grouping and the occupational status of the respondents. Suburban respondents, whites, affluent respondents and highly employed respondents all tend to have smaller families.

Table 4.8 Age group range of children of respondents

		Count	Column N %
Age Group range	Child age 0-6 mths	22	12.1%
	Child age 7-12 mths	17	9.3%
	Child age 1 - 2 yrs	18	9.9%
	Child age 2 - 3 yrs	22	12.1%
	Child age 3-4 yrs	103	56.6%

Figure 4.8 Graph showing age group ranges of children of respondents

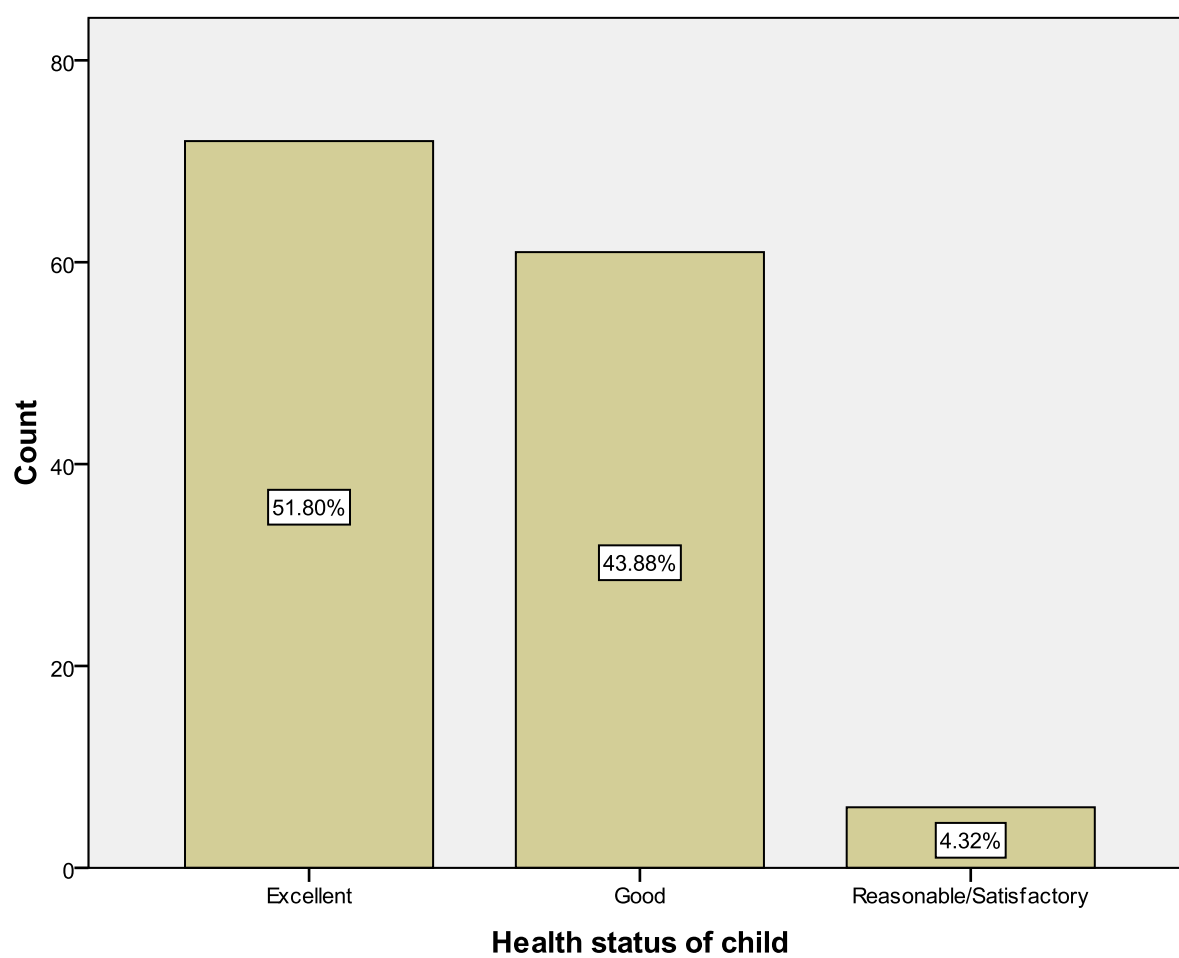


Most of the respondent's children are between the age of 3 and 4 years old. This is in keeping with the design of the study in targeting pre-school age children. The even spread across the other age groups is understood by some respondents having more than one child.

Table 4.9 Table showing health statuses of children

		Count	Column N %
Health status of child	Excellent	72	51.8%
	Good	61	43.9%
	Reasonable/Satisfactory	6	4.3%
	Poor	0	.0%

Figure 4.9 Graph showing health statuses of children

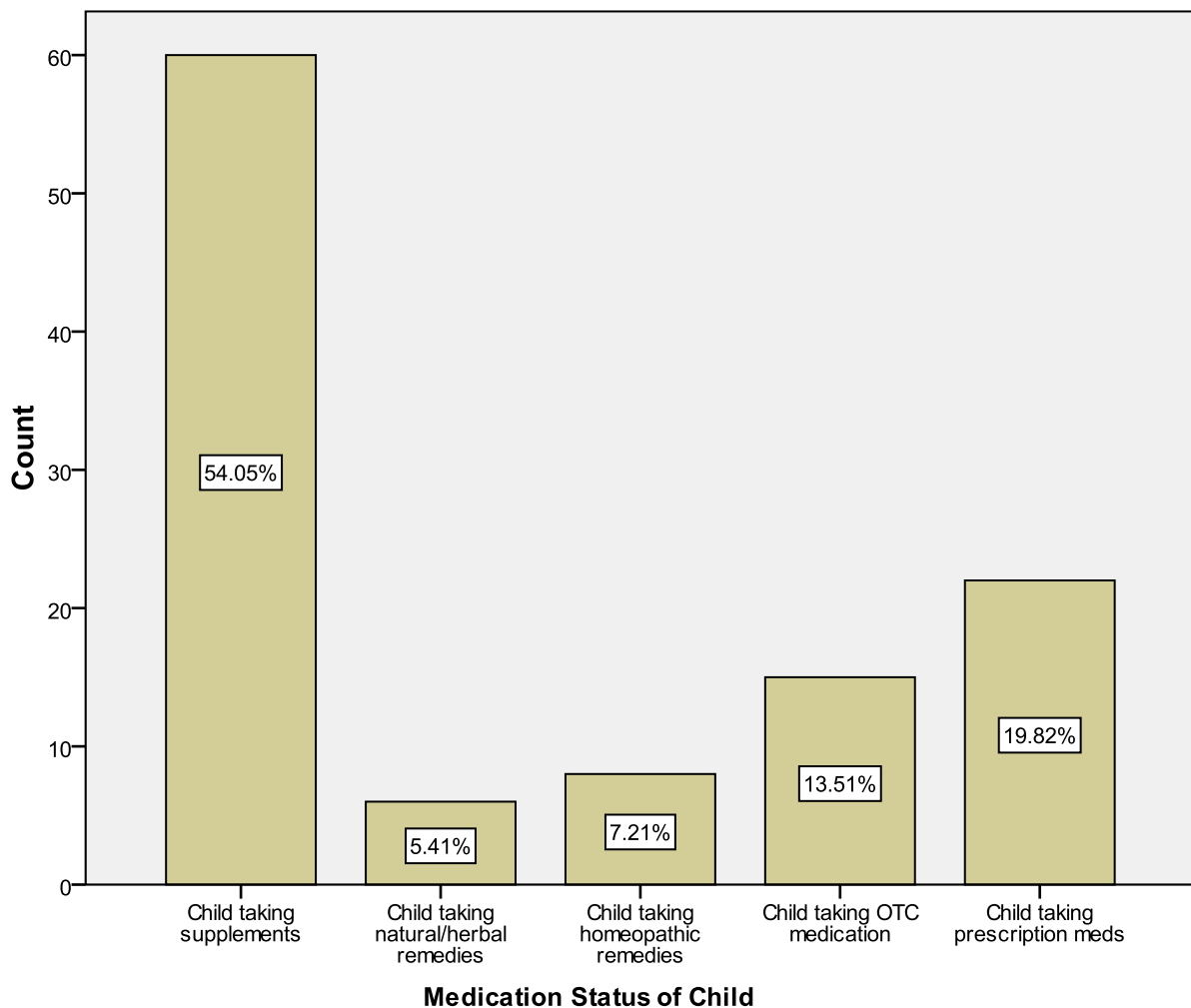


The health status of the respondents closely matches the health status of the children. This is supported by correlation analysis. The phi correlation co-efficient is 0.524; a very strong correlation. The z-value is 0.000 i.e. well within the significance range.

Table 4.10 Table showing current medications for respondent's children

		Count	Column N %
Child taking supplements	1	60	54.04%
Child taking natural/herbal remedies	1	6	5.0%
Child taking homeopathic remedies	1	8	7.0%
Child taking OTC medication	1	15	13.5%
Child taking prescription meds	1	22	19.8%

Figure 4.10 Graph showing current medications for respondent's children



More than 50% of the children are taking supplements. This would support the picture of the good general health levels. Supplement use suggests a proactive and supportive approach to health.

Almost 20% of the children are taking prescription medications. This may open questions as to the very relative nature of health assessment i.e. what is excellent health? A child who is on Ritalin but not acutely ill more healthy than a child with flu and colds? This question is particularly relevant from the homeopathic point of view.

Comments on Q.10:

- Flu and cough medicine;
- Asthmatic and using the pump (2 respondents);
- Asthmatic – Venteze, Singulair;
- Asthmatic, uses Venteze syrup, preventer inhaler and reliever inhaler;
- My child is on Ritalin – a prescribed medication for ADHD;
- Prescription medication for psoriasis, AIM products, vitamins and tissue salts;
- Solgar multivitamin.

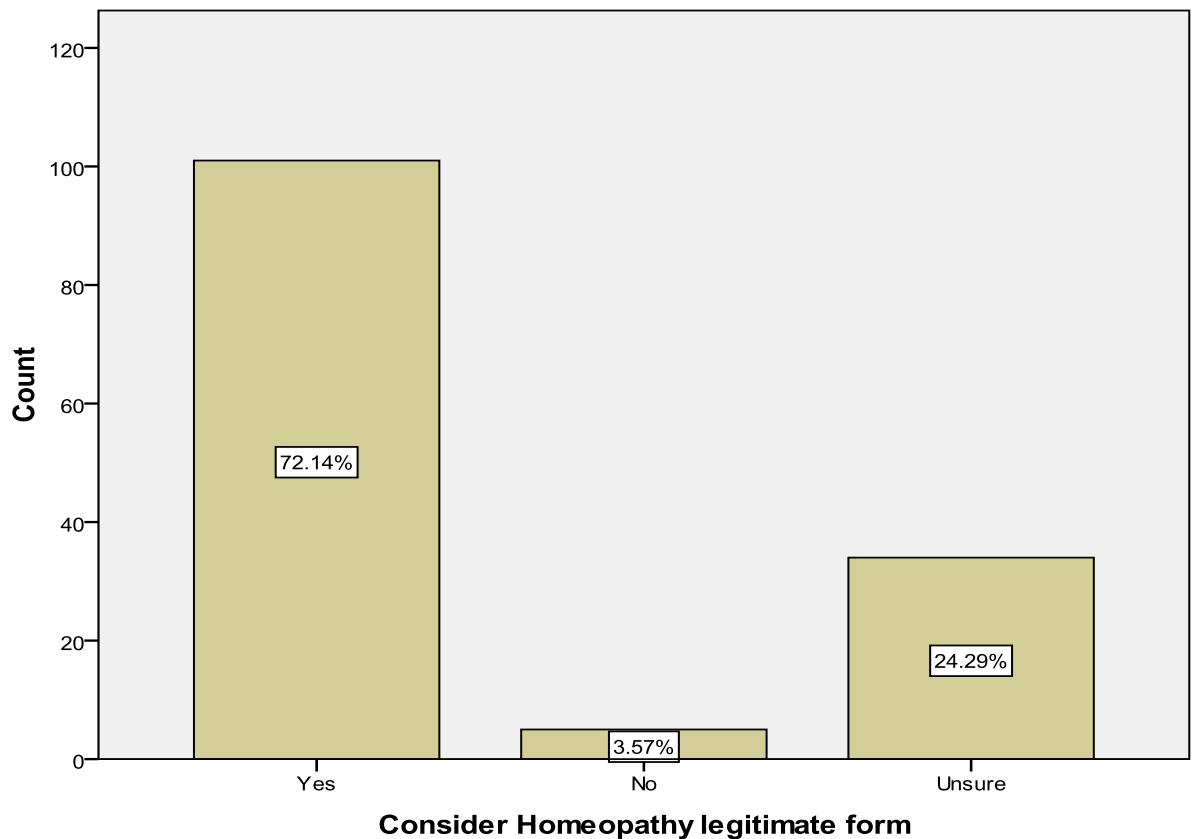
4.4.2 Part 2: Knowledge of homeopathy (Questions 11-19)

The data used for the following analyses were derived from Part 2 of the completed questionnaires. In terms of Objective 2 in the introduction, the respondents' knowledge of homeopathy was described as reflected by the questionnaire.

Table 4.11 Table showing respondents' view of homeopathy

		Count	Column N %
Consider Homeopathy legitimate form	No	5	3.6%
	Unsure	34	24.3%
	Yes	101	72.1%

Figure 4.11 Graph showing respondents' view of homeopathy



The above graph suggests that ignorance of homeopathy is more prevalent than active disagreement. This impression arises repeatedly in this section.

Comments on Q.11

- It is an alternate form of medicine;
- Homeopathy is a legally recognized profession;
- Homeopathy is very effective;
- My Christian beliefs don't agree with this, not saying it does not work but not sure where your source comes from;
- I never heard of homeopathy, no clue;
- It is made from natural herbs and there is no harm;

- Do not know much about it;
- Most mothers that I know, who have used homeopathic medicines had excellent results;
- Homeopathic treatment can cure illnesses;
- Wouldn't use homeopathy if very ill.

Table 4.12 Table showing respondents' perceptions of the mode of practice of homeopath

		Count	Column N %
Homopath diagnose disease	Not Answered	4	2.9%
	Yes	72	51.8%
	No	15	10.8%
	Unsure	48	34.5%
Homopath use meds that cause same sx	Not Answered	5	3.6%
	Yes	38	27.7%
	No	29	21.2%
	Unsure	65	47.4%
Homopath use antibiotics	Not Answered	3	2.2%
	Yes	7	5.1%
	No	99	71.7%
	Unsure	29	21.0%
Homopath use iridology/opthalmic	Not Answered	4	2.9%
	Yes	6	4.3%
	No	66	46.8%
	Unsure	62	44.9%
Homopath prescribes plant extracts	Not Answered	2	1.4%
	Yes	103	74.1%

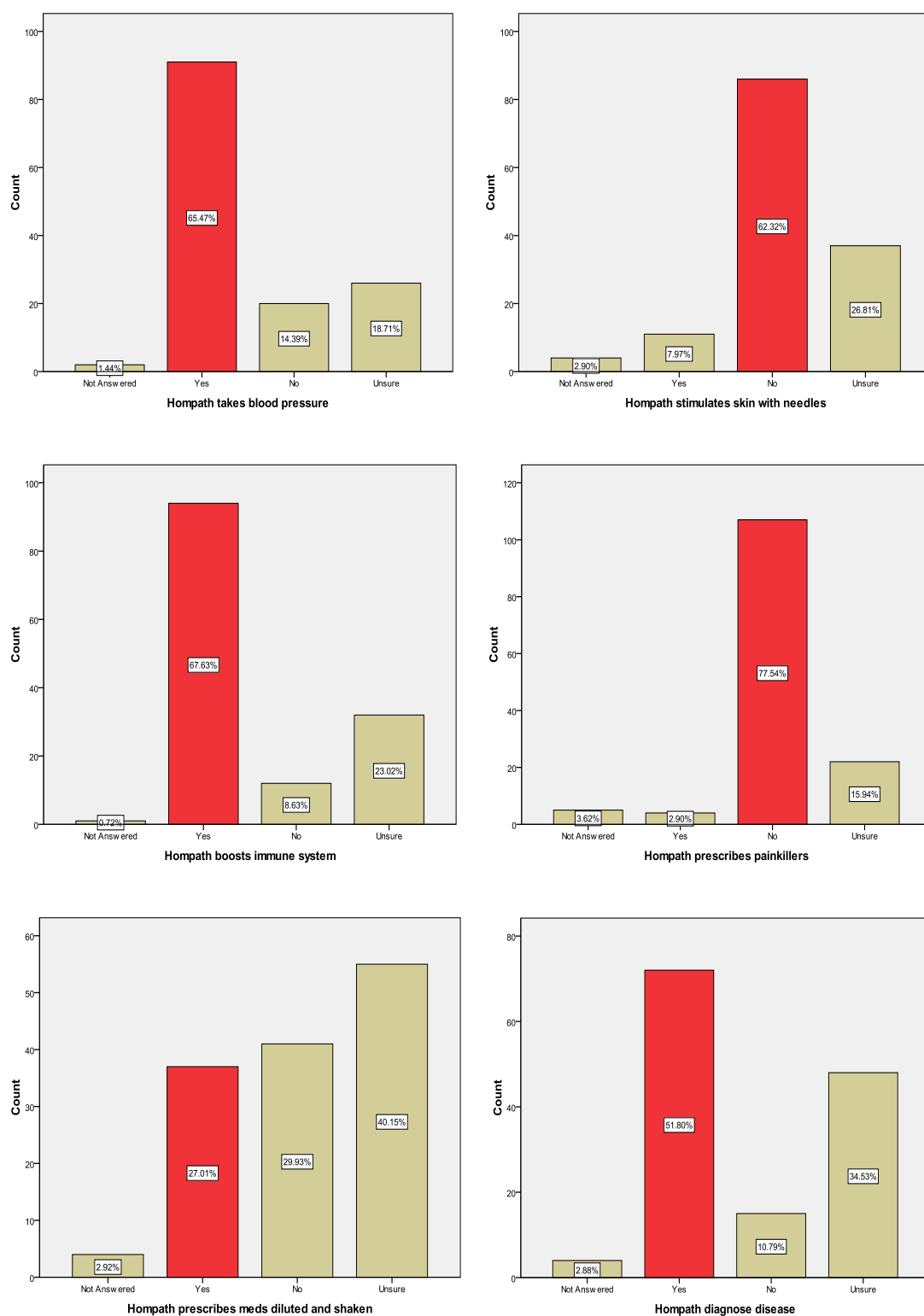
Homopath stimulates skin with needles	No	7	5.0%
	Unsure	27	19.4%
	Not Answered	4	2.9%
	Yes	11	8.0%
Homopath boosts immune system	No	86	62.3%
	Unsure	37	26.8%
	Not Answered	1	.7%
	Yes	94	67.6%
Homopath prescribes painkillers	No	12	8.6%
	Unsure	32	23.0%
	Not Answered	5	3.6%
	Yes	4	2.9%
Homopath prescribes meds diluted and shaken	No	107	77.5%
	Unsure	22	15.9%
	Not Answered	4	2.9%
	Yes	37	27.0%
Homopath emphasises healthylifestyle	No	41	29.9%
	Unsure	55	40.1%
	Not Answered	1	.7%
	Yes	119	86.2%
Homopath prescribes diet	No	2	1.4%
	Unsure	16	11.6%
	Not Answered	3	2.2%
	Yes	93	67.4%
Homopath can treat majority of dx	No	11	8.0%
	Unsure	31	22.5%
	Not Answered	3	2.2%
	Yes	96	69.1%

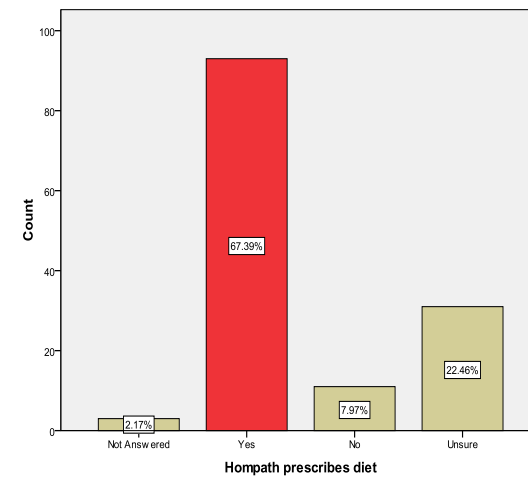
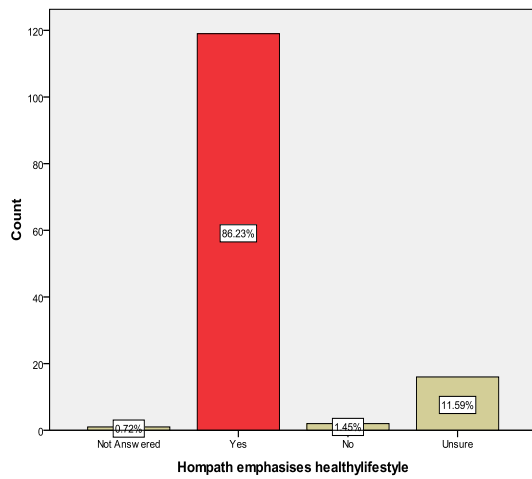
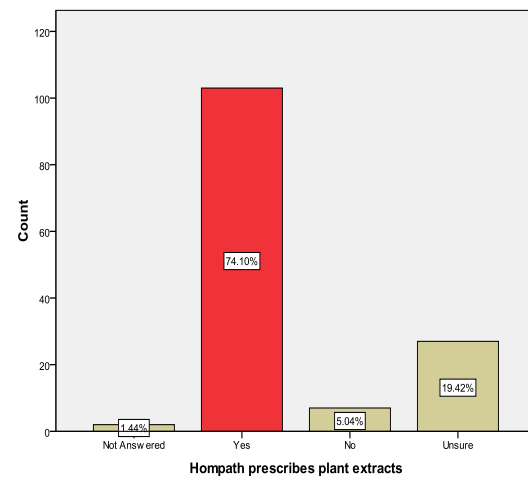
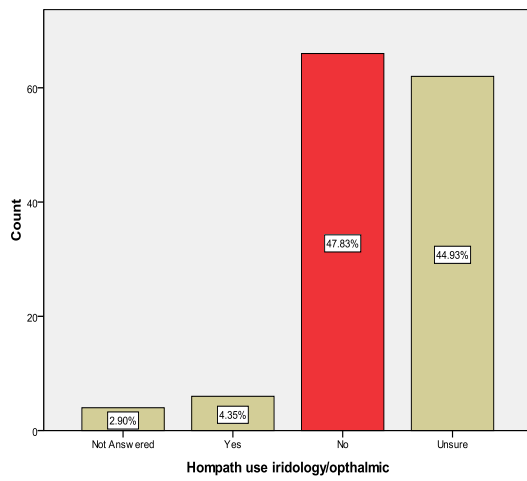
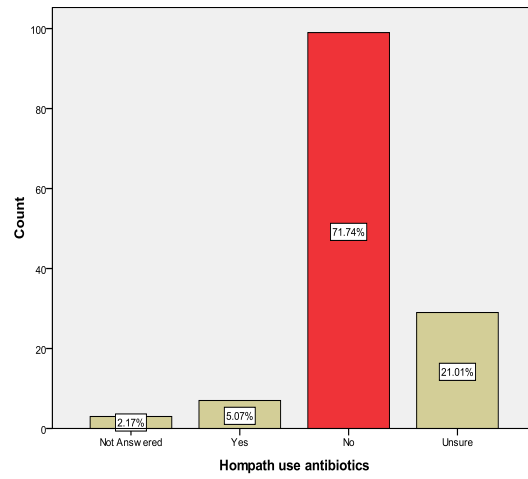
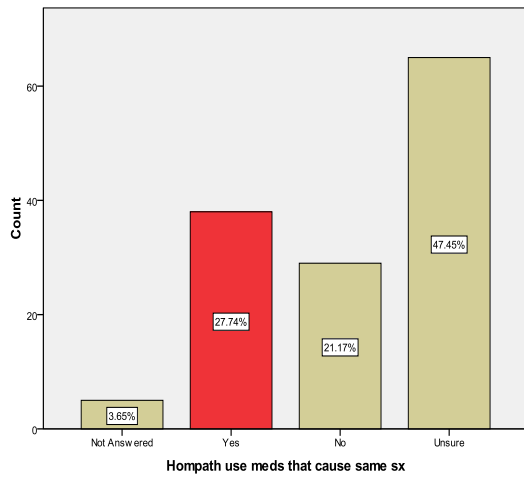
Homopath prescribe and dispense own meds	No	7	5.0%
	Unsure	33	23.7%
	Not Answered	4	2.9%
	Yes	97	69.3%
	No	4	2.9%
	Unsure	35	25.0%

In order to appreciate the prevailing viewpoints/impressions of homeopathy, two analysis techniques are presented. First the graphs for the individual components are presented. In each of these graphs the “correct” answer is presented in a different colour. This serves to highlight those areas where the impressions of homeopathy are confused or inaccurate.

Secondly a summary graph is presented which details the percentage of respondents whose impression of homeopathic practice was accurate (i.e. answering “No” to “Homeopaths prescribe antibiotics”).

Figure 4.12.1 Graphs showing respondents perceptions of the mode of practice of homeopath





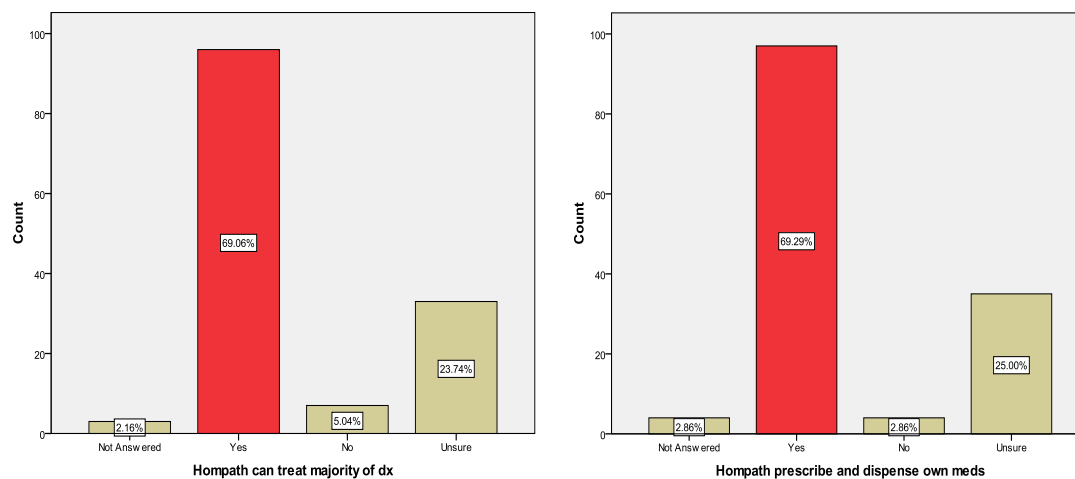
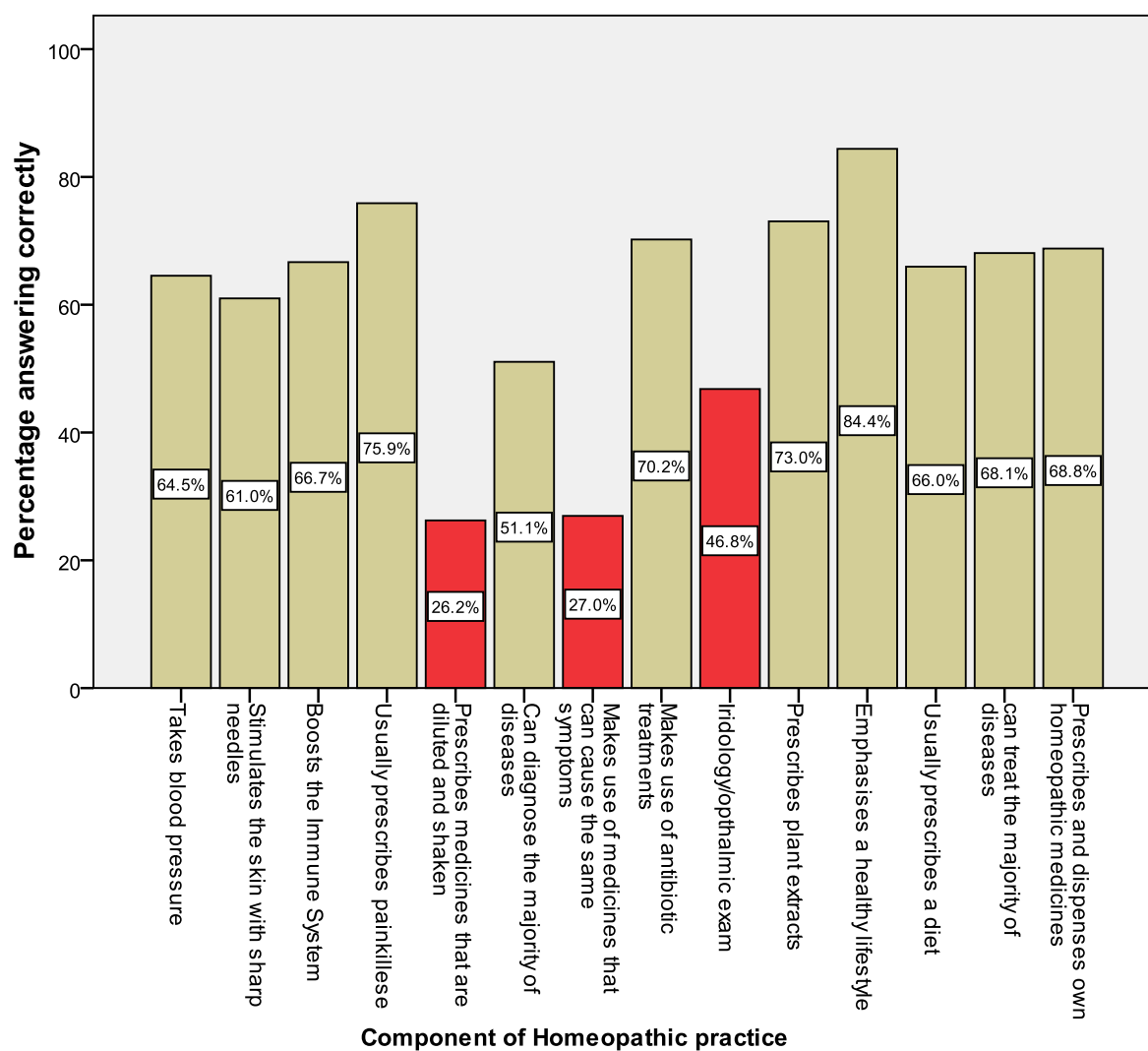


Figure 4.12.2 Graph showing Composite of Questions answered correctly



From the above graph it is apparent that the components of homeopathic practice least understood are the preparation of remedy substances, and the nature of medicines (causing the same symptoms as being treated). The iridology/ophthalmology question is disregarded. This is due to the fact that iridology is a (as yet) unconfirmed diagnostic system relying on unproven reflex associations between iris structure and colour and organ systems. Ophthalmologic examination is a medical examination of the eye (externally and internally) which gives insight into the cardiovascular and ocular system. The confusion between these two examination/diagnostic systems reduces the value of the question as a reflection of respondents understanding of homeopathy.

Comments on Q.12:

- I am unsure of what a homeopath does;
- A qualified homeopath should be trained as a professional doctor;
- I do not know much about it and will not take its route;
- Homeopathy is good for the body and a good form of health care;
- If I felt there was something seriously wrong I would be nervous to take a chance with a homeopath.

Question 13 Procedures Expected of a Homeopath

To best illustrate the respondents views two graphical depictions were used. Both the graphs for the individual procedures and composite graph for the summary view were shown.

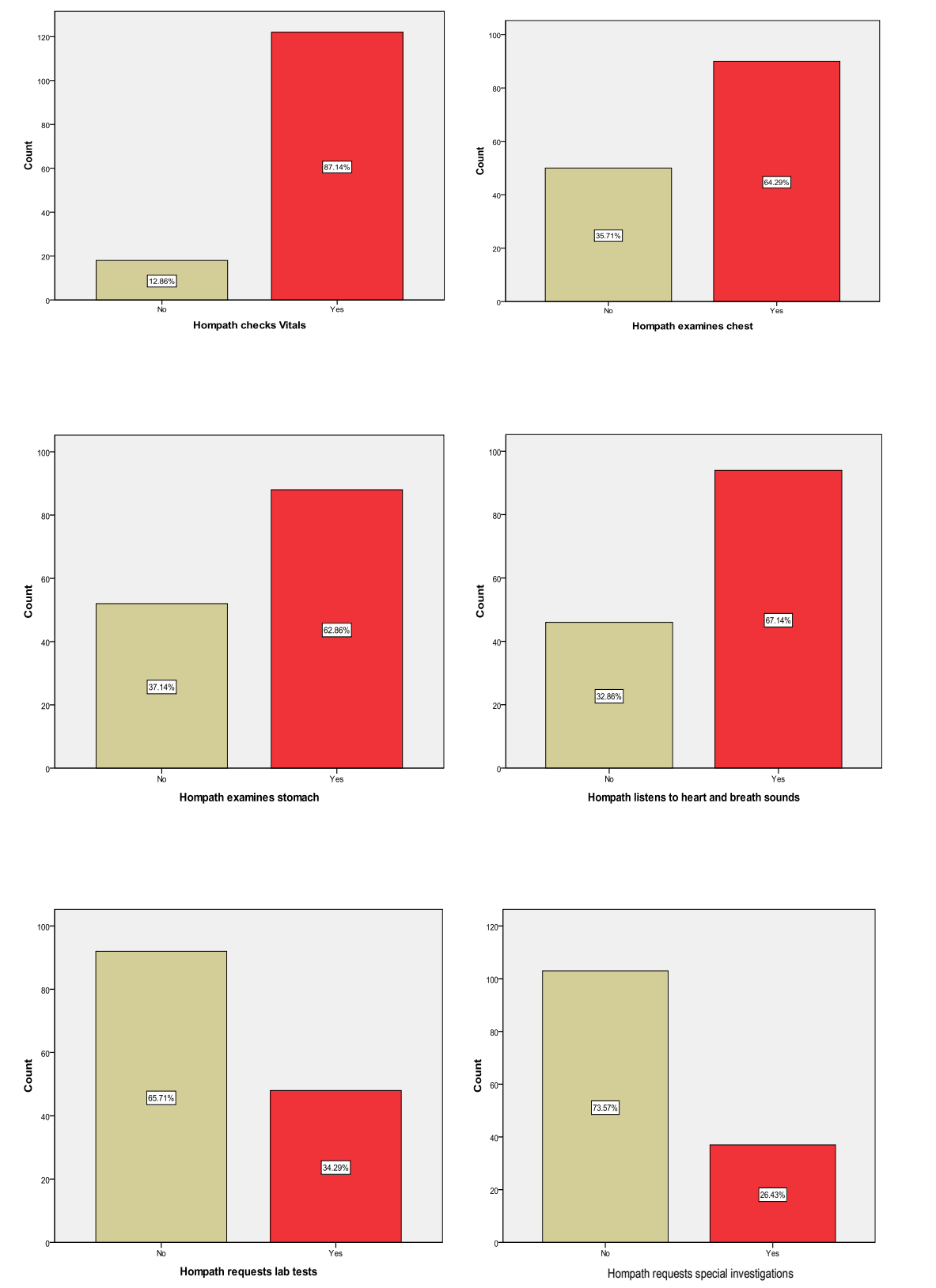
First the graphs for the individual components are presented. In each of these graphs the “correct” answer is presented in a red. This serves to highlight those areas where the impressions of homeopathy are accurate.

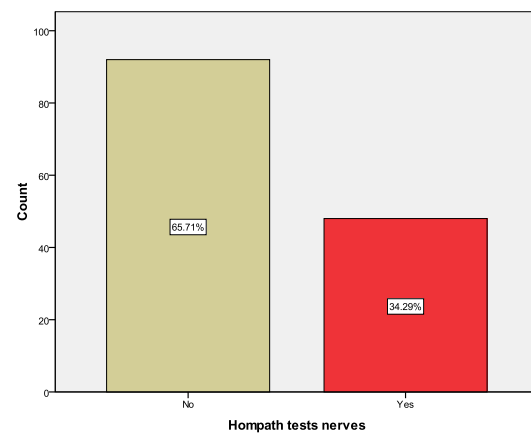
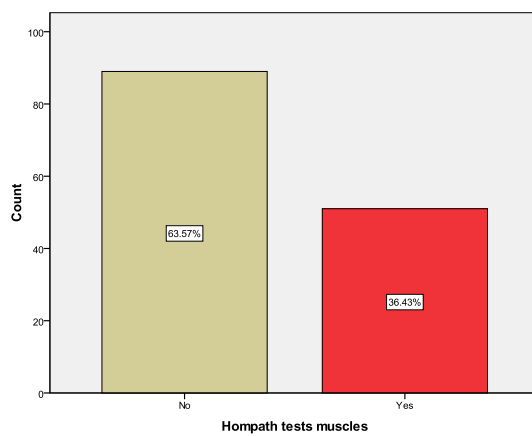
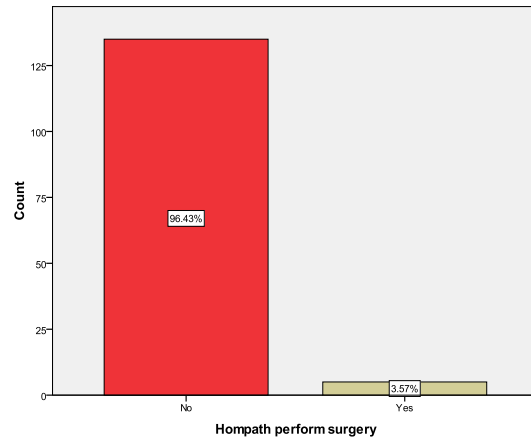
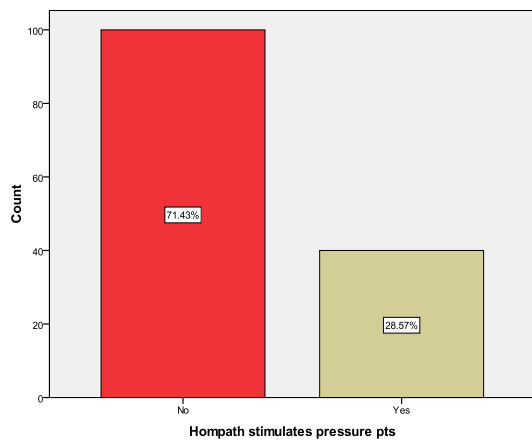
Secondly a summary graph is presented which details the percentage of respondents whose impression of procedures expected was accurate.

Comments on Q.13:

- Homeopath can diagnose health problems;
- Visited a homeopath and I am aware of the procedures;
- Never thought that a homeopath is so specific;
- Psychological questionnaire.

Figure 4.13.1 Graph Showing individual procedure summaries for Question 13.





The questions about lab tests and requesting special investigations were “incorrectly” answered. This perception could be accurately reflecting the difference in practice styles between different homeopaths- some make more use of lab tests and special investigations- rather than the result of the respondents not knowing. This is a similar scenario for “Homeopath tests muscles” and “Homeopath tests nerves”. The questions don’t distinguish between medical muscle and nerve tests e.g. musculoskeletal and neurological examinations and other forms of alternative testing procedures e.g. kinesiology, body talk etc. This is a similar issue to that arising with respect to Iridology/Ophthalmology.

Figure 4.13.2 Graph showing composite graph with procedure summaries for Question 13 (Graph shows percentage of respondents answering Yes to that question)

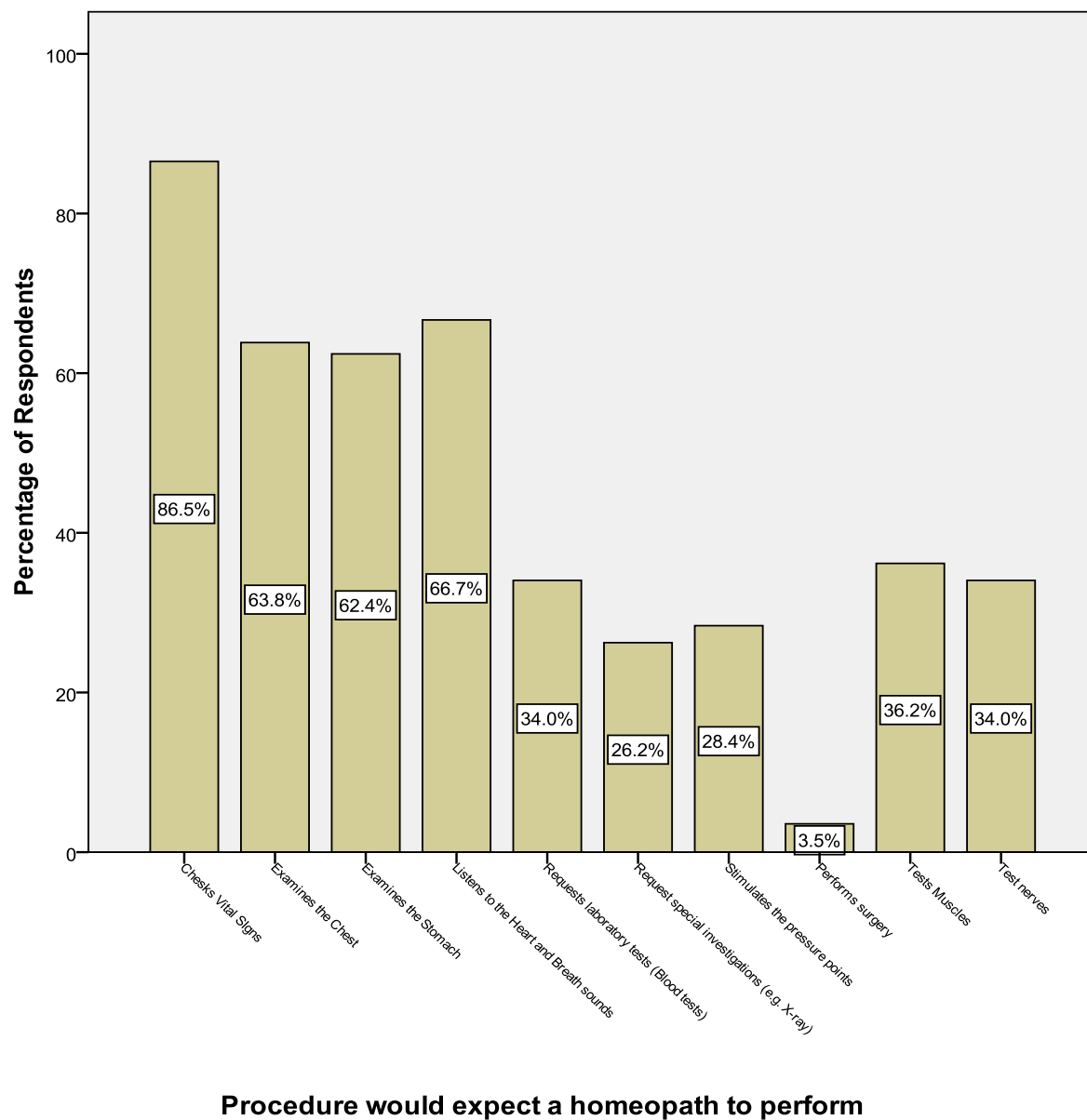
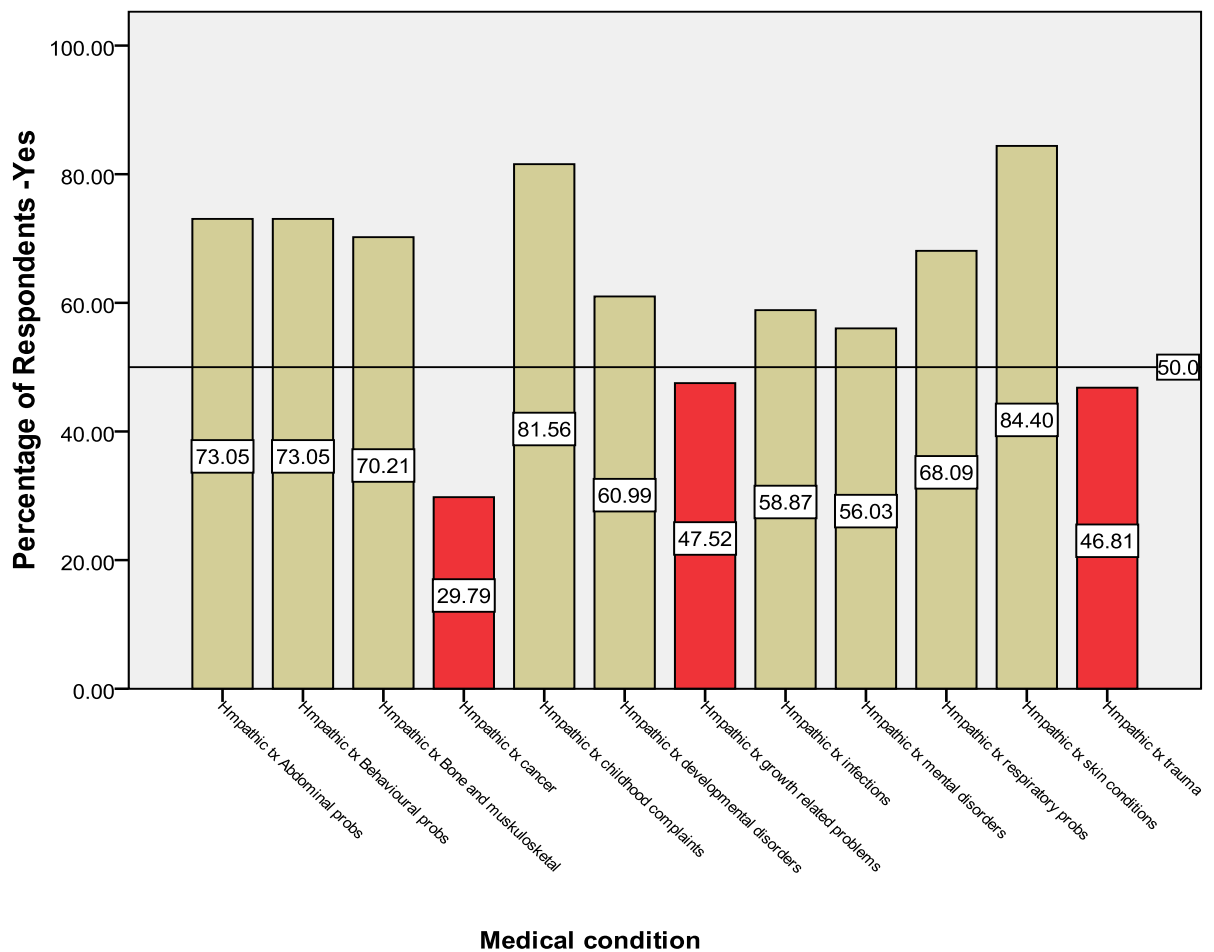


Figure 4.14 Graph showing what disorders respondents would consider using homeopathic treatment for



The reference line is drawn at 50% of respondents (i.e. 50% would consider using homeopathy for the mentioned condition). The graph shows homeopathy would not be considered for the more serious and or physical conditions eg. cancer and trauma. Skin conditions and childhood complaints were two areas where homeopathy would be considered by a majority of respondents.

Comments on Q.14:

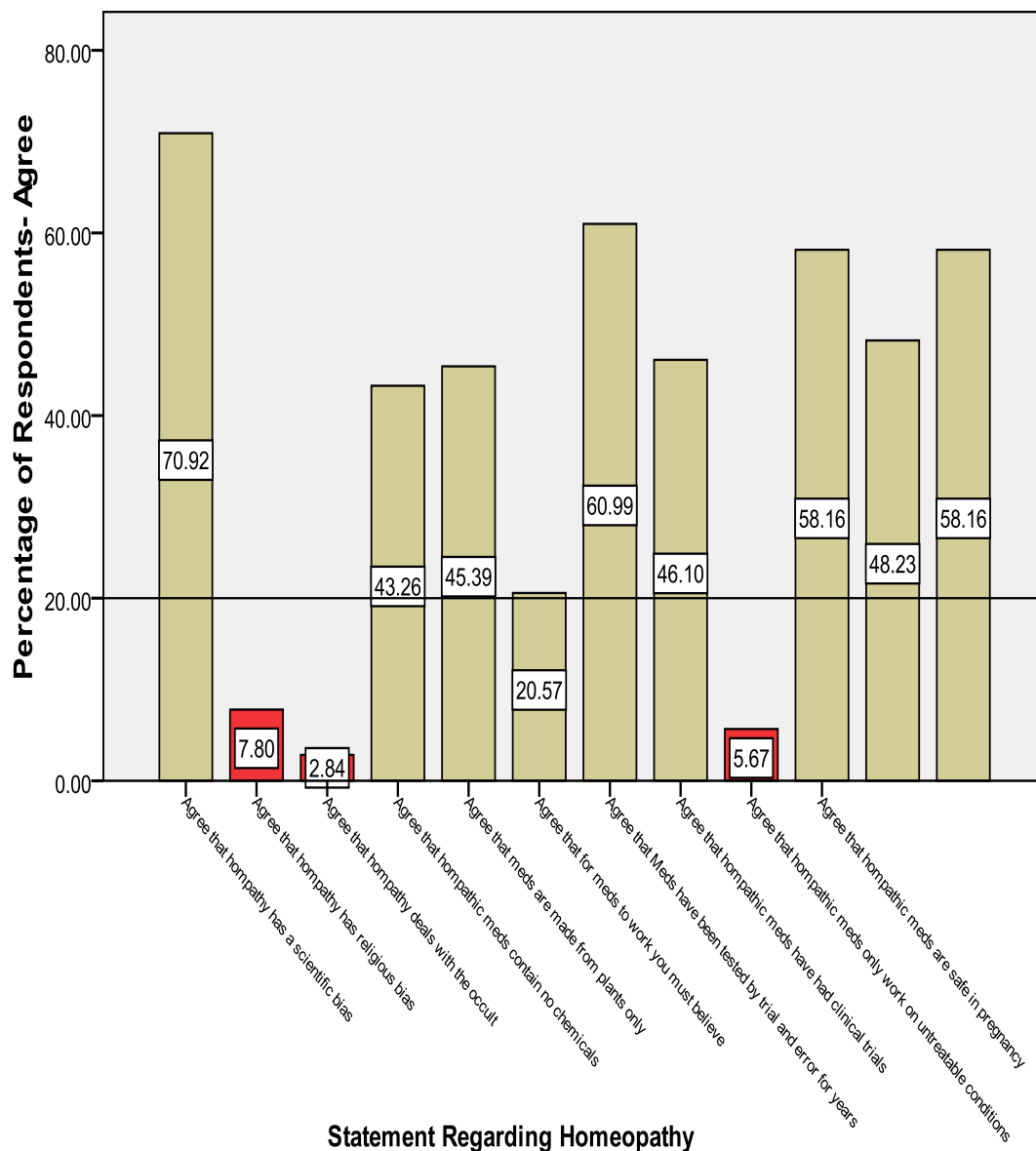
- My first choice would be to go to my paediatrician and I also use homeopathy in conjunction for these symptoms;
- Trying to give a small child powders and drops a couple of times a day became tedious;
- I would go to a homeopath for a second opinion if I don't understand what's wrong with my child;
- Colds and flu are common ailments for my child;
- If the body experiences a condition, the body alone can cure the condition;
- Currently my kids are on homeopathic products for Attention deficit disorder (ADD), concentration;
- My experience is that when children are sick they need immediate attention; homeopathic medicines take a while to start working. A child with fever needs immediate attention;
- Not sure if there are homeopathic treatments for cancer. If there are treatments it would be better to use instead of drugs and chemotherapy.

Question 15 Statements regarding Homeopathy

In this section responses were aggregated into Agree, Disagree, and Not Sure.

These graphs represent the prevailing attitudes towards homeopathy as concept - as opposed to the practice or applicability of homeopathy (previous questions).

Figure 4.15



The above graph 4.15 shows a fair degree of understanding of homeopathy as general concept. Very few respondents agreed that homeopathy has a religious basis (7.8%), deals with the occult (2.8%) or only works with untreatable conditions (5.6%). A more significant (though still minority opinion held that homeopathy requires belief to work (20.6%).

The most significant agreements were that homeopathy has a scientific basis (71%), that the medicines have been tested by trial and error for many years (61%).

Comments on Q.15:

- I think homeopathy has its advantages but it is not a miracle cure;
- I don't know much about diseases;
- I believe in healing but I am very unsure of the source of homeopathy ;
- I use homeopathic medication for all my kids, even the infant who is 5 months.

Figure 4.15.1

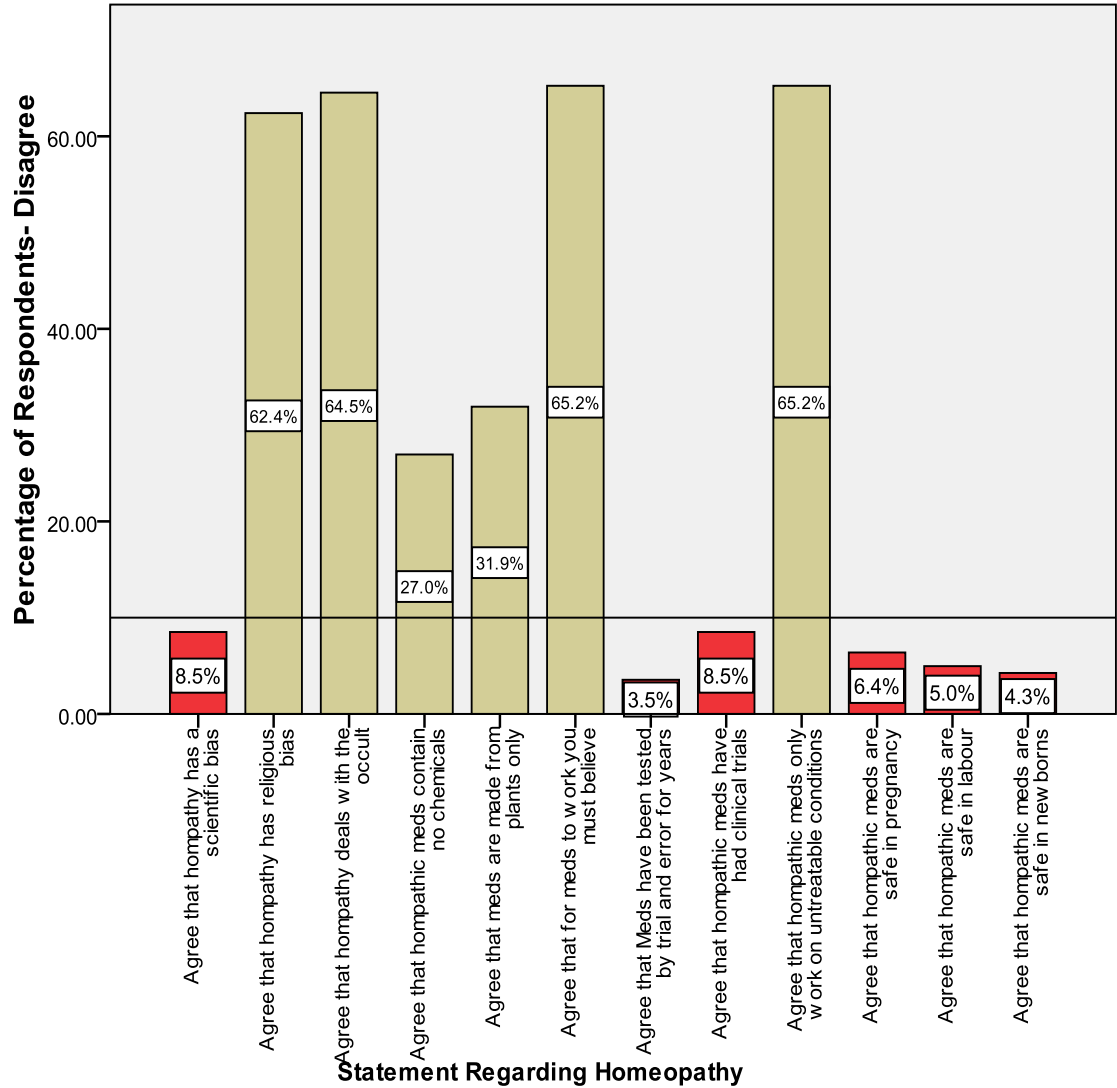
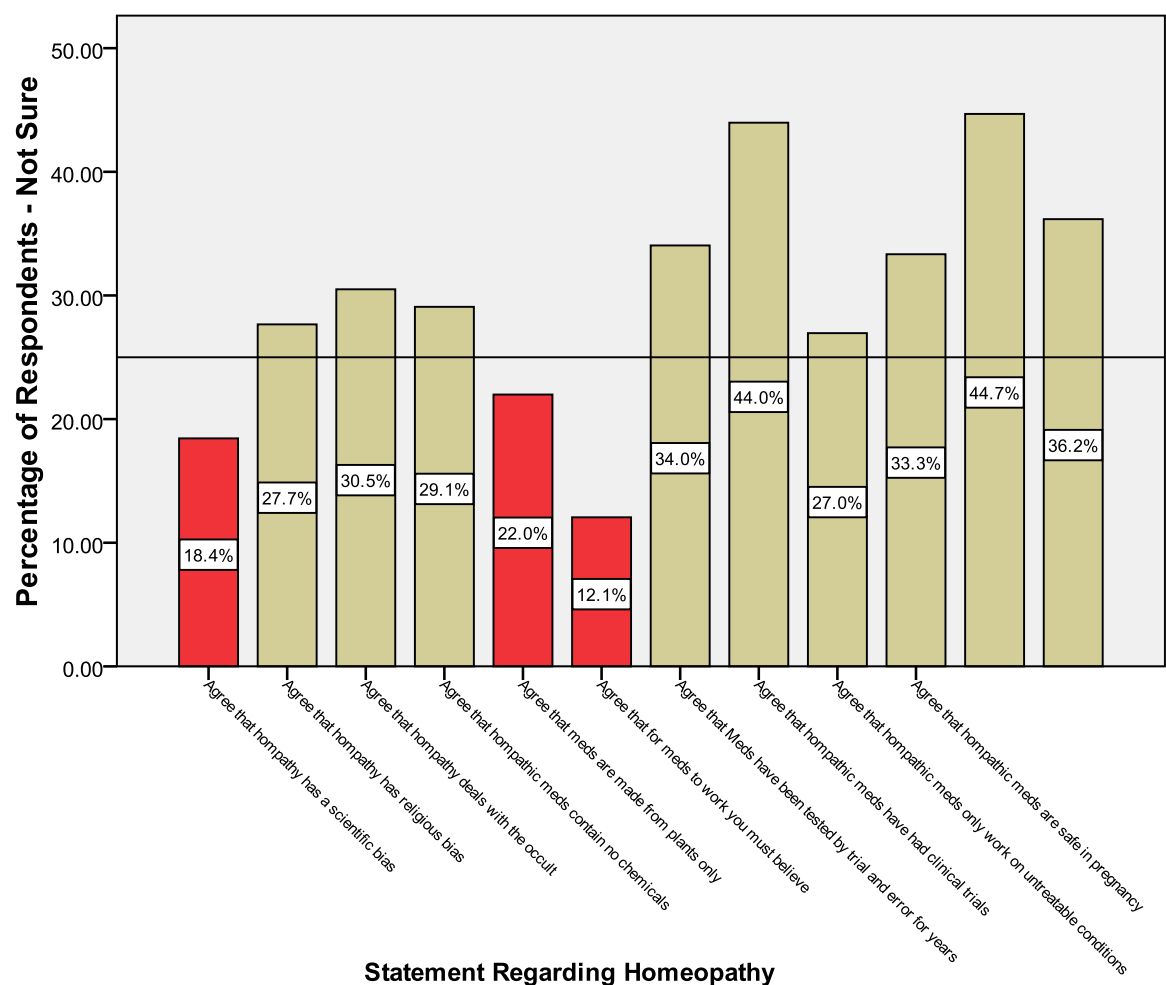


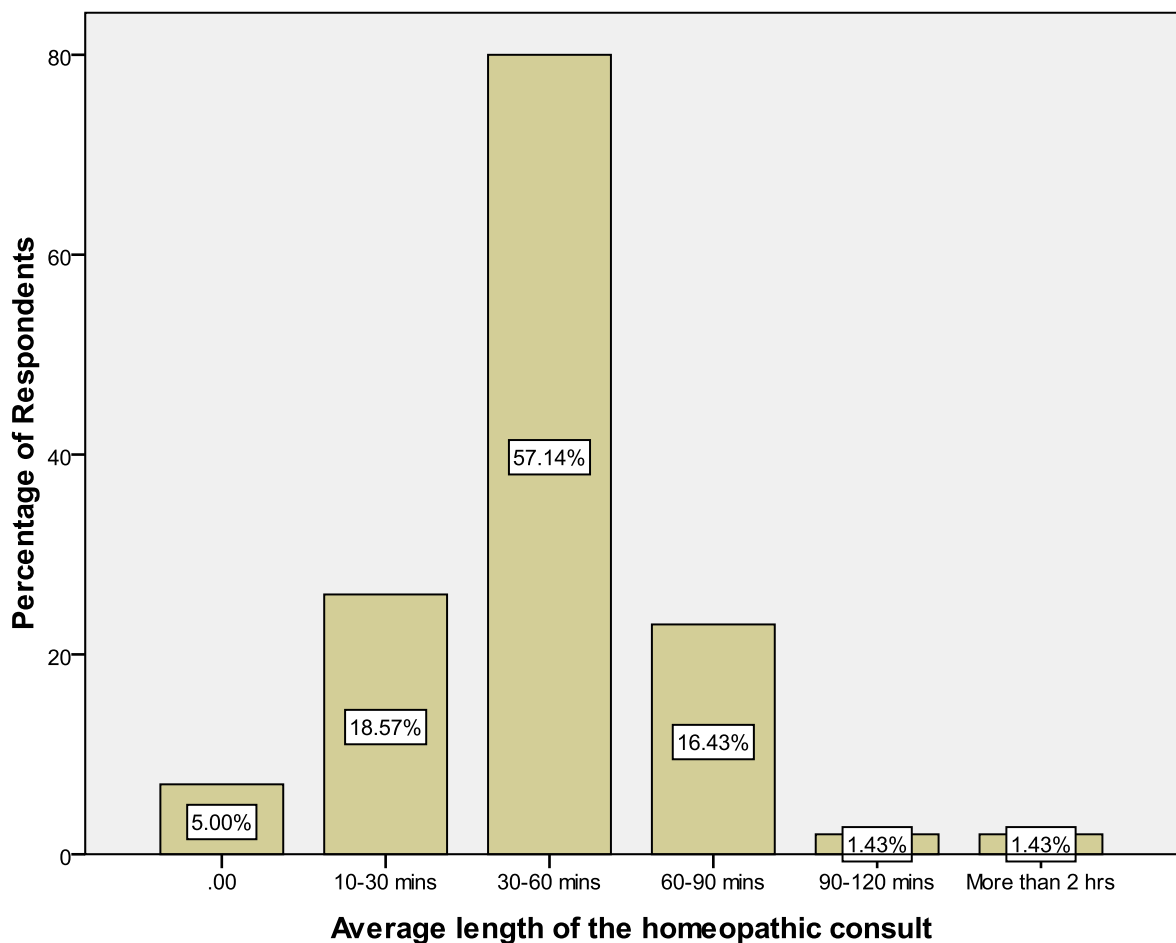
Figure 4.15.2



Question 16 Length of homeopathic consultation

Respondents' views on the length of the homeopathic consultation were presented in Figure 4.16 below.

Figure 4.16 Graph showing respondents perceptions of the average length of the Homeopathic Consultation



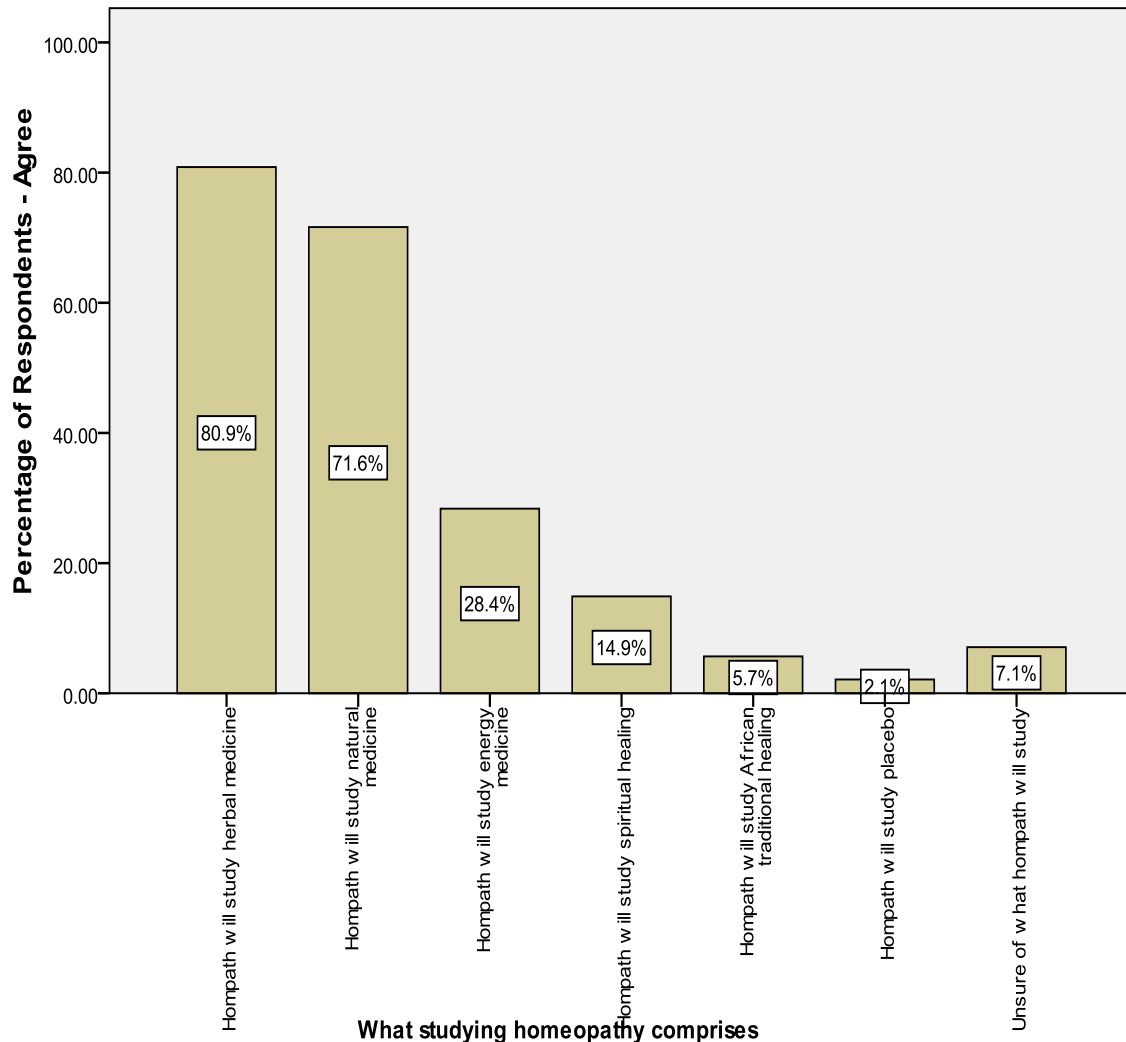
The responses to Question 16 illustrate a classical normal distribution around 30-60 minutes. This accurately reflects the varieties of different ways of practicing homeopathy from clinical (short consultations, more medically oriented) to classical (long consultations following pure homeopathic principles).

Comments on Q.16:

- Depends if it is the first consultation or not. First consult is normally longer;
- Takes long because it deals with the patient as a whole;
- Depends on the homeopath and their form of treatment.

Question 17 Knowledge of what subjects a homeopath will study

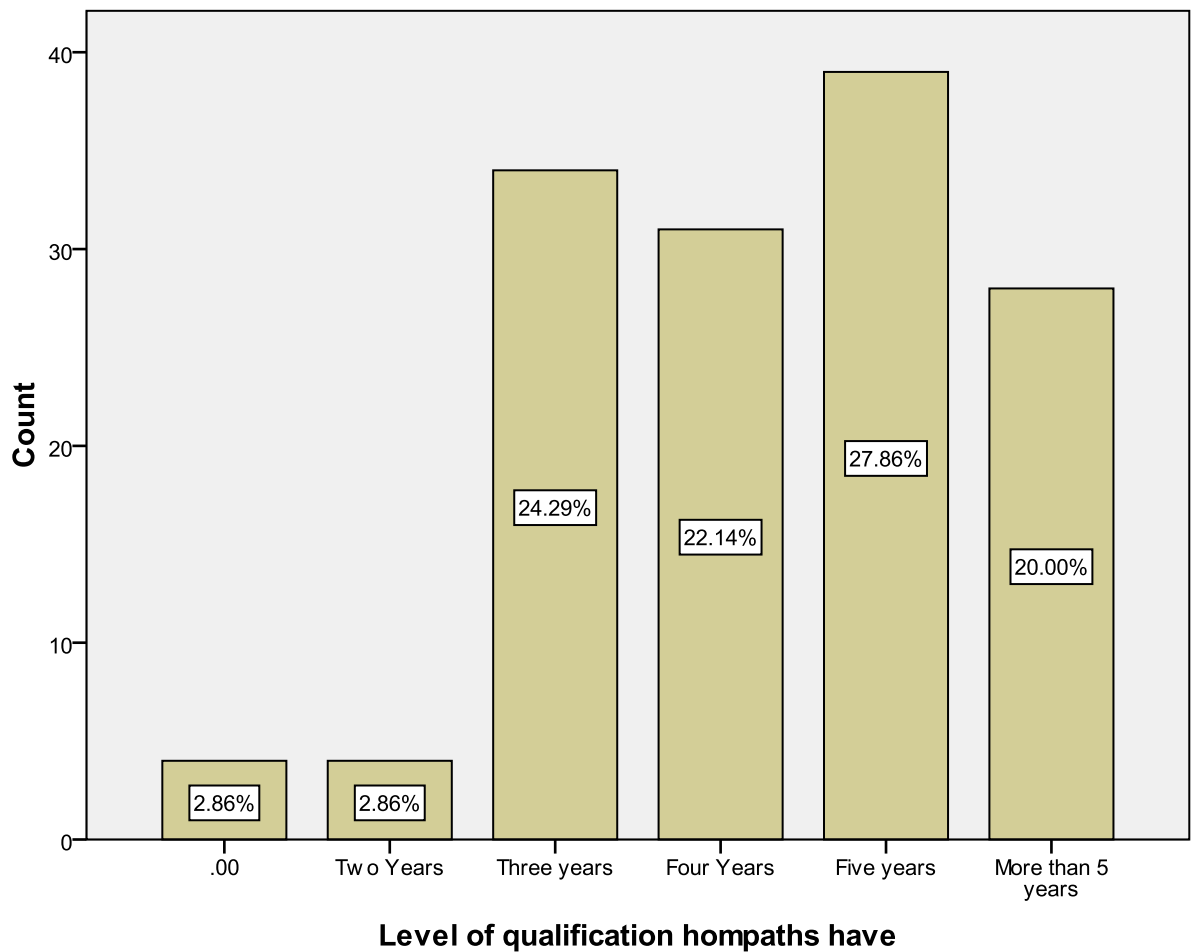
Figure 4.17 Graph showing respondents views of what studying homeopathy involves.



The above graph illustrates a strong agreement that homeopaths will study natural medicine and herbal medicine. The minority responses about energy medicine (28.4%) and spiritual healing (14.9%) show that there are still a sizeable number of respondents who have an accurate understanding of what a homeopath studies. Even natural and herbal medicines are not accurate in a strict sense. These components are small adjuncts to classical homeopathic study.

Question 18 Opinion of level of education

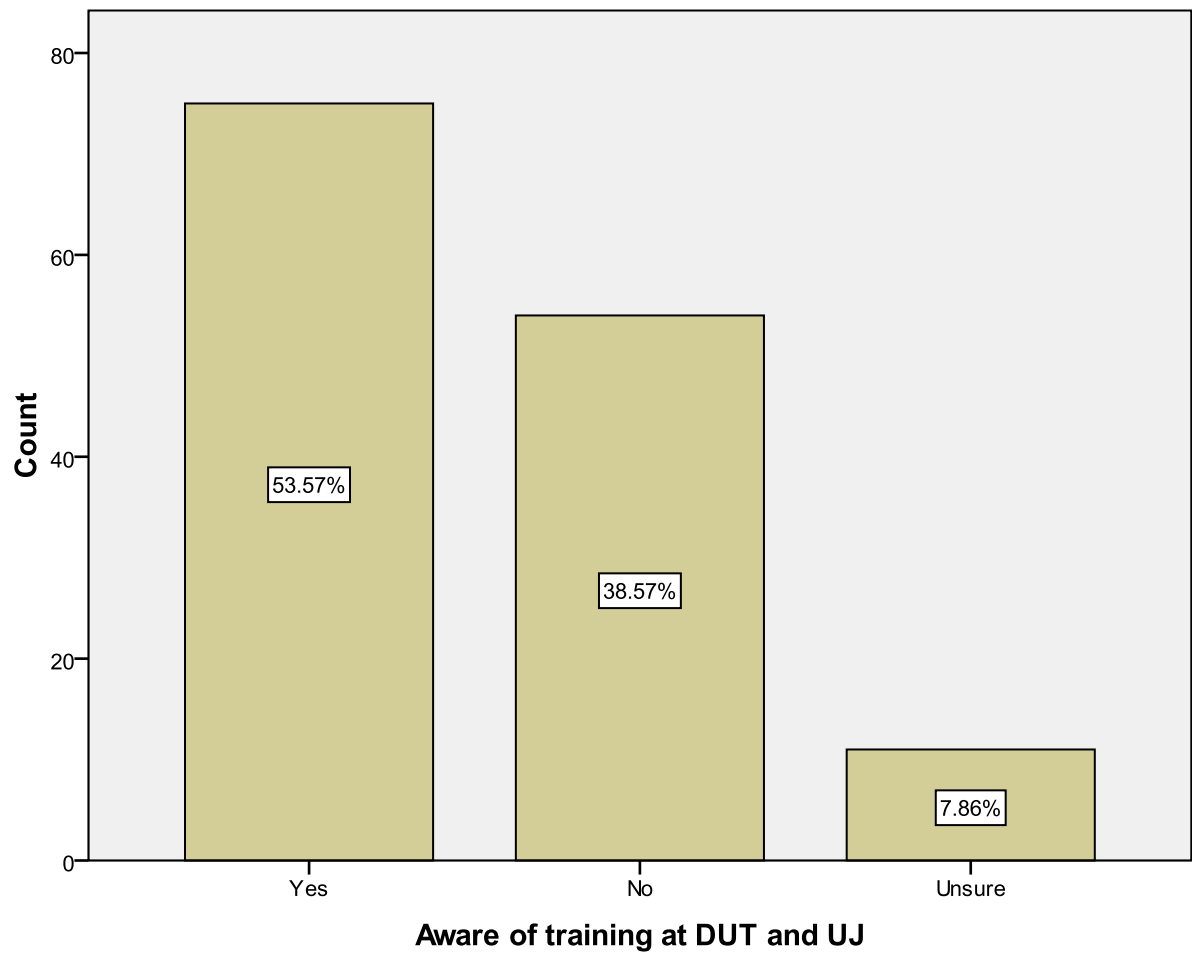
The responses to question 18 were presented in Figure 4.18 below.



Again there appears to be confusion around the level of qualification homeopaths carry. Only 20% were accurate in terms of having more than 5 years of training. Almost 28% replied 5 years. This could be seen to be partially correct as the training is a 5 year academic qualification.

Question 19 Awareness of training programs in South Africa

The responses to question 19 were presented in Figure 4.19 below.



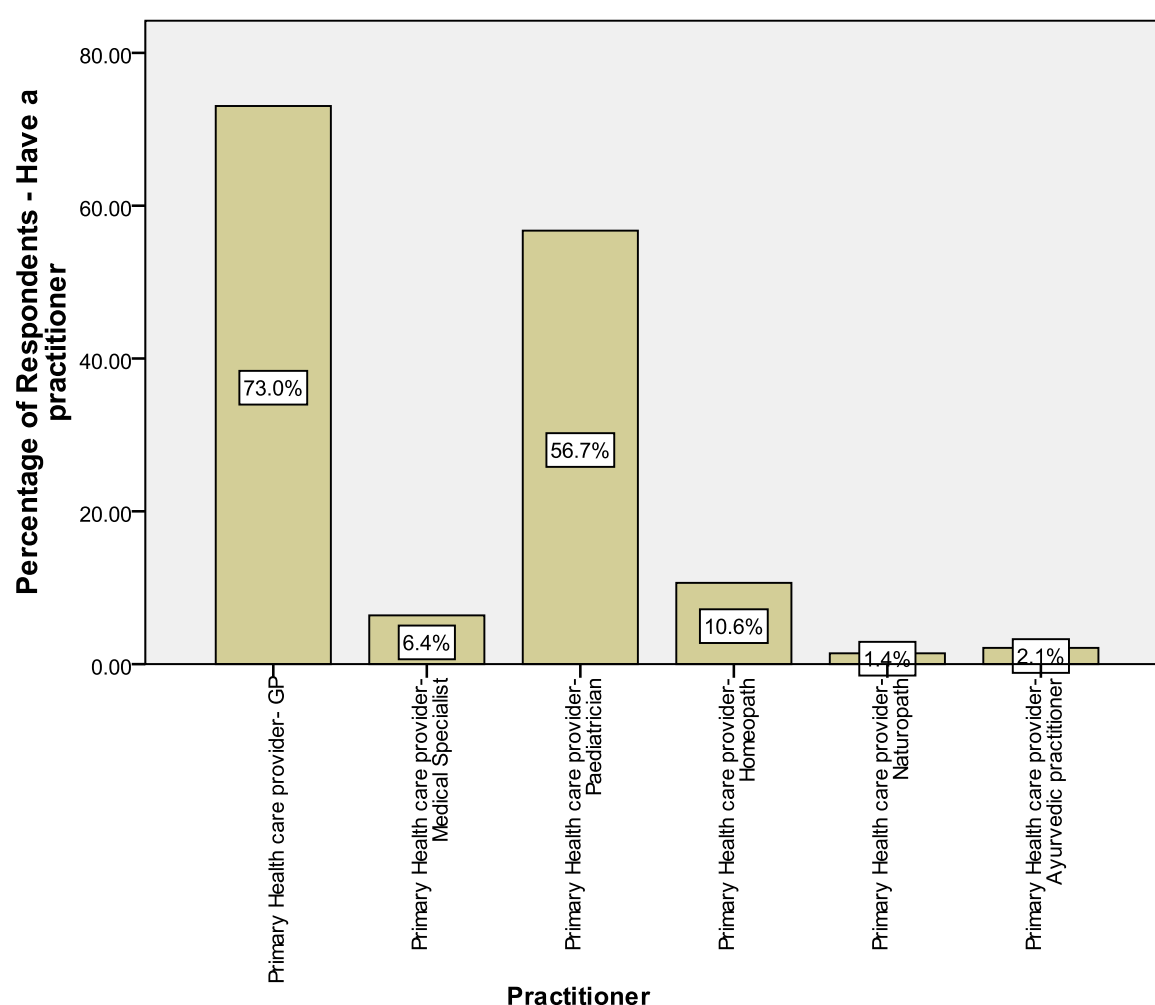
Only 53.6% of respondents were aware of the training programs at DUT and UJ.

4.4.3 Part 3: Experiences with healthcare provision (Questions 20-32)

The data used for the following analyses were derived from Section 3 of the completed questionnaires. In terms of Objective 3 in the introduction, the respondents' experience of healthcare provision was described.

Question 20 Primary Healthcare provider of child

The responses to question 20 were presented in Figure 4.20 below.



Most of the respondents have a GP (73%) and/or paediatrician (56.7%) as their child's' primary healthcare practitioner, only 10.6% have a homeopath as a

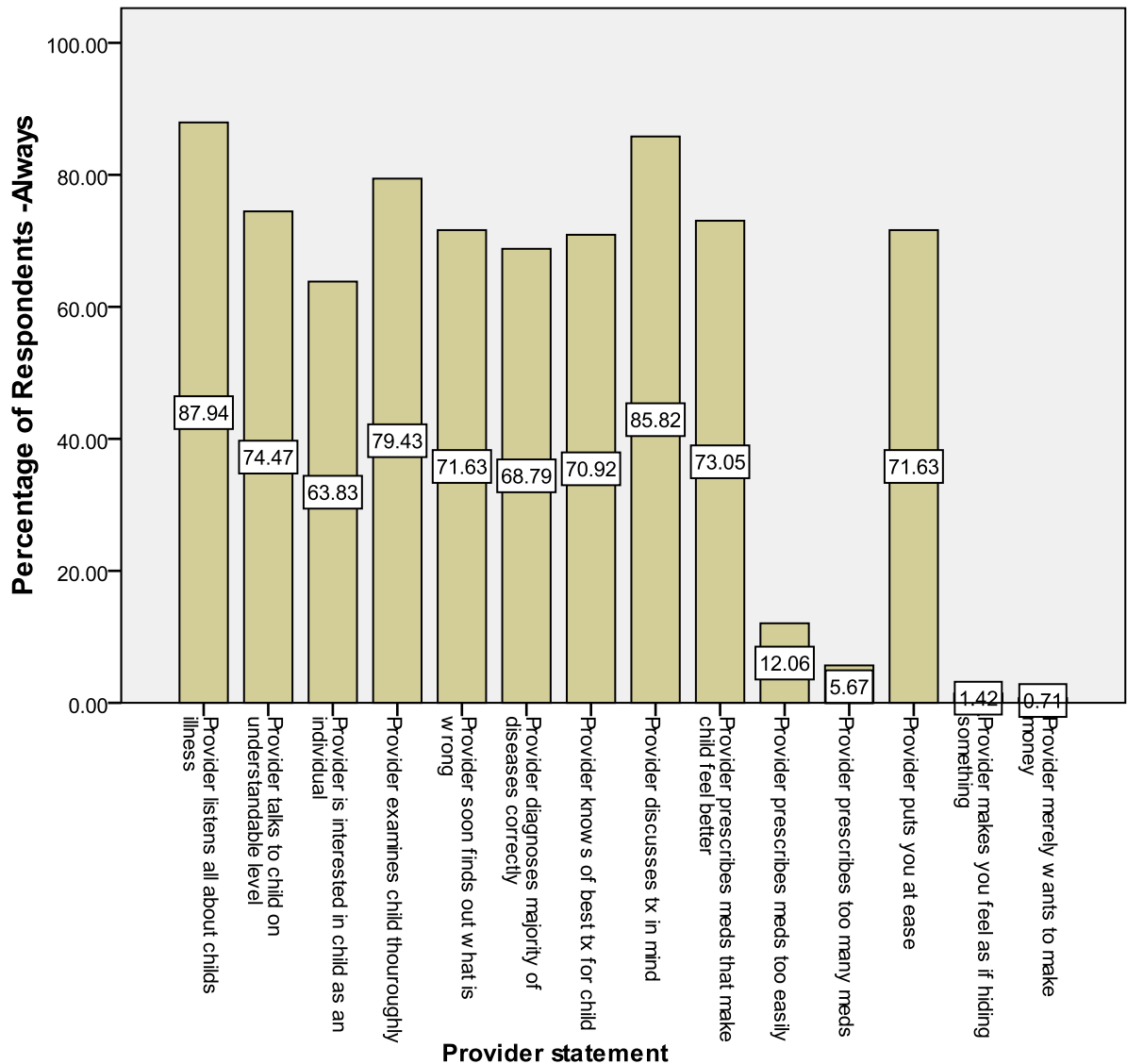
practitioner. This is a relatively high level in absolute terms when compared to an overall level. This is probably ascribable to the demographics and geographical location of the sample.

Comments on Q.20:

- My child has been healthy and I pray on a daily basis for good health;
- I visit an ENT specialist who covers most of the ailments for my child.

Question 21 Opinions of Childcare provider

The responses to question 21 were presented in Figure 4.21 below.



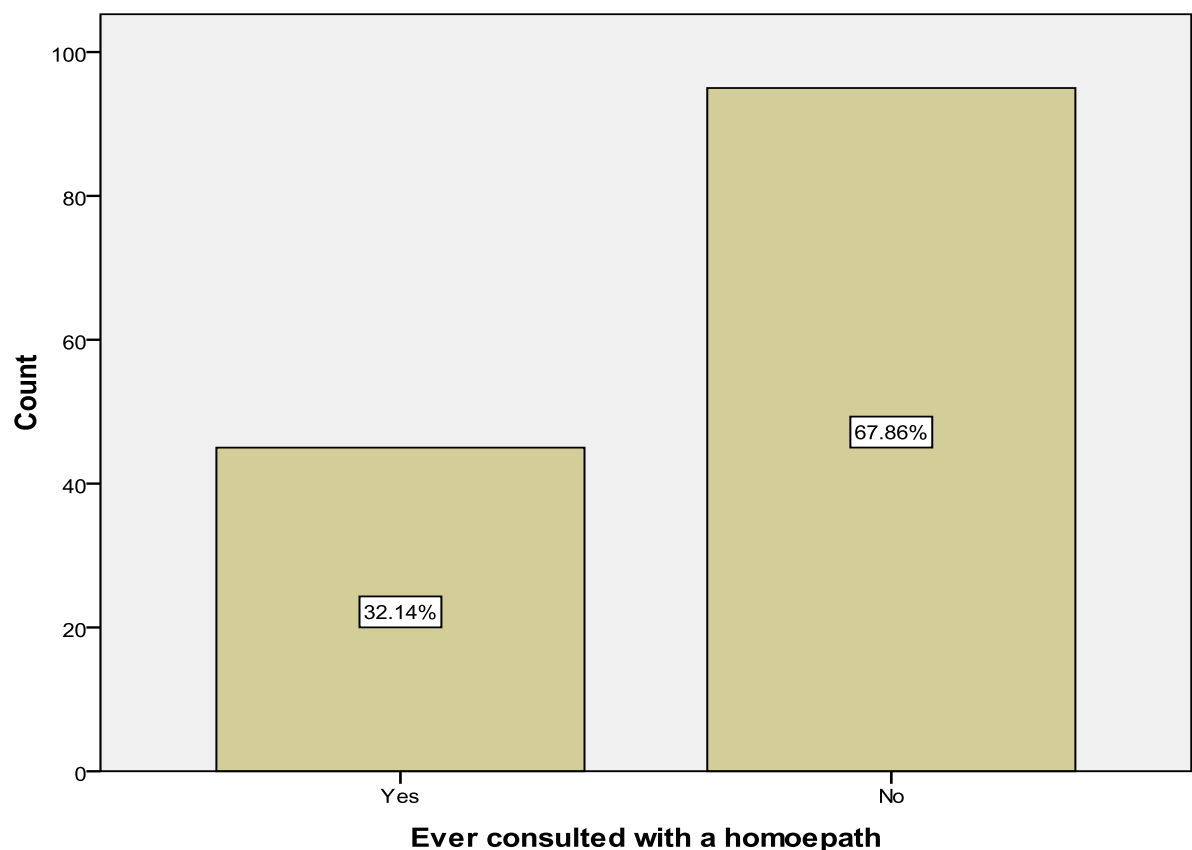
The majority of statements regarding the provider care were positive- only 12% felt that the provider always prescribed medications too easily, while 5.7% felt that the provider always prescribed too many medications. 63% felt that the provider was always interested in their child as an individual.

Comments on Q.21:

- I am happy with my doctor and never had to deal with a serious illness;
- I feel like my GP sometimes wastes my time, my paediatrician listens carefully and my homeopath usually helps but the consultation takes too long;
- He examines according to the symptoms I have explained.

Question 22 Prior experience with homoeopathy

The responses to question 22 were presented in Figure 4.22 below.



The majority (67.9%) of the respondents had never consulted with a homeopath before.

Comments on Q.22:

If no, why?

- No reason to and I don't know any practitioners in the Durban area;
- Not too familiar with homeopathy;
- Never had a consultation but we have taken homeopathic prophylactics;
- Never gave it thought (5 respondents);
- Ignorance and proximity to one;
- We did not want to go that route;
- Always consults a GP, have never been to a homeopath and I don't know any homeopaths (2 respondents);
- Due to traditional and religious belief;
- I didn't think it was necessary;
- Easier for me to go to the GP at a public hospital;
- I don't know enough about homeopathy;
- Homeopathy not covered by my medical aid (2 respondents);
- I only consult my paediatrician for routine immunizations, other ailments I treat myself;
- Never been to a homeopath. Always consult with a paediatrician;
- This is the first time I heard of homeopathy (2 respondents);
- Did not have reason to (5 respondents);
- No recommended or known homeopaths close to where I live so the GP is convenient for me to see;
- Against my beliefs;
- Haven't really been interested;
- Very healthy child;

- I don't know any homeopaths (2 respondents);
- Unsure if they can diagnose medical problems;
- None in close proximity to my work or living area;
- Have never been referred to one or not aware of any family or friends visiting a homeopath;
- Didn't think of it. Wouldn't know where to find one. Homeopaths keep a very low profile;
- No clue what a homeopath does;
- Never needed it (4 respondents);
- GP did not recommend or refer to a homeopath;
- Not well informed about it;
- Never had the need to but my doctor does refer to homeopaths when necessary;
- My children are normally healthy, I visit the doctor as a last resort;
- Been happy with my doctor generally and my kids are healthy;
- I haven't heard of any good homeopaths;
- I am ignorant of what a homeopath offers (2 respondents);
- Always visit a paediatrician;
- Lack of evidence for efficacy;
- Have always felt that a medical doctor is better qualified and better to go to;
- I have more faith in conventional medicine;

If yes, why?

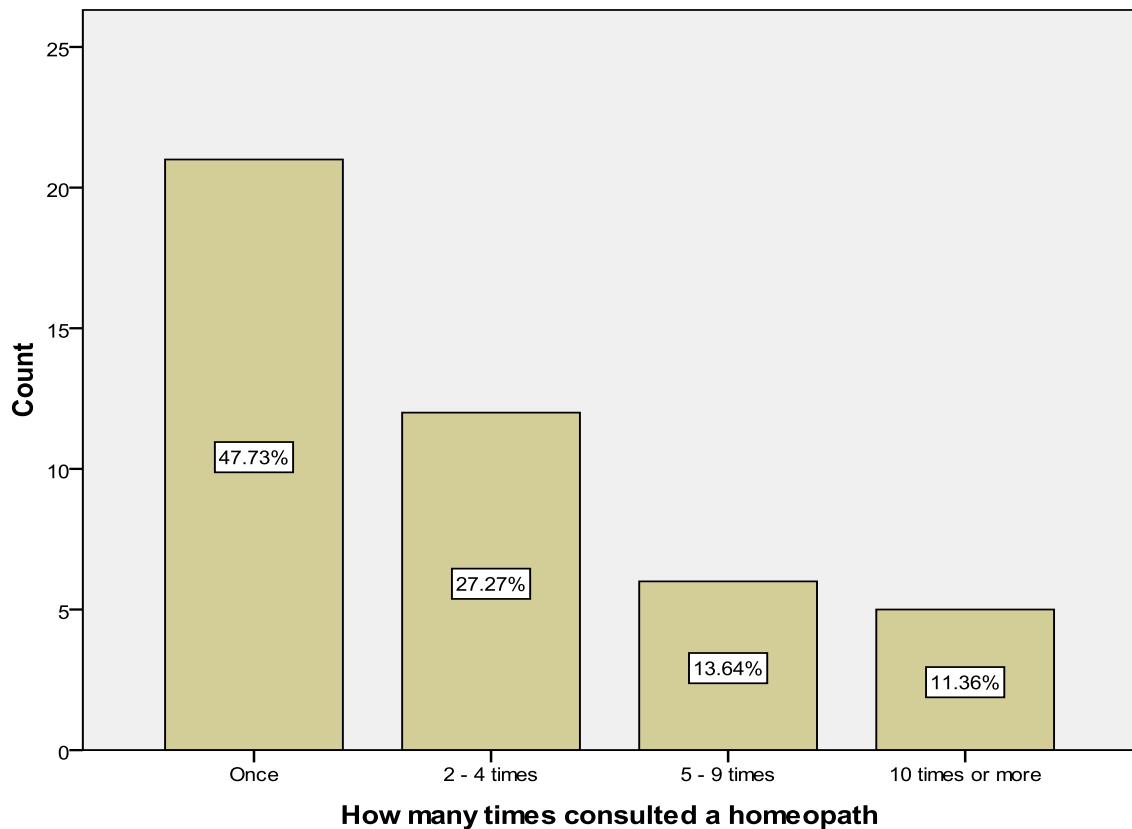
- Family pressure and eczema not resolving;
- My daughter has epilepsy so I use homeopathy in conjunction to her other medication;
- Homeopathic medicine is natural;
- My child has a skin disorder (atopic skin);
- My child was helped with homeopathy;
- My baby used to cry non stop and was only helped with homeopathy;
- For all ailments I take my child to a homeopath at the DUT clinic;
- For fever and retinitis;
- Asthma, he did not like the powders so it never got a chance to work;
- I study at DUT so I often take my child to the Day Clinic when he is unwell;
- Too many side effects of allopathic medication and I confirm diagnosis and treatment with my homeopath;
- I use conventional medicine as a last resort;
- I saw success in my health issues and thought a different opinion will also help my child, and it has;
- I was not getting the desired results from my GP;
- A rash that was not healing;
- I believe in alternative medicine;
- My daughter was hospitalized and on antibiotics. I thereafter switched to homeopathic remedies;
- Skin disorder not responsive to conventional medicine;
- For a rash and the GP's medicines didn't help;

- Homeopathy is natural and I always use homeopathic medicines;
- I had complications during my pregnancy so I went to a homeopath.

Question 23 – 25 Have Consulted a Homeopath before

The responses to question 23 – 25 were presented in Figures 4.23 to 4.25 below

Figure 4.23



Of those who had consulted a homeopath almost 50% had only consulted once.

Only 11.4% could be seen to be committed to homeopathy (consulted 10 or more times) as a form of healthcare (as opposed to another alternative to try

occasionally). Useful information would be an appraisal of the care received by the homeopath. This would help to elucidate the success of the treatment e.g.

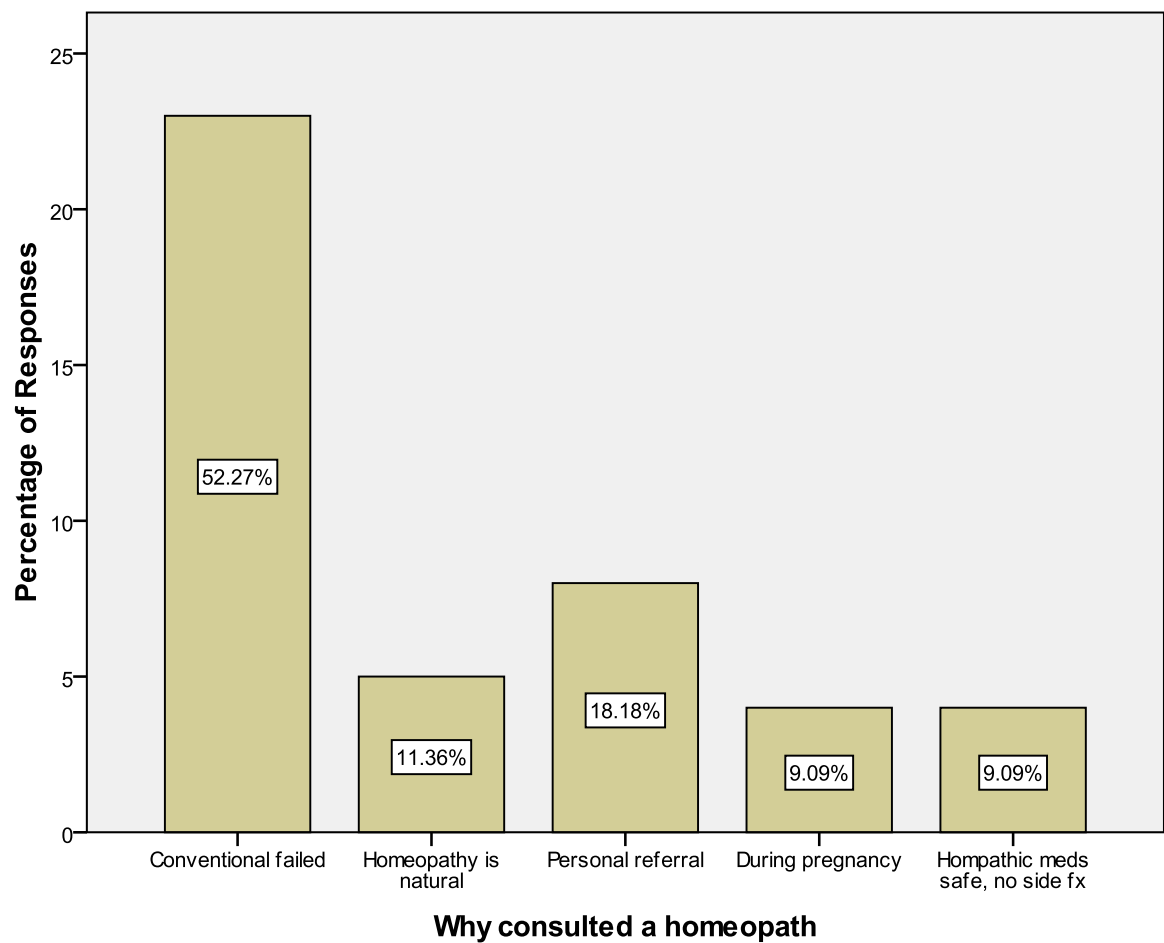
respondents could have only consulted a few times because they did not find any

benefit to the treatment, or they could have successfully resolved the complaint and therefore not needed to continue to consult.

Comments on Q.23:

- I use homeopathy for my 1 year old baby.

Figure 4.24

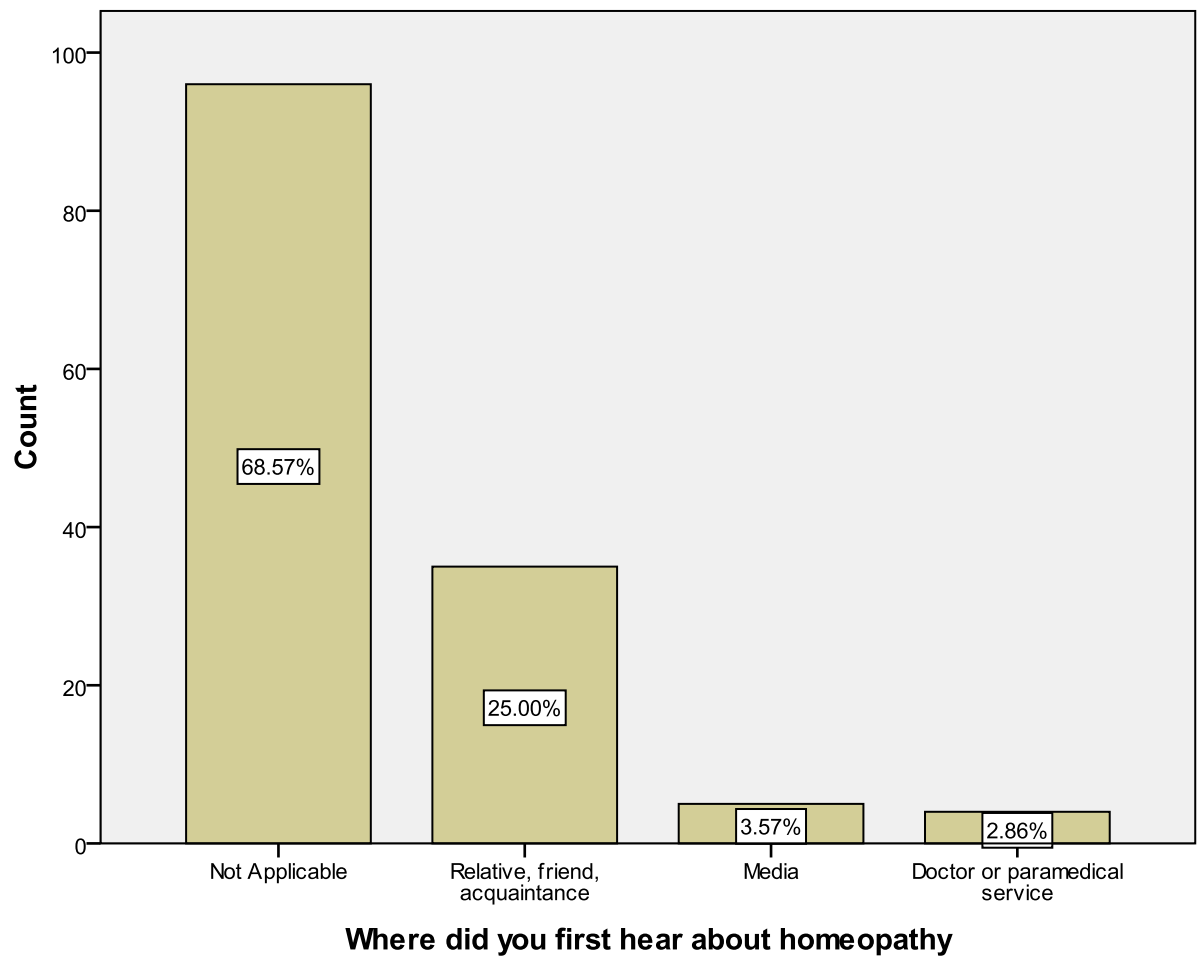


The majority of respondents consulted a homeopath because of a failure of conventional treatment. This would make the previous point (discussion of previous graph) more important. If conventional treatment failure is a key reason to turn to homeopathy, what was the result of homeopathic treatment?

Comments on Q.24:

- I am also a patient of a homeopath;
- My doctor wanted to use steroids;
- When I gave birth homeopathic remedies helped make my delivery quicker.

Figure 4.25

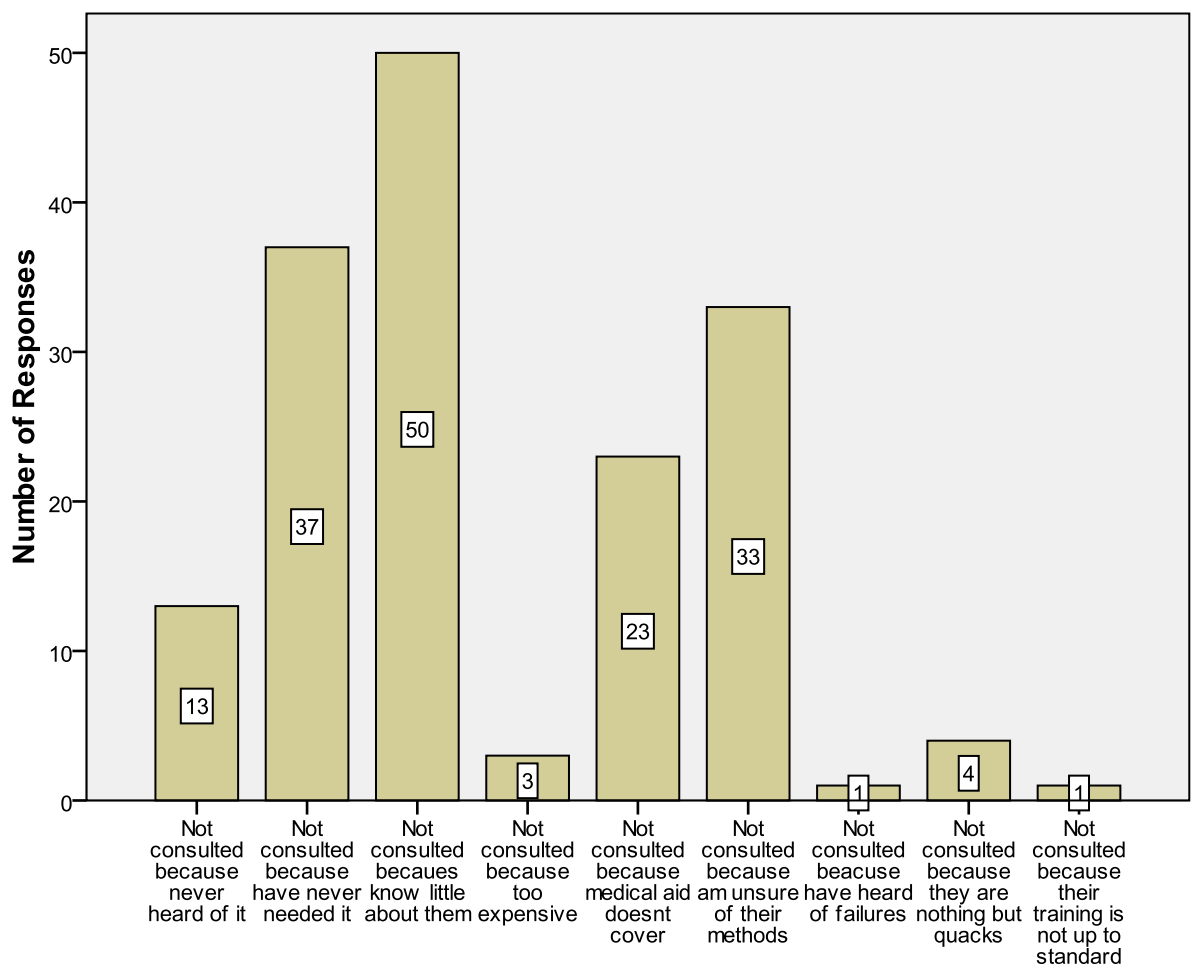


Of the respondents who had consulted a homeopath nearly 70% had never heard of it. The major source of information about homeopathy was a relative friend or acquaintance. This illustrates the relatively low level of awareness of the existence of homeopathy.

Question 26 – 27 Have never Consulted a Homeopath before

The responses to question 26 – 27 were presented in Figures 4.26 to 4.27 below

Figure 4.26 Graph showing incorporation of homeopathic module into the medical training

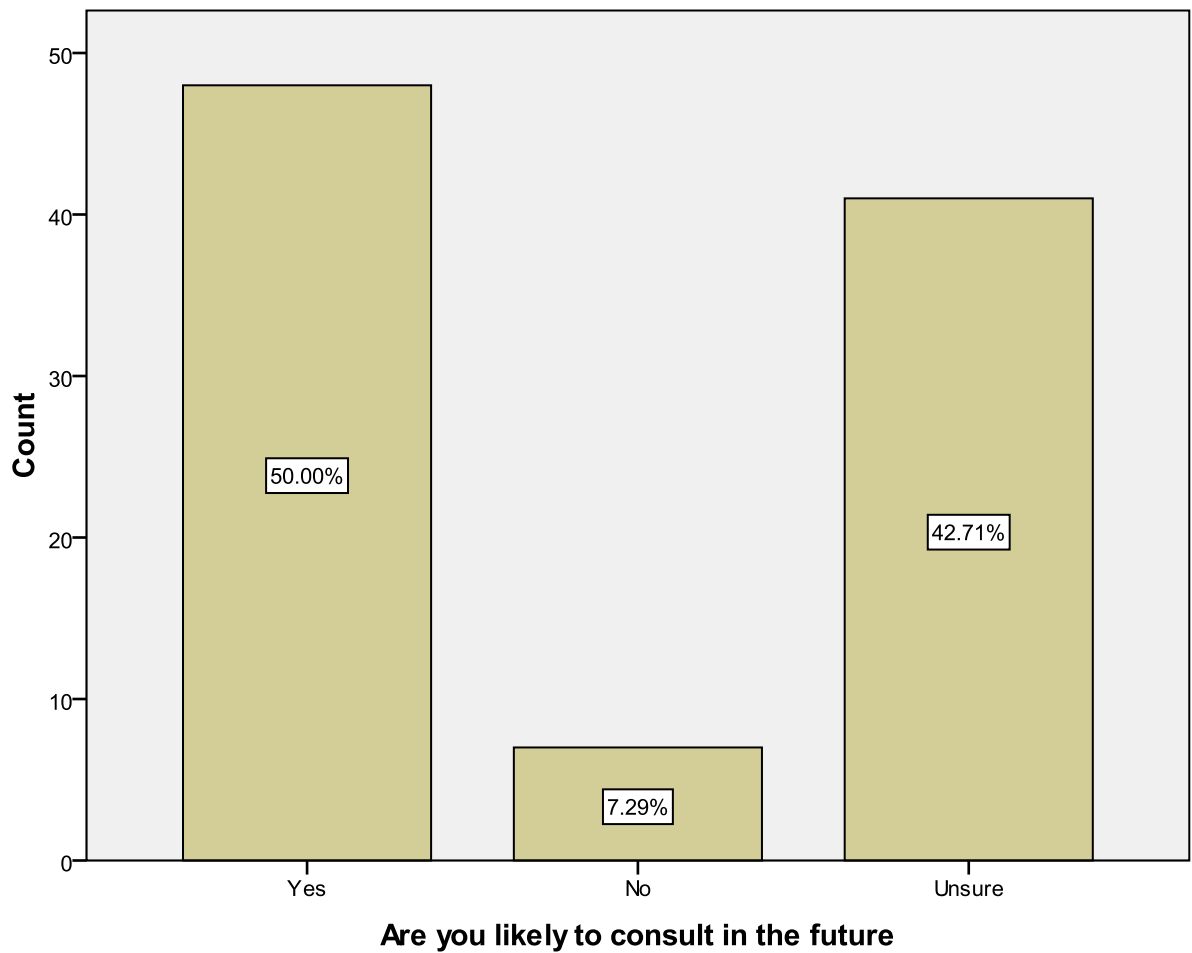


The major reasons for not having consulted a homeopath seem to be clustered around reasons of Ignorance (Never heard of it, Know little about them, never needed it, Unsure of their methods), and Economics (Medical aid doesn't cover it).

Comments on Q.26:

- I am against alternative medicine;
- I usually use my own method of treatment and if that fails, I speak to the doctor at work;
- I have just been in the habit of consulting my family GP.

Figure 4.27 Graph showing likelihood of consulting a homeopath in the future

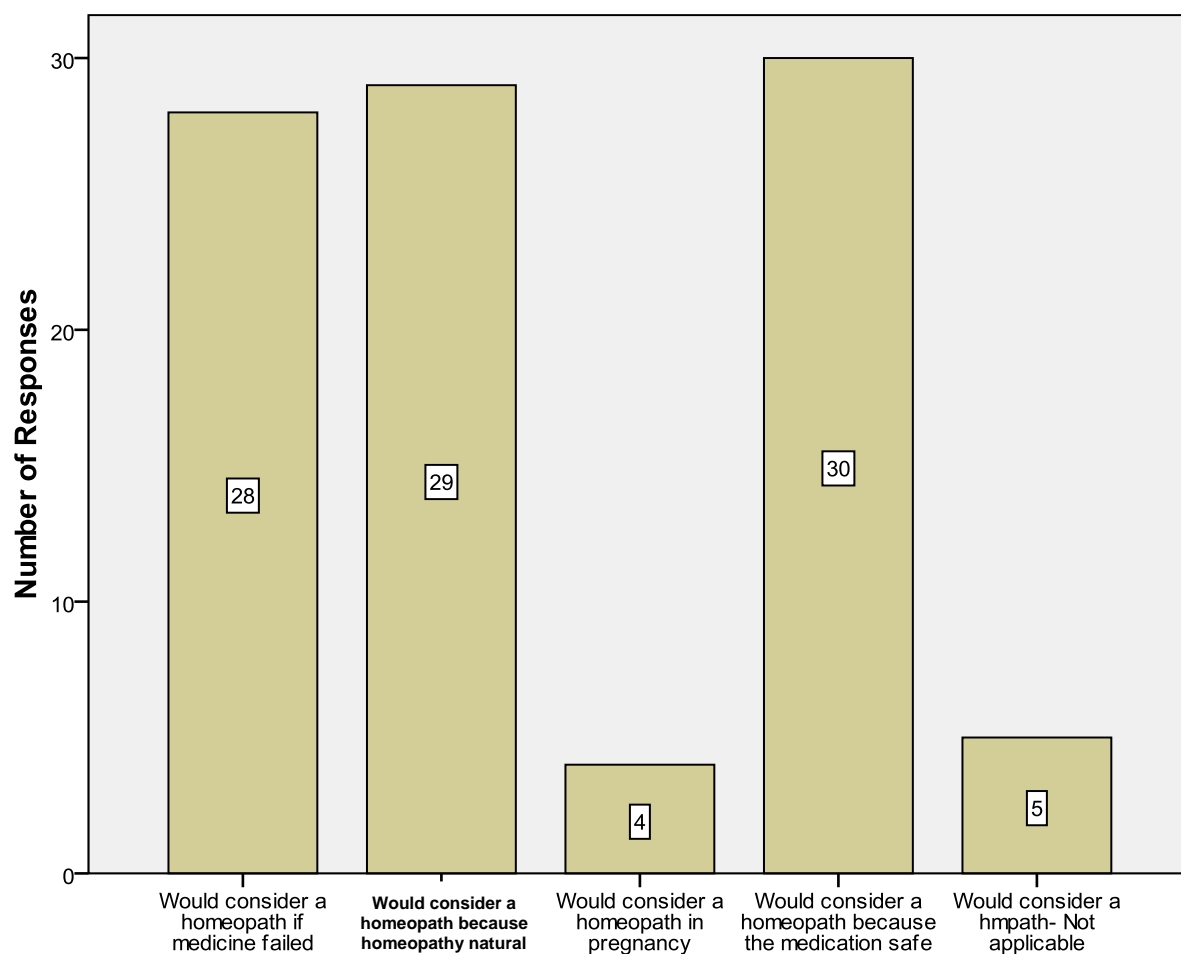


The above graph shows a general split between interest and ignorance/being unsure. Only 7% are not likely to consult a homeopath in the future.

Comments on Q.27:

- I would like to know contact details of homeopaths!
- Life is a journey; you never know what might happen!
- I would be willing to go to a homeopath;
- Depends on the situation.

Figure 4.28



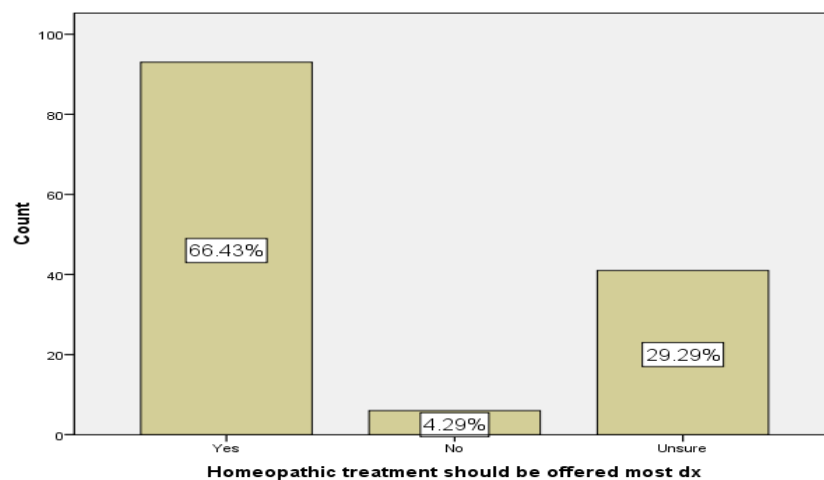
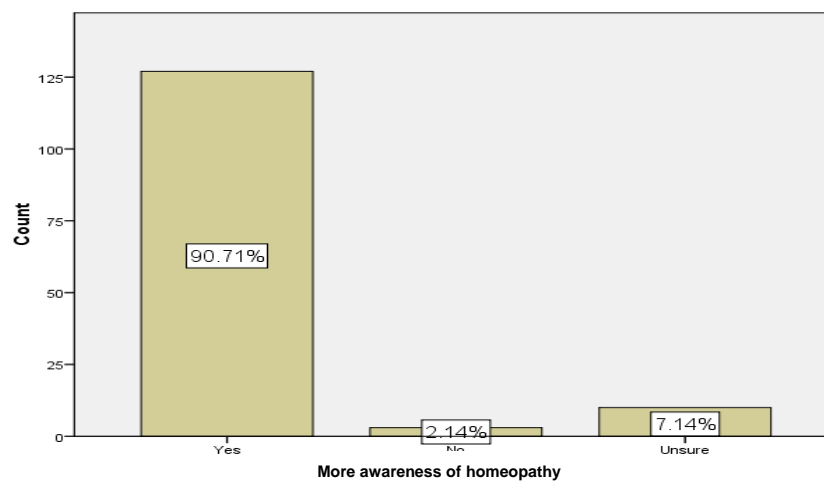
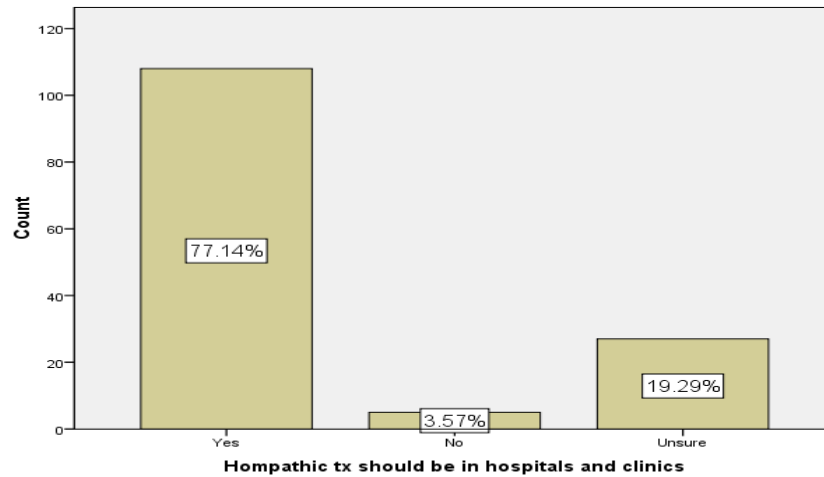
The major reasons for consulting a homeopath are indicative of a movement away from a medical approach rather than towards homeopathy i.e. if medicine failed, homeopathic medications are safe, and homeopathy is natural.

Comments on Q.28:

- I would like to get answers when my children are not well and when conventional medicine fails.

Question 29 – 32 Summary Opinions

The responses to question 29 – 32 were presented in Figures 4.29 and 4.30 below



The overall perceptions of homeopathy are positive. Most respondents feel that homeopathy should be available in hospitals and clinics and should be offered for most diseases. Most feel that there should be more awareness of homeopathy.

Comments on Q.29:

- If there are alternatives to medication and surgery, homeopathy should be considered;
- If it works;
- Sometimes it takes too long to see results, especially if a child is in pain, you need something that works quickly;
- Should be offered as alternative medicine;
- My kids are proof. My baby had a bad cough and homeopathic medicines helped her. She is 5 months and thriving.

Comments on Q.30:

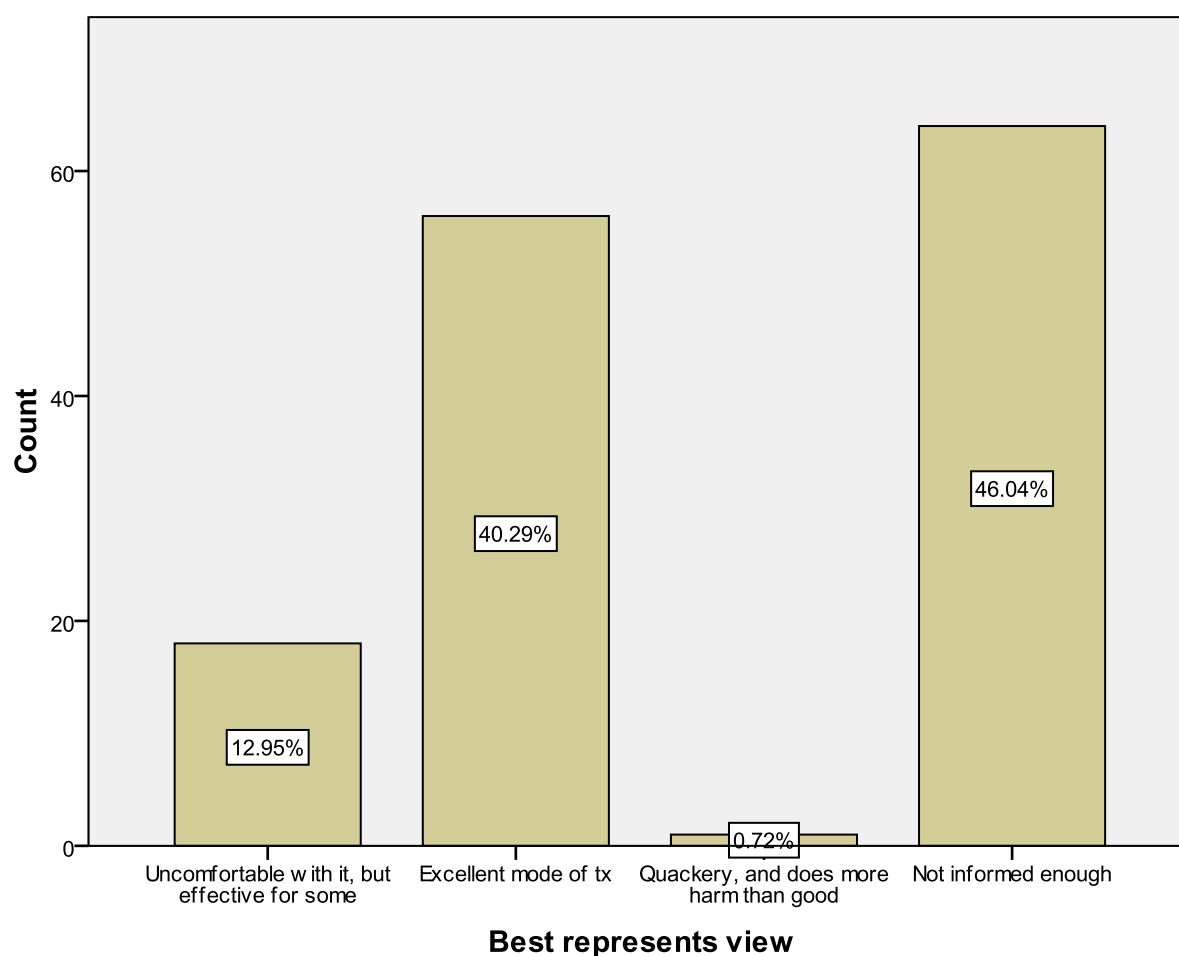
- It is a personal choice;
- If it is at a good rate;
- People would have a better choice of options and would be more informed about homeopathy;
- If conventional medicine fails, it is wise to try other alternatives;
- If homeopathy can help sick people, then why is it not available at hospitals?
- Doctors should give parents options;
- If more effective and cheaper;
- Should be available at all hospitals;
- It is a form of medicine so hospitals should have homeopaths working there ;

- The option should be available but the treatment and medicines should be fully explained to the patient.

Comments on Q.31:

- The practice, research and history of homeopathy must be explained thoroughly so that people can make an informed choice;
- Very little is known about homeopathy;
- Many people are not aware of the benefits of homeopathic medicine;
- So we can understand what homeopathy is about.

Figure 4.30 Graph showing Responses to Question 32- Best reflection of homeopathy



The responses are largely split between excellent mode of treatment - 40.3% and not informed enough - 46%.

A tiny percentage were actively negative towards homeopathy.

Comments on Q.32

- I believe in holistic medicine and it is effective;
- From my own research I think it is a better way of treatment than conventional medicine but I will need much more information;
- I would like to know more about homeopathy;
- I know that homeopathy does work but I believe you open yourself up to other things if you are involved;
- It is a form of treatment that I would choose. It is a safe, good way of treatment but I found the treatments of reoccurring problems such as allergies and hay fever expensive;
- It has its place in medicine and is effective on some patients depending on their ailments;
- Opinions of homeopaths should be considered in all medical practices as legal and professional;
- Excellent mode of treatment in most cases;
- I am not uncomfortable with it and would not consider trying it.

4.5 Correlation analysis

In terms of the objective 3 described in the introduction, the relationship between the demographic variables and the responses given was explored. This was done by hypothesis testing using the Phi Correlation Co-efficient. The level of significance was set at 5% i.e. $p \leq 0.05$.

4.5.1 Hypothesis testing - Demographic variables

4.5.1.1 Personal information (Part 1) against knowledge of homeopathy

(Part 2)

Null hypothesis 1: There was no significant correlation between any of the demographic variables describing the respondents (as described by one of Age, Gender, Ethnic Group, Occupational status and Health status) and their knowledge of homeopathy (as described by any of the questions in Section 2).

Alternative hypothesis 1: There was a significant correlation between one of the demographic variables describing the respondents (as described by one of Age, Gender, Ethnic Group, Occupational status and Health status) and their knowledge of homeopathy (as described by any of the questions in Section 2).

Correlations between Demographic variables (as described by one of Age, Gender, Ethnic Group, Occupational status and Health status) and the following variables/factors were assessed:

- Question 11: Consider homeopathy to be a legitimate form of health care
- Question 12: What a homeopath would do
- Question 13: Expectations about procedures performed by a homeopath
- Question 14: Conditions for which homeopathy would be considered
- Question 15: Statements about homeopathy
- Question 16: Length of average homeopathic consultation
- Question 17: Subjects a homeopath will study
- Question 18: Level of qualification of a homeopathic graduate
- Question 19: Awareness of homeopathic training courses

Significant correlations were established i.e. H_0 was rejected for certain categories.

The significant correlations are shown in Table 4.13.

Table 4.13 Table showing test statistics for correlation of personal information (part 1) and General knowledge of homeopathy (Part 2)

Gender Correlations	Phi Significance	Phi Value	Conclusion
Homeopath boosts immune system	.045	.240	Female Respondents were more likely to respond Yes
Homeopath Uses Iridology/Ophthalmology	.037	.248	Female respondents were more likely to be unsure
Would use homeopathy to treat cancer	.049	.241	Females were more likely to be Unsure as opposed to Negative
Homeopath will study Natural medicine	.048	-.167	Females were more likely to respond Yes
Age Correlations	Phi Significance	Phi Value	Conclusion
Homeopath prescribes plant extracts	.036	.359	Respondents between 25 and 44 were more likely to respond Yes
Homeopath requests lab tests	.011	.283	Younger respondents were more likely to

			respond Yes
Homeopath performs surgery	.000	.381	Younger respondents (18-24) were more likely to respond Yes
Would use Homeopathy to treat Abdominal problems	.010	.350	Younger respondents were more likely to answer No.
Would Use Homeopathy to treat infections	.005	.369	As age increased, respondents were more likely to respond No
Ethnic Group Correlations	Phi Significance	Phi Value	Conclusion
Homeopaths prescribe and dispense own medications	.000	.488	White respondents were more likely to respond Yes
Homeopath will examine the chest	.018	.258	White and Coloured respondents were more likely to answer Yes
Homeopath will listen to heart and breath sounds	.000	.358	White and Coloured respondents were more likely to answer Yes
Would use homeopathy to treat abdominal problems	.001	.417	Black respondents were more likely to be Unsure
Would use homeopathy to treat bone and musculoskeletal conditions	.019	.331	Black respondents were more likely to be Unsure
Would use homeopathy to treat childhood complaints	.015	.337	Black respondents were more likely to be unsure or Negative
Would use homeopathy to treat developmental disorders	.001	.416	Black respondents were more likely to be unsure or Negative
Would use homeopathy to treat infections	.002	.388	Black respondents were more likely to be unsure or Negative
Would use homeopathy to treat mental disorders	.040	.311	Black respondents were more likely to be unsure or Negative
Would use homeopathy to treat respiratory problems	.006	.359	Black respondents were more likely to be unsure or Negative
Would use homeopathy to treat skin conditions	.003	.379	Black respondents were more likely to be unsure or Negative
Would use homeopathy to treat trauma	.011	.356	Black respondents were more likely to be Negative
Agree: Homeopathy has a religious basis	.002	.436	Black respondents were more likely to respond Yes or be Unsure
Agree: Homeopathy deals with	.00	.417	Black respondents

the occult			were less likely to respond No.
Agree: Homeopathic medications contain no chemicals	.005	.364	Black and coloured respondents were less likely to agree
Agree: Homeopathic Medications are made from plants only	.007	.356	Indian respondents were more likely to Agree
Agree: For homeopathy to work you must believe in it	.029	.356	Black respondents were more likely to be unsure or Positive
Agree: Homeopathic medications have been tested by trial and error for years	.011	.344	Black respondents were more likely to be unsure
Agree: Homeopathic medications have had clinical trials	.007	.357	Black respondents were more likely to be unsure or Negative
Agree: Homeopathic medications only work on untreatable conditions	.012	.390	Black respondents were more likely to be unsure or Positive
Agree: Homeopathic medications are safe in pregnancy	.044	.353	Black respondents were more likely to be unsure or Negative
Agree: Homeopathic medications are safe in labour	.017	.381	Black respondents were more likely to be unsure or Negative
Aware of training at DUT and UJ	.007	.355	Black respondents were more likely to be Negative/unsure
Home Language Correlations	Phi Significance	Phi Value	Conclusion
Consider homeopathy a legitimate form of treatment	.013	.400	African language speakers were more likely to be Unsure or Negative
Occupational Status Correlations	Phi Significance	Phi Value	Conclusion
Homeopath stimulates skin with needles	.046	.428	Self employed respondents were more likely to respond Yes
Homeopath prescribes painkillers	.000	.595	Unemployed respondents were more likely to answer Yes
Homeopath prescribes diet	.024	.448	Self employed respondents were more likely to answer No
Homeopathy can treat the majority of diseases	.015	.419	Self employed respondents were more likely to answer No
Would use homeopathy to treat growth related problems	.043	.373	Unemployed respondents were more likely to answer

			No
Agree: Medications are made from plants only	.017	.393	Respondents employed part time were more likely to respond No
Health Status Correlations	Phi Significance	Phi Value	Conclusion
Would use homeopathy to treat infections	.009	.355	Respondents in better health were more likely to be Positive.

4.5.1.2 Hypothesis testing - Demographic Variables

Personal information (Part 1) against Experiences with healthcare provision (Part 3)

Null hypothesis 2: There was no significant correlation between any of the demographic variables describing the respondents (as described by one of Age, Gender, Ethnic Group, Occupational status and Health status) and their experience of child care and perceptions of homeopathy (as described by any of the questions in Section 3).

Alternative hypothesis 2: There was a significant correlation between the demographic grouping of respondents (as described by one of Age, Gender, Ethnic Group, Occupational status and Health status) and their experience of child care and perceptions of homeopathy (as described by any of the questions in Section 3).

Correlations between Demographic variables and the following variables/factors were assessed:

- Question 20: Child's Primary Health care practitioner
- Question 21: Statements regarding Primary Healthcare practitioner
- Question 22: Ever consulted a homeopath?
- Question 23: How many times have consulted a homeopath?
- Question 24: What made you decide to consult a homeopath?
- Question 25: Where did you first hear about homeopathy?
- Question 26: What reasons would you give for never having consulted a homeopath?

- Question 27: Would you be likely to consult a homeopath in the future?
- Question 28: For what reason would you consider consulting a homeopath in the future?
- Question 29: Do you think homeopathy should be offered for most conditions?
- Question 30: Do you think homeopathic treatment should be available in hospitals and clinics?
- Question 31: Do you think there should be more awareness of homeopathy?
- Question 32: What best reflects your view of homeopathy?

Significant correlations were established i.e. H_0 was rejected for certain categories.

The significant correlations are shown in Table 4.14.

Table 4.14 Table showing test statistics for correlation of personal information and your experience with health care provision (Part 3)

Gender Correlations	Phi Significance	Phi Value	Conclusion
Not consulted a homeopath because I have heard of their failures	.045	.170	Males were more likely to cite this as a reason for not having consulted a homeopath.
Not consulted a homeopath because it is nothing but quackery.	.005	.236	Males were more likely to cite this as a reason for not having consulted a homeopath.
Ethnic Group Correlations	Phi Significance	Phi Value	Conclusion
Primary Health care practitioner: Paediatrician	.000	.360	Black respondents were less likely to have a paediatrician
Provider is interested in the child as an individual	.002	.470	White and Indian respondents are more likely to report that their provider is interested in their child as an individual
Provider diagnoses the majority of diseases correctly	.012	.341	Black respondents are more likely to respond that their provider only sometimes diagnoses the majority of diseases correctly. White and Indian respondents respond that their provider always diagnoses the majority of diseases correctly.
Provider prescribes meds too easily	.006	.438	Black and coloured respondents are more likely to respond that their provider always or usually prescribes medications too easily, while whites and Indians are more likely feel that this is never the case.
Ever consulted with a homeopath	.011	.281	Whites and coloureds are more likely to have consulted a homeopath.
Not consulted because never heard of Homeopathy	.003	.318	Black respondents were more likely to use this as a reason for never having consulted with a homeopath before.
Homeopathic treatment should be offered for most diseases	.025	.321	Black respondents were more likely to be negative or unsure

Homeopathic treatment should be available in hospitals and clinics	.011	.345	Black respondents were more likely to be unsure.
Age Correlations	Phi Significance	Phi Value	Conclusion
Primary Health Care Provider-Ayurvedic Practitioner	.047	.238	Older respondents were more likely to have an ayurvedic practitioner
Health care provider soon finds out what is wrong	.034	.360	Younger respondents were more likely to respond that their health care provider soon finds out what is wrong always or usually.
Provider diagnoses the majority of diseases correctly.	.037	.310	Older respondents were more likely to respond that their provider diagnoses the majority of diseases correctly, only sometimes.
Number of times consulted a homeopath	.045	.626	Younger respondents were more likely to have consulted a homeopath more often.
Would consider consulting a homeopath in pregnancy	.000	.439	Younger respondents were more likely to respond positively.
Would consider consulting a homeopath because the medication is safe	.050	.236	The older respondents were more likely to cite this as a reason for consulting a homeopath
More awareness of homeopathy is needed.	.004	.369	Older respondents (45 and older) were more likely to be Negative or Unsure
Home Language Correlations	Phi Significance	Phi Value	Conclusion
Provider diagnoses the majority of diseases correctly	.001	.465	IsiZulu speakers were more likely to respond that their provider only sometimes diagnoses the majority of diseases correctly.
Provider discusses the treatment in mind	.019	.501	Minority language speakers were more likely to feel that the provider only sometimes discusses the treatment in mind.
Not consulted with a homeopath because have never heard of it	.000	.399	IsiZulu language speakers were more likely to cite this as a reason for never having consulted a homeopath.
Not consulted a homeopath because have heard of their failures	.000	.573	IsiXhosa speakers were more likely to cite this as a reason for not having consulted with a homeopath before.
More awareness of homeopathy is required.	.000	.474	African language speakers were more likely to answer

			negative or unsure.
Occupational Status Correlations	Phi Significance	Phi Value	Conclusion
Provider listens all about the child's illness	.003	.497	Student respondents were more likely to respond that their provider only sometimes listened all about a child's illness
Provider examines child thoroughly	.002	.503	Unemployed. Self employed and student respondents were more likely to respond that the provider only sometimes examined the child thoroughly.
Provider soon finds out what is wrong	.026	.442	Students and unemployed respondents were more likely to answer only sometimes.
Provider diagnoses majority of diseases correctly	.018	.392	Unemployed respondents were more likely to answer only sometimes.
Provider knows the best treatment for the child	.014	.399	Students and unemployed respondents were more likely to answer only sometimes.
Provider puts you at ease.	.008	.524	Students and unemployed respondents were more likely to answer only sometimes.
Provider makes you feel as if you are hiding something	.000	1.034	Students and unemployed respondents were more likely to answer Usually or sometimes.
Provider merely wants to make money.	.000	1.022	Students and unemployed respondents were more likely to answer Usually or sometimes
Health Status Correlations	Phi Significance	Phi Value	Conclusion
Provider discusses treatment in mind.	.034	.400	Respondents with Reasonable health status were more likely to respond that their provider discusses treatment only sometimes.

4.5.2 Hypothesis testing

4.5.2.1 Response to Question 11 (Whether homeopathy is a legitimate form of medicine) vs. Questions 12 – 19.

Null hypothesis 3: There was no significant correlation between the answer to Question 11 and answers to Questions 12 – 19.

Alternative hypothesis 3: There was a significant correlation between the answer to Question 11 and answers to Questions 12 – 19.

Significant correlations were established i.e. H_0 was rejected for certain categories.

The significant correlations are shown in Table 4.15.

Table 4.15 Table showing test statistics for correlation of Question 11 and responses to questions 12 - 19

Correlations	Phi Significance	Phi Value	Conclusion
Homeopath Takes blood pressure	.001	.403	Respondents who answered Yes were more likely to answer Yes
Homeopath boosts immune system	.001	.415	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath prescribes painkillers	.001	.418	Respondents who answered Yes to 2.1 were more likely to answer No
Homeopath can diagnose disease	.000	.572	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath uses medication that causes the same disease	.035	.315	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath uses antibiotics	.018	.333	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath uses iridology/ophthalmology	.041	.308	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath prescribes plant extracts	.011	.346	Respondents who

			answered Yes to 2.1 were more likely to answer Yes
Homeopath emphasizes healthy lifestyle	.002	.394	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath prescribes diet	.024	.325	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath can treat the majority of diseases	.000	.536	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopaths can prescribe and dispense their own medications	.015	.335	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath will examine the chest	.001	.309	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath will examine the stomach	.010	.257	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath will listen to heart and breath sounds	.001	.320	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for treating abdominal problems	.000	.587	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of behavioural problems	.000	.537	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of bone and musculoskeletal problems	.000	.512	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of cancer	.002	.398	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of childhood complaints	.006	.323	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of developmental disorders	.000	.632	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of growth related problems	.000	.560	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of infections	.000	.476	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of mental disorders	.000	.544	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of respiratory problems	.000	.511	Respondents who answered Yes to 2.1 were more likely to answer Yes
Would consider homeopathy for the treatment of skin conditions	.000	.642	Respondents who answered Yes to 2.1 were more likely to answer Yes

Would consider homeopathy for the treatment of trauma	.001	.368	Respondents who answered Yes to 2.1 were more likely to answer Yes
Agree: Homeopathy has a scientific basis	.000	.583	Respondents who answered Yes to 2.1 were more likely to answer Yes
Agree: Homeopathy has a religious basis	.000	.682	Respondents who answered Yes to 2.1 were more likely to answer No
Agree: Deals with the occult	.000	.546	Respondents who answered Yes to 2.1 were more likely to answer No
Agree: Homeopathic medications contain no chemicals	.001	.356	Respondents who answered Yes to 2.1 were more likely to answer No
Agree: Medications are made from plants only	.031	.275	Respondents who answered Yes to 2.1 were more likely to answer Yes
Agree: For medications to work you must believe	.000	.441	Respondents who answered Yes to 2.1 were more likely to answer No
Agree: Remedies have been tested by trial and error for years	.000	.432	Respondents who answered Yes to 2.1 were more likely to answer Yes
Agree: Homeopathic medications have had clinical trials	.001	.357	Respondents who answered Yes to 2.1 were more likely to answer Yes
Agree: Homeopathic medications only work on untreatable conditions	.000	.452	Respondents who answered Yes to 2.1 were more likely to answer No
Agree: Homeopathic medicines are safe in pregnancy	.000	.441	Respondents who answered Yes to 2.1 were more likely to answer Yes
Agree: Homeopathic medications are safe in labour	.025	.331	Respondents who answered Yes to 2.1 were more likely to answer Yes
Agree: Homeopathic medications are safe in newborns	.000	.530	Respondents who answered Yes to 2.1 were more likely to answer Yes
Average length of homeopathic consultation	.005	.424	Respondents who answered Yes to 2.1 were more likely to answer between 30 - 60 and 60-90 minutes (i.e. more accurately)
Homeopath will study natural medicine	.035	.219	Respondents who answered Yes to 2.1 were more likely to answer Yes
Homeopath will study traditional African healing	.003	.286	Respondents who answered Yes to 2.1 were more likely to answer Yes
Unsure of what homeopath will study	.002	.296	Respondents who answered Yes to 2.1 less likely to be unsure of what a homeopath will study.
Aware of homeopathic training at	.002	.353	Respondents who

DUT and UJ			answered Yes to 2.1 were more likely to answer Yes
------------	--	--	----------------------------------------------------

From the table above it is clear that homeopathy is a legitimate form of treatment and is highly correlated with correct understanding and viewpoints with regards to homeopathic practice and procedure.

4.5.2.2 Hypothesis testing- Response to Question 20 (health care provider) vs. Question 21 (Statement regarding Health care provider)

Null hypothesis 4: There was no significant correlation between the answers to Question 20 and answers to Questions 21.

Alternative hypothesis 3: There was a significant correlation between the answers to Question 20 and answers to Questions 21.

Significant correlations were established i.e. H_0 was rejected for certain categories.

The significant correlations are shown in Table 4.16.

Table 4.16 Table showing test statistics for correlation of answers to 20 and responses to 21.

Correlations	Phi Significance	Phi Value	Conclusion
Primary Health care provider- GP Provider prescribes medications that make my child feel better.	.035	.248	Patients were slightly more likely to feel that medications prescribed by a GP would make their child feel better.
Primary Health care provider – Paediatrician * Provider examines child thoroughly	.035	.248	Respondents were more likely to feel that their provider examined the child thoroughly if he/she was a paediatrician
Primary Health care provider – Paediatrician * Provider diagnoses the majority of diseases correctly	.013	.249	Respondents were more likely to feel that their provider diagnosed the majority of diseases correctly if he/she was a paediatrician.
Primary Health care provider – Ayurvedic practitioner * Provider puts you at ease	.001	.365	Respondents were less likely to respond that their provider put them at ease if their provider was an ayurvedic practitioner.

4.5.3 Correlations between multiple response questions

In order to further explore possible connections between response categories other correlation analyses were conducted.

These were:

- Cluster analyses of questions 2.2, 2.3, 2.4 and 2.5. Cluster analysis helps to reveal patterns or groups of responses within a set of responses e.g. people who like red will tend to like pink and orange.
- Cluster analyses of questions 3.2, and 3.7. Cluster analysis helps to reveal patterns or groups of responses within a set of responses e.g. people who like red will tend to like pink and orange.

For questions where respondents could choose more than one response, Hierarchical Cluster analyses were performed. This allows the identification of clustered themes within responses e.g. identifying a certain component of a homoeopathy course was associated with identifying other components.

4.5.3.1 Question 12: Perceptions of what a homeopath does?

Dendrogram using Ward Method

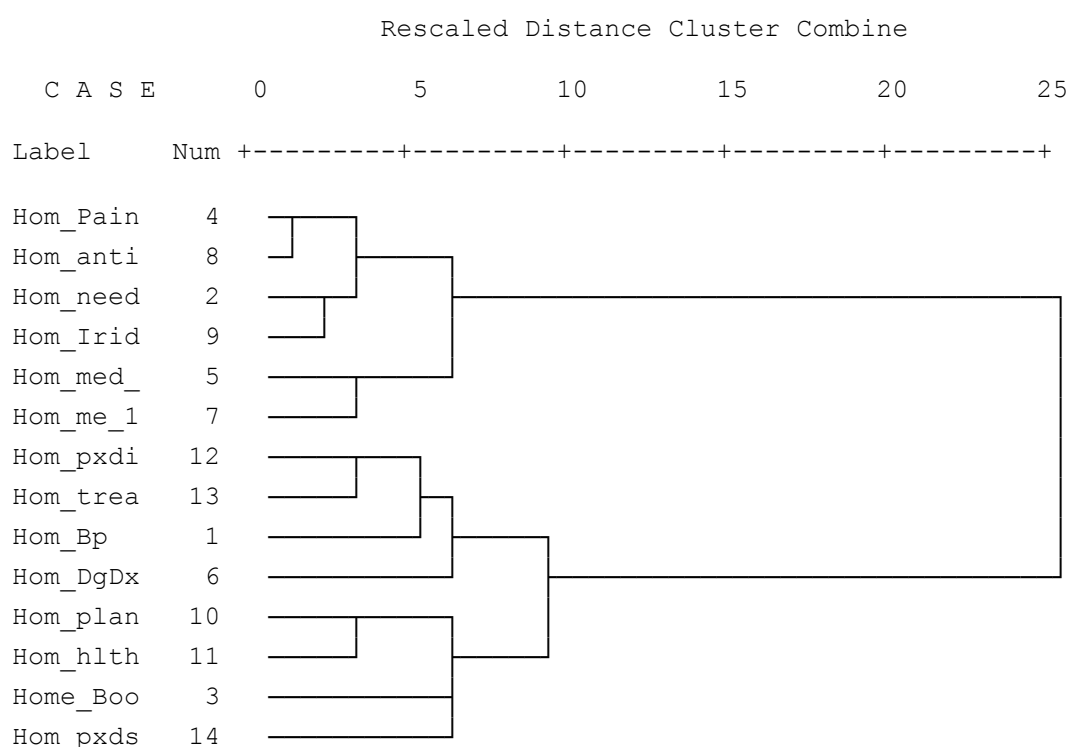


Table 4.17

Abbreviated Name	Category Name
Hom_anti	Homeopath prescribes antibiotics
Hom_hlth	Homeopath encourages healthy lifestyle
Hom_Irid	Homeopath uses Iridology/Ophthalmology
Hom_me_1	Homeopath prescribes medications that can cause the same symptoms
Hom_med_	Homeopathic prescribes medications that are diluted and shaken
Hom_need	Homeopath uses needles
Hom_Pain	Homeopath prescribes painkillers
Hom_plan	Homeopath prescribes plant medicines
Hom_pxdi	Homeopath prescribes diet
Hom_pxds	Homeopath prescribes and dispenses his own medications
Hom_trea	Homeopath can treat all major diseases
Home_Boo	Homeopath boosts the immune system
Hom_Dgdx	Homeopath diagnoses diseases

The above dendrogram suggests a two cluster situation, namely cluster 1 (4, 8, 2, 9, 5 and 7) cluster 2 (12, 13, 1, 6, 10, 11, 3 and 14). These represent the most distinct groupings of the answers.

These clusters are discussed in Chapter 5.

4.5.3.2 Question 13: Perceptions of what procedures a homeopath will perform-

Dendrogram using Wards Linkage

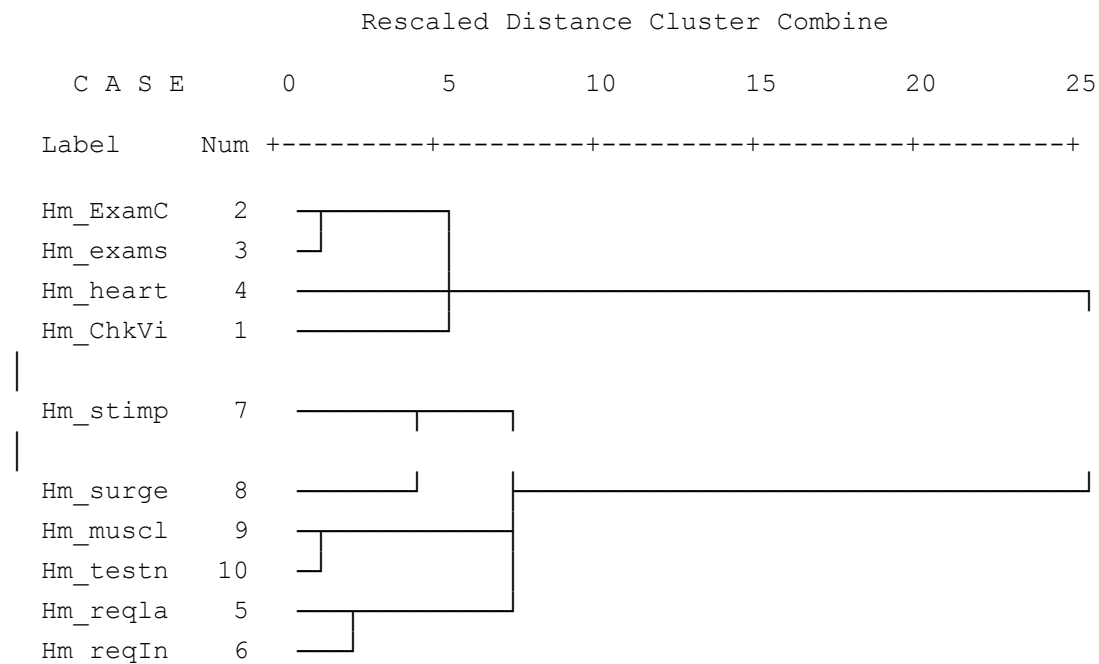


Table 4.18

Abbreviated Name	Category Name
Hm_ChkVi	Homeopath checks vital signs
Hm_ExamC	Homeopath examines the chest
Hm_exams	Homeopath examines stomach
Hm_heart	Homeopath listens to heart and breath sounds
Hm_muscl	Homeopath test muscles
Hm_reqIn	Homeopath requests special investigations
Hm_reqla	Homeopath requests lab tests
Hm_stimp	Homeopath stimulates pressure points
Hm_surge	Homeopath performs surgery
Hm_testn	Homeopath tests nerves

The above dendrogram suggests a two cluster situation, namely cluster 1 (2, 3, 4, 1 and 7) and cluster 2 (8, 9, 10, 5 and 6). Further resolution can be obtained by splitting cluster 1 into two with sub-cluster 1 (2 and 3) sub-cluster 2 (4, 1 and 7). These clusters are discussed in Chapter 5.

4.5.3.3 Question 14: Perceptions of what conditions would be considered for treatment by homeopathy- Dendrogram using Wards Linkage

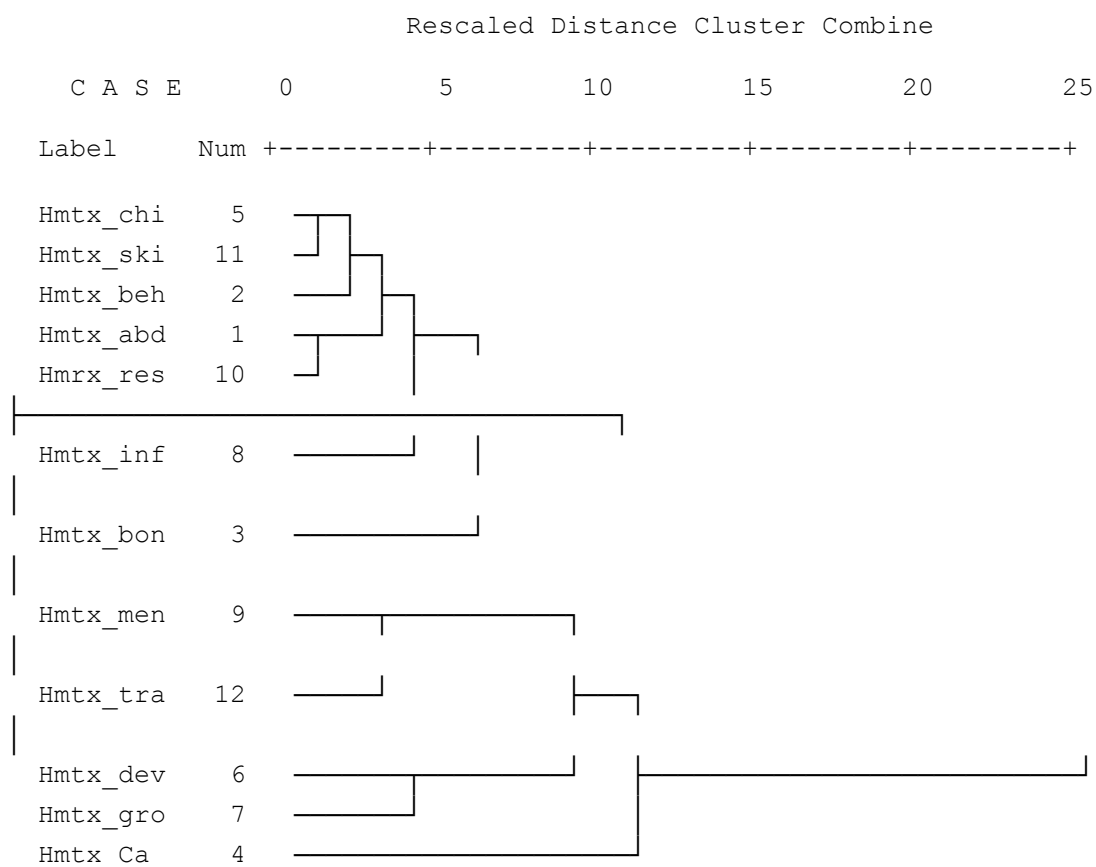


Table 4.19

Abbreviated Name	Category Name
Hmrx_res	Respiratory problems
Hmtx_beh	Behavioural problems
Hmtx_bon	Bone and Muskuloskeletal problems
Hmtx_chi	Childhood ailments
Hmtx_dev	Developmental disorders
Hmtx_gro	Growth related problems
Hmtx_inf	Infections
Hmtx_men	Mental disorders
Hmtx_ski	Skin conditions
Hmtx_abd	Abdominal problems
Hmtx_Ca	Cancer
Hmtx_tra	Trauma

The above dendrogram suggests a two cluster situation, namely cluster 1 (5, 11, 2, 1, 10, 8 and 3), cluster 2 (9, 12, 6, 7 and 4). Cluster 2 could be split into 3 sub clusters 9 and 12, 6 and 7 and 4. Cluster 2 would represent the more serious conditions which would possibly not be considered for homeopathic treatment. These clusters are discussed further in Chapter 5.

4.5.3.4 Question 15: Perceptions of statements regarding homeopathy- Dendrogram

using Wards Linkage

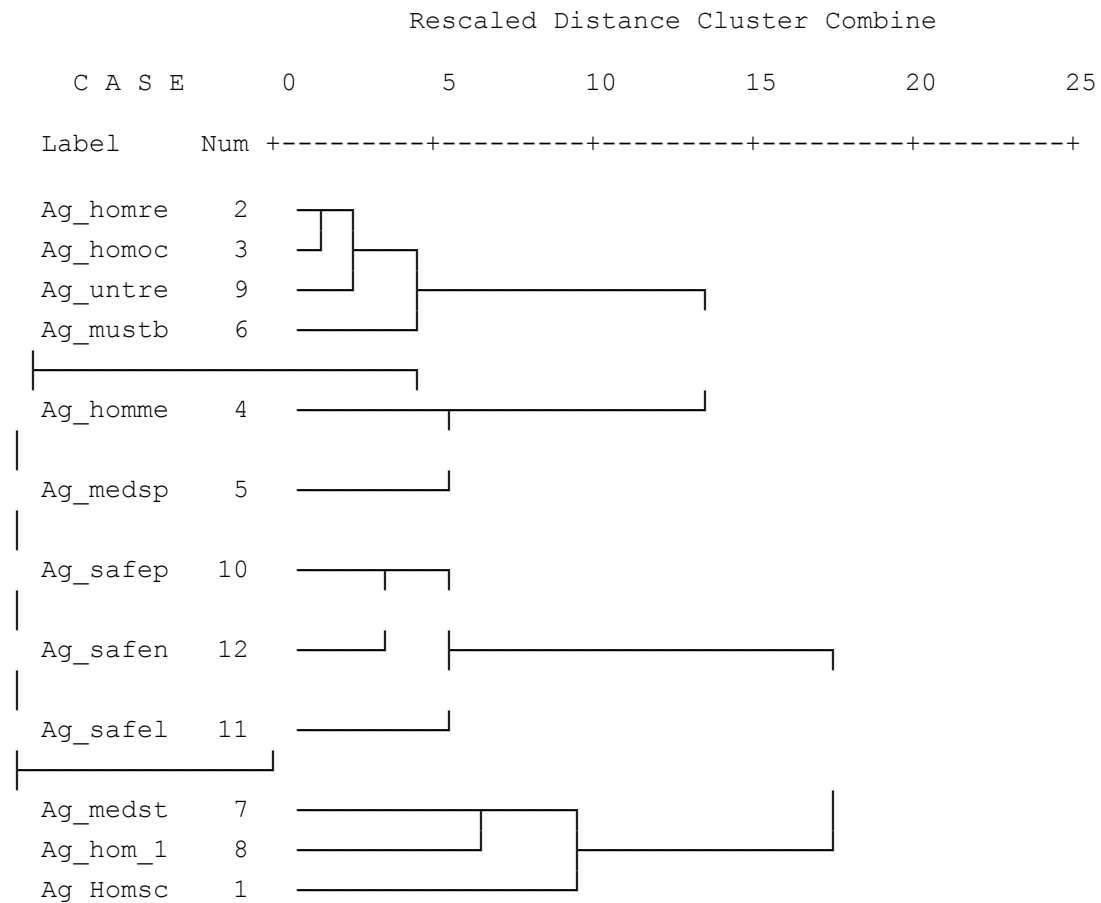


Table 4.20

Abbreviated Name	Category Name
Ag_hom_1	Homeopathic medications have undergone clinical trials
Ag_homme	Homeopathic medications contain no chemicals
Ag_homoc	Homeopathy deals with the occult
Ag_homre	Homeopathy has a religious basis
Ag_Homsc	Homeopathy has a scientific basis
Ag_medsp	Homeopathic medications are made from plants only
Ag_medst	Homeopathic medications are tested by trial and error over

	many years
Ag_mustb	For the medicines to work you must believe in it.
Ag_safel	Homeopathic medicines are safe to use in labour.
Ag_safen	Homeopathic medicines are safe to use in Newborns
Ag_safep	Homeopathic medicines are safe to use in pregnancy
Ag_untre	Homeopathic medications only work in conditions that are not treatable by conventional medication

The above dendrogram suggests a four cluster situation, namely cluster 1 (2, 3, 9 and 6) cluster 2 (4 and 5), cluster 3 (10, 12 and 11) and cluster 4 (7, 8 and 1). These clusters are discussed in chapter 5.

4.5.3.5 Question 21: Statements applicable to Healthcare provider- Dendrogram using Wards Linkage

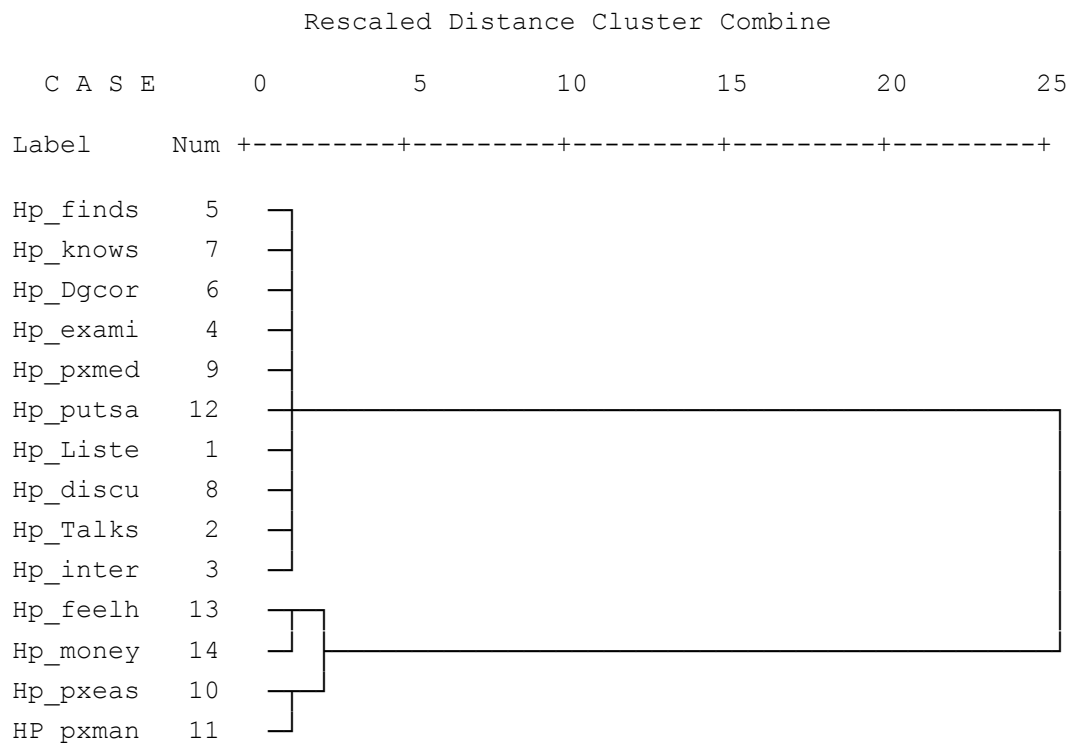


Table 4.21

Abbreviated Name	Category Name
Hp_Dgcor	Diagnoses the majority of ailments correctly
Hp_discu	Discusses the treatment he/or she has in mind
Hp_exami	Examines your child thoroughly
Hp_finds	Soon finds out what is wrong with them
Hp_feelh	Makes you feel as if he/she is hiding something from you

	about your child
Hp_inter	Is interested in your child as an individual
Hp_Liste	Listens to all you have to say about your child's illness
Hp_knows	Knows of the best treatment for your child's illness
Hp_putsa	Puts you at your ease about your child's indisposition
Hp_pxeas	Prescribes medicines too easily
HP_pxman	Prescribes too many medicines
Hp_pxmed	Prescribes medicines that make your child feel better
Hp_money	Merely wants to make money
Hp_Talks	Talks to your child on a level which is understandable and applicable

The above dendrogram suggests a two cluster situation, namely cluster 1 (5, 7, 6, 4, 9, 12, 4, 8, 2 and 3) and cluster 2 (13, 14, 10 and 11). These clusters are discussed in Chapter 5.

4.5.3.6 Question 26: Reasons for consulting a homeopath- Dendrogram using Wards Linkage

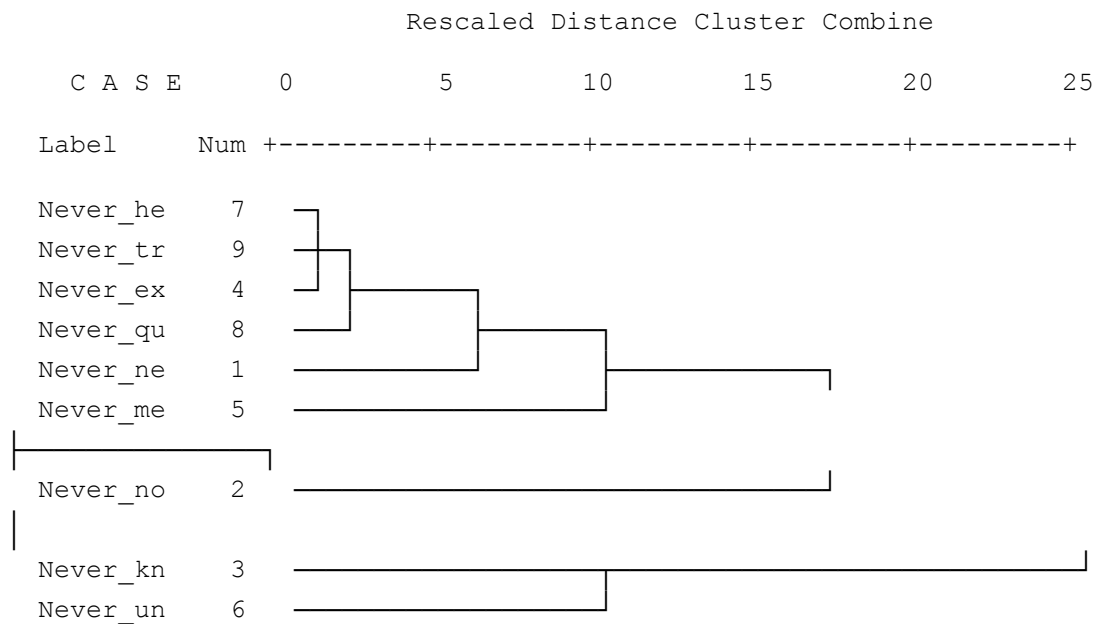


Table 4.22

Abbreviated Name	Category Name
Never_ex	Too expensive
Never_he	Heard of their failures
Never_kn	Know too little about them
Never_me	Medical aid doesn't cover homeopathy
Never_ne	Never heard of homeopathy before
Never_no	Not needed it before

Never_qu	They are nothing but quacks
Never_tr	Their training is not up to standard
Never_un	Am unsure of their methods

The above dendrogram suggests a 4 cluster solution: Cluster 1 (7, 9, 4, 8 and 1), cluster 2 (5) Cluster 3 (2) and cluster 4 (3 and 6). These clusters are discussed in Chapter 5.

CHAPTER 5

DISCUSSION

5.1 Introduction

The results of the statistical analysis of the responses to the questionnaire (Appendix F) from Chapter 4 are analyzed and interpreted further in this chapter. The results obtained from this study is specific for this target group (parents with children younger than 5 years) and attending a registered Crèche or Educare and is in no way representative of the general paediatric population of the Durban area regarding paediatric homeopathy.

5.2 Response rate

A total of 300 questionnaires were handed out to potential participants at registered facilities. 140 (46.6%) questionnaires were returned. The remaining (53.3%) were not returned. This response rate may be attributed to improper instruction, misunderstanding of instruction and lack of willingness to participate in the study by some facilities in the Durban area which directly affected the sample size.

5.3 Part 1: Personal information

5.3.1 Question 1: Gender

Out of the total population, 80% of respondents were female and only 20% were male (Table 4.1). The notable gender split of the respondents may be due to the fact that women are more involved in raising and attending to their children.

Women were more likely to answer the questionnaire if they were explained the protocol of the survey.

5.3.2 Question 2: Age

Most of the respondents were between the ages of 25-34 years (47.1%) and 35-44 years (45.7%) (Figure 4.2). Therefore most of the respondents who participated in this study were between 25-44 years. This portrays the predominant child bearing age of this target group, and gives a rough estimate of the age group of these parents. It is evident that many women in society these days establish their career and become financially stable before starting a family. The least number of respondents were between the age groups of 18 – 24 and 45 years and above. Paruk's (2006) study investigated the perceptions amongst pregnant females towards the use of homeopathy during pregnancy and the results showed that 63% of women was predominantly in the age group between 25 – 34 years and 25% was between 18 -24 years.

5.3.3 Question 3: Ethnicity

The majority of the sample group was 'Indian' (36.4%) and 'White' (35.7%) (Table 4.3 and Figure 4.3). A shortfall of this survey could be the under representation of 'Coloured', 'African' and 'Other' population groups, which maybe attributed to the fact that the survey was conducted amongst parents attending registered facilities in the central Durban area. If a rural area was targeted there would have been a higher response rate from the African group. The geographical area chosen catered mostly for White and Indian population groups.

5.3.4 Question 4: Home language

The majority of the respondents were English speaking and only 12.14% were IsiZulu speaking respondents (Figure 4.4). The majority of the White and Indian respondents tend to be English speaking. The balance of ethnic groups would fulfill the minority languages as represented in (Table 4.4). Again this is in keeping with the broader demographic in an affluent suburb in Durban.

5.3.5 Question 5: Occupational status

Majority of respondents (65%) were employed full time followed by 12.9% of respondents that were self employed (Table 4.5 and Figure 4.5). This indicates that majority of respondents were working and able to afford using registered

facilities. This also indicates that these respondents could afford homeopathic care for their children and confirms that they represent potential consumers to the homeopathic profession. 12.1% of respondents were housewives and this could mean that they take care of the children and would have a more active role to play as a parent. Figure 4.6 shows that most females (51%) were employed full time and hence made use of the Crèches and Educarees.

5.3.6 Question 6: Health status of parents

Responses to the question regarding participants state of health revealed the following: 55% of respondents indicated that their health was 'excellent', 40.7% indicated that their health was 'good', 3.6% 'reasonable/satisfactory' and only one participant (0.7%) reported 'poor health' (Table 4.6 and Figure 4.7). Most of the participants were healthy and this could be due to the survey being conducted in an affluent urban setting and also the socio economic status of participants. This study focused on registered facilities in which the overall state of health was found to be excellent. Further studies are necessary in order to determine if this trend is prevalent amongst parents at unregistered facilities.

5.3.7 Question 7: Number of children

The majority of respondents (55%) have two children, 30.7% have one child, 12.1% have 3 children and 2.1% have 4 children (Table 4.7 and Figure 4.8). The

tendency to have smaller families indicates the occupational and the socio economic status of respondents. This study also focused only on children that were younger than 5 years and we may not be aware of older siblings as this was not asked about in the questionnaire.

5.3.8 Question 8: Age of children

Most of the respondent's children (56.6%) are between the ages of 3 and 4 years old (Table 4.8 and Figure 4.9). This is expected when the design of the study was targeting children from Crèches and Educarees. The least number of respondents with children (9.3%) were between the age group 7 and 12 months.

5.3.9 Question 9: Health status of children

Responses to the question regarding health status of children revealed the following: 51.8% of respondents indicated that their child's health was 'excellent', 43.9% indicated that their child's health was 'good' and only 6 respondents (4.3%) reported that their child's health was 'reasonable' (Table 4.9 and Figure 4.10). This indicates most of the respondent's children were healthy. This study focused on registered facilities in which the overall state of health was found to be excellent supported by the correlation analysis. Further studies are necessary in order to determine if this trend is prevalent amongst children at unregistered facilities. In 2009, Von Bardeleben conducted a survey on the perceptions of homeopathy

amongst parents of children aged 3 to 7 years old at pre primary schools in the Pinetown district. Results of Von Bardeleben's study (2009) showed that 40.9% of respondent's children were in good health, while 33.9% were in excellent health and only 1.2% in poor health.

5.3.10 Question 10: Medication status of children

The majority of respondent's children (54.05%) (Table 4.10 and Figure 4.11) were taking supplements and this indicates supporting the health of children. This could also indicate that children are given supplements to keep the immune system strong, help with nutritional deficiencies and decreased appetite. 19.8% of children were taking prescription medication, this could be due to chronic conditions. 13.5% were taking over the counter medication, this could be due to acute conditions arising and parents not visiting their primary health care provider in time. Only 5% of children were taking natural/herbal remedies and 7% were taking homeopathic remedies, this suggests the lack of awareness of complementary and alternative therapies amongst the paediatric population and homeopathy in particular. Results of Paruk's study (2006) showed that 88% of pregnant women were taking supplements in the latter half of their pregnancies.

5.4 Part 2: Knowledge of homeopathy

5.4.1 Question 11: Legitimacy of homeopathy

The majority of respondents (72.1%) perceived that homeopathy is a legitimate form of medicine (Figure 4.11). This indicates that the level of knowledge about homeopathy is fairly good amongst respondents. 24.3% did not want to commit either way and marked the 'Unsure' box. Only 3.6% indicated that homeopathy was not a legitimate form of medicine. These are positive results and show that homeopathy has the potential to become more widely accepted.

The correlation analysis between home language and homeopathy to be a legitimate form of treatment showed that African language speakers were more likely to be unsure or negative. This indicates a lack of knowledge and unawareness of homeopathy in the African community but the geographical areas chosen also played a role. Analysis also showed that respondents who viewed homeopathy as a legitimate form of healthcare was highly correlated with correct understanding and viewpoints regarding homeopathic practice and procedures.

5.4.2 Question 12: Mode of practice of homeopath

The majority (84.4%) of respondents thought that homeopaths 'emphasize a healthy lifestyle' and 67.4% thought that homeopaths 'usually prescribe a diet'

(Table 4.12). This finding is in keeping with that obtained by Paruk (2006) who found that most respondents (97%) felt that homeopaths 'emphasize a healthy lifestyle' and 60% felt that homeopaths 'usually prescribe a diet'. These results prove that the myth that homeopaths prescribe strict diets is true and highlights possible confusion between homeopaths, dieticians, nutritionists and naturopaths. Results of Von Bardeleben's study (2009) showed that 46% of homeopaths emphasized a healthy lifestyle.

75.9% of the respondents were aware that homeopaths do not 'usually prescribe painkillers' and 70.2% were aware that homeopaths do not make use of antibiotics, indicating that respondents were aware that homeopaths do not prescribe mainstream drugs. 73% of respondents indicated that homeopaths prescribe plant extracts which verifies the myth that homeopathy is a form of herbalism does in fact exist. These results are in keeping with those obtained by Paruk (2006) who found that 87% of respondents indicated that homeopaths 'prescribe plant extracts', 75% of respondents were aware that homeopaths do not 'usually prescribe painkillers' and do not 'use antibiotics'. Results of Von Bardeleben's study (2009) showed that only 39% of homeopaths prescribed plant extracts. Some confusion between homeopathy and iridology was noted in this study, since 46.8% of respondents were of the opinion that homeopaths used iridology to diagnose disease and 44.9% were unsure. Some homeopaths use iridology as a diagnostic tool in practice which could have led to the confusion.

Only 26.2% of the sample indicated correctly that homeopaths use medicines that are diluted and shaken and only 27% knew that homeopaths make use of medicines that can cause the same symptoms, this indicates a poor level of knowledge of homeopathic principles. These findings are in keeping with those obtained by Paruk (2006). 66.7% of the respondents were aware that homeopaths boost the immune system and this indicates that respondents are aware that homeopathic medicines have a positive effect on the individual's immune system. Results of Von Bardeleben's study (2009) showed that 45% of homeopaths boost the immune system. 69.3% of respondents were aware that homeopaths prescribe and dispense their own homeopathic medicine. This shows that most of the sample was aware that homeopathic medicines are not easily accessible in higher potencies, but lower potencies are available at health shops and some pharmacies.

51.8% of respondents indicated that homeopaths can diagnose the majority of diseases and 69.1% indicated that homeopaths can treat the majority of diseases. This shows that almost half the sample was aware that homeopaths are trained to diagnose and treat the majority of diseases, thus dispelling the myth that homeopaths are 'quacks' and indicating a general awareness of the capabilities of homeopaths.

Correlation analysis showed that female respondents were more likely to respond yes to a homeopath boosting immune system and a homeopath will study natural medicine. This could be due to the confusion between what homeopathy and natural medicine has to offer. Female respondents were more likely to be unsure if a homeopath uses iridology or ophthalmology and if homeopathy would be used to treat cancer.

Correlation analysis showed that respondents between 25 and 44 were more likely to respond yes to a homeopath prescribing plant extracts. White respondents were likely to respond that homeopaths prescribe and dispense their own homeopathic medicine. The reason for this may be that these White respondents visited a homeopath in the past. Self employed and unemployed respondents were more likely to answer no to a homeopath prescribing a diet and homeopathy treating the majority of diseases. This indicates that these respondents have a poor level of homeopathic knowledge.

The dendrogram analysis (4.5.3.1) reveals that two cluster patterns were found.

In Cluster 1, respondents answered, homeopaths prescribe painkillers, antibiotics, use needles and use iridology which are incorrect. Also in this cluster respondents answered that a homeopath prescribes medications that can cause the same

symptoms and prescribes medications that are diluted and shaken, which are more likely what a homeopath would do.

In Cluster 2, respondents answered, a homeopath takes blood pressure, boosts the immune system, diagnoses the majority of diseases, prescribes plant extracts,

encourages a healthy lifestyle, prescribes a diet, can treat majority of diseases and prescribes and dispenses his own medications. The nature of this cluster shows that it is perceived that a homeopath performs the following as there is no specific area or system focused upon in this cluster.

5.4.3 Question 13: Procedures performed by a homeopath

87.14% of respondents were aware that homeopaths check vital signs of patients (Figure 4.13). The majority of respondents perceived that homeopaths examine the chest (64.29%), examine the stomach (62.86%) and listen to heart and breath sounds (67.14%) suggesting that homeopaths undergo relevant and extensive training and are competent to perform examinations that are essential when providing primary health care. The majority of respondents were unaware that homeopaths request laboratory tests (65.71%) and 73.57% request special investigations, suggesting the need to make respondents aware that homeopaths are trained as primary health care professionals who also require the need to request laboratory tests and special investigations in order to diagnose diseases.

The majority of the respondents (96.43%) were aware that homeopaths do not perform surgery. Confusion between testing muscles (36.43%) and testing nerves (34.29%) does exist and basic homeopathic education with regards to procedures is necessary.

The correlation analysis showed that White and Coloured respondents were more likely to respond yes to a homeopath examining the chest and listening to heart and breathe sounds. Their awareness of homeopathic procedures could be due to visiting a homeopath in the past. Younger respondents were likely to answer yes to homeopaths requesting lab tests and performing surgery.

The dendrogram analysis (4.5.3.2) reveals two main cluster patterns, which are further subdivided, were found. Cluster 1 has two subdivisions. In the first subdivision of Cluster 1, respondents answered, a homeopath examines the chest and stomach. In the second subdivision of Cluster 1, respondents answered, a homeopath checks vital signs, listens to heart and breath sounds and stimulates pressure points. It is evident that some respondents perceive that homeopaths stimulate pressure points, which is not correct since homeopaths are not trained in the field of reflexology.

In Cluster 2, respondents answered, a homeopath requests lab tests, special investigations, performs surgery, tests muscles and nerves. This indicates that some respondents perceive that a homeopath can perform surgery. But surgery is

the only procedure that is more specialized from the others and homeopaths are not trained for this.

5.4.4 Question 14: Conditions treated by a homeopath

The respondents perceived the following conditions to be treatable by homeopathy for children: abdominal problems (73.05%), behavioural problems (73.05%), bone and musculoskeletal problems (70.21%), childhood complaints (81.56%), developmental disorders (60.99%), infections (58.87%), mental disorders (56.03%), respiratory problems (68.09%) and skin conditions (84.40%) (Figure 4.14). This indicates that respondents are aware that homeopaths are trained to diagnose a majority of diseases in children indicating a general awareness of the applicability of homeopathy in various conditions. Results of Von Bardeleben's (2009) study showed that respondents would seek homeopathic treatment for allergies (43.5%), hay fever (38.1%) and eczema (37.6%).

Of all the conditions listed in this question, homeopathy was not considered for children in the following: cancer (29.79%), growth related problems (47.52%) and trauma (46.81%). It is evident that some respondents perceived that chronic conditions such as cancer and trauma were not suitable for homeopathic treatment, indicating that homeopathy has limitations in treating certain conditions. Homeopathy indeed has much to offer to the understanding and treatment of chronic disease (Ullman, 1991:169). This outlines further lack of knowledge

regarding homeopathic practices, indicating that some individuals are aware that homeopathic prescriptions are symptom based and homeopaths are thus able to treat any condition, no matter how serious, based on the presenting symptoms.

The correlation analysis between ethnic group and conditions treated with homeopathy for your child showed that the Coloured, Indian and White ethnic groups were more likely to have a better level of self described knowledge whereas Black respondents were more likely to be unsure or negative. The possible reasons for the Black ethnic group having the lowest levels of self described knowledge may be associated to the apartheid era. During this time the Black community had very little opportunity and resources to visit homeopathic practitioners. It was only the privileged ones that had access to such knowledge and proper medical treatment, hence the vast majority of Black people would not have had exposure to a lot of the alternative treatments other than their own traditional medical practices. For the same reasons, Black respondents were more likely to be unsure or negative of the training institutions at DUT and UJ homeopathic programs. The correlation analysis between health status and conditions treated with homeopathy for your child showed that respondents in better health were more likely to be positive to use homeopathy to treat infections.

The dendrogram analysis (4.5.3.3) reveals two main cluster patterns, which are further subdivided, were found. Cluster 2 has three subdivisions.

In Cluster 1, respondents felt that “Abdominal”, “Behavioural”, “Bone and Musculoskeletal”, “Childhood ailments”, “Infections”, “Respiratory” and “Skin conditions” would be considered for homeopathic treatment. The following conditions may be perceived by respondents as not being serious and will possibly consider homeopathic treatment.

In the first subdivision of Cluster 2, respondents answered “Mental disorders”. In the second subdivision of Cluster 2, respondents answered “Developmental disorders” and “Trauma”. In the third subdivision of Cluster 2, respondents answered “Cancer” and “Growth related problems”. Overall Cluster 2 would represent the more serious conditions which would possibly not be considered for homeopathic treatment. This indicates that there may be a lack of knowledge about homeopathy and respondents are unaware that various types of health conditions whether its serious/pathological conditions, life-threatening or basic general conditions can be managed and treated with homeopathy.

5.4.5 Question 15: Statements regarding knowledge of homeopathy

70.92% of all respondents were aware that homeopathy has a scientific basis (Figure 4.15). This result provides a very good opinion of homeopathy. Results of Maharajh’s study (2005) showed that more GPs (51.55%) than pharmacists (42.86%) perceived that homeopathy does have a scientific basis. 60.99% of respondents thought that homeopathic medicines have been tested through trial

and error over many years, indicating that they are unaware that all homeopathic medicines have undergone drug provings. Results of Von Bardeleben's (2009) study showed that 51.2% of respondents indicated that homeopathy had a valid scientific basis.

58.6% of the sample indicated correctly that homeopathic medicines are safe to use during pregnancy and 58.6% indicated that homeopathic medicines are safe to use

in newborns and infants. This indicates that almost half of the sample was aware of the uses of homeopathy. Only 48.23% of respondents were aware that homeopathic medicines are safe to use during the birthing process. Only 7.8% of the respondents thought that homeopathy has a religious base, 2.84% of respondents thought that homeopathy deals with the occult and 5.67% of respondents thought that homeopathy works only on conditions that are not treatable by conventional medicine. This indicates that the myth that homeopathy is an unproved science exists. It is evident that confusion between homeopathy and other healing methods does exist, and basic homeopathic education in this regards is necessary. 20.5% of respondents thought that for the medicines to work you must believe in it. Results of Von Bardeleben's (2009) study showed that 40.7% of the respondents saw homeopathy as preventative medicine, 37.6% saw it as supportive treatment while 35.7% regarded homeopathy as a first choice of treatment.

The correlation analysis between ethnic group and statements regarding homeopathy showed that Black respondents were more likely to respond no or unsure. Indian respondents were more likely to agree that homeopathic medications are made from plants only.

The dendrogram analysis (4.5.3.3) reveals that four cluster patterns were found. In Cluster 1, respondents answered, homeopathy 'has a religious basis', 'deals with the occult', 'for the medicines to work you must believe in it' and 'homeopathic medications only work in conditions that are not treatable by conventional medicine' and this indicates the misunderstanding of what homeopathy is.

In Cluster 2, respondents answered, 'homeopathic medications contain no chemicals' and 'homeopathic medications are made from plants only'.

In Cluster 3, respondents answered, 'homeopathic medicines are safe to use in pregnancy', 'homeopathic medicines are safe to use in labour' and 'homeopathic medicines are safe to use in newborns'. This indicates that females are more likely to have a better knowledge and are aware that homeopathic medicines are safe.

In Cluster 4, respondents answered, 'homeopathy has a scientific basis', 'homeopathic medications are tested by trial and error over many years' and 'homeopathic medications have undergone clinical trials'.

5.4.6 Question 16: Duration of the homeopathic consultation

The majority of respondents (57.14%) perceived that the homeopathic consultation lasted 30-60 minutes (Figure 4.16). 18.57% perceived that it was 10-30 minutes and 16.43% perceived that it was 60-90 minutes. This indicates that most of the respondents perceived that the average length of the homeopathic consultation was less than 60 minutes. The conclusions drawn from this question are limited by the lack of

definition. This question does not distinguish between the initial consultation or follow-up consultations. Respondents who answered that it took 10-30 minutes may have thought of a follow-up consultation and those who answered 30-60 minutes may have thought of an initial consultation. Therefore, this question should rather have read as follows: “What is the average initial homeopathic consultation?” as opposed to “What is the average homeopathic consultation?” In reality it is quite difficult even for the homeopath to estimate the initial consultation time as this depends on the individual practitioner, the type of patient, the type of case history and physical examination. This factor may change the time taken for a homeopathic consultation and hence their perceptions of the average time taken.

5.4.7 Question 17: Nature of homeopathic study

The majority of respondents (80.85%) perceived that a homeopath will study herbal medicine (Figure 4.17). These results indicate that respondents are unaware that homeopathy differs from herbal medicine, in that plant, animal and mineral resources are used in homeopathy whereas only plants are used in herbal medicine and that it differs as far as the manufacturing processes of their medicines.

71.63% of respondents perceived that a homeopath will study natural medicine.

This is a common misconception; it is believed that if a medicine is natural then it can be classified as homeopathic medicine. 28.37% of respondents perceived that homeopaths will study energy medicine. Only 2.13% perceived that homeopaths will study placebo. A need definitely exists to further educate and define the different forms of complementary and alternative medicine since herbal medicine and natural medicine are often confused as being apart of homeopathy.

5.4.8 Question 18: Level of education of homeopaths

27.86% of respondents were aware that it would take 5 years to qualify as a homeopath (Figure 4.18). Only 20% of respondents were accurate in stating that it would take more than 5 years to qualify as a homeopath. The length of time to

qualify is therefore a variable centered around 5-6 years. Results of Maharajh's (2005) study showed that 26.79% of pharmacists and 21.98% of GPs were aware that the course in homeopathy was of 5 years duration.

5.4.9 Question 19: Awareness of training programmes in South Africa

Majority of the respondents (53.57%) knew of the facilities that offer homeopathic training (Figure 4.19). This is in keeping with 38.5% of respondents were unaware and only 7.86% were unsure of the homeopathic training offered facilities at DUT and UJ. This finding is in keeping with that obtained by Von Bardeleben (2009) who found that 41.5% of respondents were aware that homeopaths received full time training.

Macquet (2007) conducted a study amongst students at the Durban University of Technology regarding their perception of homeopathy and their awareness of the Homeopathic Day Clinic on the campus. He found that the respondents knowledge of homeopathy was low (only 37.49% had even heard of homeopathy, compared to 53.57% in this study), but the awareness of the Homeopathic Day Clinic was reasonable at 29.14%, considering the low general knowledge of homeopathy. Both his study and this study point to the need for the training institutions (Durban University of Technology and University of Johannesburg) to make more of an effort to publicize these facilities. If respondents were aware of the existence of such facilities, they would attend them.

5.5 Part 3: Experience with healthcare

5.5.1 Question 20: Primary healthcare provider of child

Majority of respondents (73.05%) seek medical advice from a general practitioner (GP) when their child is ill or indisposed. 56.74% were being treated by a paediatrician and only 6.38% were visiting a medical specialist (Figure 4.20). Most of the respondents stated that their primary healthcare provider was a GP and paediatrician. This indicates that majority of respondents will take their child to the GP depending on how serious the condition is. It was encouraging to note that 10.64% of the sample consults with a homeopath when their child is ill or indisposed. This indicates that some respondents are aware of the benefits that homeopathic medicine has to offer but a more concerted effort has to be made so parents are aware of the benefits and scope of homeopathy in the treatment of children.

The correlation analysis showed that Black respondents were less likely to have a paediatrician whereas White, Indian and Coloured respondents visited a paediatrician as a primary healthcare provider for their child. Due to the socio economic status of Black respondents, not having a medical aid scheme and the high consultation rates of pediatricians, Black respondents were less likely to visit a paediatrician.

5.5.2 Question 21: Opinions of childcare provider

The majority of respondents had positive opinions about their healthcare provider. Only 12.06% of respondents felt that their healthcare provider prescribed medicines too easily and a further 5.67% of respondents felt that healthcare provider prescribes medicines too easily (Figure 4.21). It was encouraging to note that 85.82% of healthcare providers discuss the treatment they have in mind and 63.83% of healthcare providers were interested in the child as an individual. Overall, the responses indicate that participants are satisfied with the treatment they receive from their healthcare providers, and that they find them to be competent in their approach, management and treatment of disease for their child.

Correlation analysis between ethnic group and statements regarding healthcare provider showed that White and Indian respondents were more likely to report that their provider is interested in their child as an individual, their provider always diagnoses the majority of diseases correctly and their provider never prescribes medicines too easily and this could be due to parents visiting a paediatrician as opposed to a general practitioner. Black respondents were likely to respond that their provider only sometimes diagnoses the majority of diseases correctly and Black and Coloured respondents were more likely to respond that their provider always or usually prescribes medications too easily as opposed to Whites and Indians.

Younger respondents were more likely to respond that their health care provider always finds out what is wrong with their child whereas older respondents and IsiZulu speakers were more likely to respond that their provider diagnoses the majority of diseases correctly only sometimes. Only minority language speakers and respondents whose children had reasonable health status were more likely to respond that their provider only sometimes discusses the treatment in mind for their child.

Correlation analysis between occupational status and statements regarding healthcare provider showed that unemployed and student respondents were more likely to respond that their provider only sometimes listened all about their child's illness, that the provider only sometimes examined the child thoroughly, provider soon finds out what is wrong, diagnoses the majority of diseases, knows of the best

treatment for the child, puts you at ease about your child's indisposition, provider makes you feel as if he/she hiding something from you and provider merely wants to make money.

The dendrogram analysis (4.5.3.4) reveals that two cluster patterns were found.

In Cluster 1, respondents answered that their healthcare provider, 'soon finds out what is wrong with their child', 'knows of the best treatment for your child's illness',

‘diagnoses the majority of ailments correctly’, ‘examines your child thoroughly’, ‘prescribes medicines that make your child feel better’, ‘puts you at ease about your child’s indisposition’, ‘discusses the treatment he or she has in mind’, ‘talks to your child on a level which is understandable and applicable’ and ‘is interested in your child as an individual.

In Cluster 2, respondents answered that their healthcare provider, ‘prescribes medicines too easily’, ‘prescribes too many medicines’, ‘makes you feel as if he/she is hiding something from you about your child’ and ‘merely wants to make money’.

5.5.3 Question 22: Prior experience with homeopathy

The majority of the respondents (67.86%) had never consulted a homeopath before for their child (Figure 4.22). This indicates that majority of respondents are unaware

of homeopathy. Only 32.14% of respondents had consulted with a homeopath in the past for their child. Results of Von Bardeleben’s (2009) study showed that only 12.8% of respondents would contact a homeopath if their child was ill. Results of Paruk’s (2006) study showed that only 38.3% of respondents had consulted with a homeopath in the past. This indicates that a small number of

respondents are aware of the benefits of using homeopathic medicine to treat children.

Correlation analysis showed that Whites and Coloureds were more likely to have consulted a homeopath for their child in the past. This could be due to the awareness and known benefits amongst these respondents about homeopathy.

5.5.4 Question 23: Have consulted a homeopath before

11.36% of respondents had consulted with a homeopath for their child more than 10 times (Figure 4.23). 13.64% of respondents had consulted with a homeopath for their child between 5 – 9 times and 27.27% visited a homeopath between 2 – 4 times. This indicates there is a strong likelihood of subsequent visits to a homeopath amongst some respondents. Results of Von Bardeleben's (2009) study showed that almost half (48.60%) of respondents who had been treated with homeopathy were very satisfied, while 25.23% were satisfied.

Correlation analysis showed that younger respondents were more likely to have consulted a homeopath for their child more than once and this could be due to their awareness, understanding and safety of homeopathy.

5.5.5 Question 24: What made you consult a homeopath for your child?

The majority of respondents (52.27%) consulted a homeopath when conventional medicine failed (Figure 4.24). 18.18% of respondents visited a homeopath due to personal recommendation. 11.36% consulted a homeopath because they considered homeopathy to be 'natural'. The association of homeopathy with being 'natural' may indicate some confusion between homeopathy and herbalism, further indicating the need to dispel the myth through basic homeopathic education. 9.09% consulted a homeopath because they perceived homeopathic medicines to be safe with no side effects. A further 9.09% consulted a homeopath during pregnancy.

Correlation analysis showed that younger respondents were more likely to consider consulting a homeopath during pregnancy. This indicates that female respondents are aware that homeopathic medicines are safe to be used during pregnancy.

Older respondents were likely to consider consulting a homeopath because homeopathic medication is safe.

5.5.6 Question 25: Where did you first hear about homeopathy?

Majority of the respondents (68.57%) had never heard of homeopathy (Figure 4.25). This indicates that a more concerted approach is needed by the homeopathic profession. 25% had first heard about homeopathy through a relative or friend, indicating that people that have been to homeopaths usually recommend them to others. Only 3.57% of respondents had heard of homeopathy through media. This indicates that there is insufficient homeopathic exposure in the media, and the little exposure that exists may be not very effective. (This reiterates that person to person interaction is a more effective way of communicating information regarding homeopathy, because it conveys a better understanding and sense of homeopathy). Only 2.86% of respondents were referred to a homeopath by a doctor or paramedical services. This could be due to failure of conventional medicine or recommendation of an alternate form of medicine.

Results of Von Bardeleben's (2009) study showed that 615 of respondents heard about homeopathy through friends and 42.2% through media. Greater awareness of the homeopathic Day Clinic at DUT in the media should attract more attention to homeopathy as a form of affordable health care (Von Bardeleben, 2009).

5.5.7 Question 26: Reasons for not consulting a homeopath

Most of the respondents (50%) had not previously consulted with a homeopath because they knew too little about them (Figure 4.26). 37% of respondents did not consult a homeopath because they did not need their service and 33% were unsure of their methods. This indicates that the main reason for not consulting with a homeopath was due to a lack of knowledge about homeopathy, and this highlights the need for homeopathic education in this and other groups, as pointed out previously. 23% of respondents were discouraged that medical aid did not cover homeopathy.

The correlation analysis showed that males and IsiXhosa speakers were more likely to not consult a homeopath for their child because they heard of their failures and it is nothing but quackery. Black respondents were more likely to have not consulted a homeopath because they never heard of homeopathy.

The dendrogram analysis (4.5.3.5) reveals that four cluster patterns were found.

In Cluster 1, respondents who never consulted a homeopath before for their child answered, 'heard of their failures', 'training is not up to standard', 'too expensive', 'they are nothing but quacks' and 'never heard of homeopathy before'.

In Cluster 2, respondents answered 'medical aid doesn't cover homeopathy'.

In Cluster 3, respondents answered 'not needed them before'.

In Cluster 4, respondents answered 'know too little about them' and 'unsure of their methods'.

5.5.8 Question 27: Would you consult a homeopath in the future for you child?

50% (Figure 4.27) of those who had never consulted a homeopath previously, reported that they would consider consulting with a homeopath in the future.

42.71% of respondents were unsure if they would consult a homeopath in the future. This could be due to the lack of knowledge of homeopathy.

5.5.9 Question 28: Reason for consulting a homeopath in the future for you child

30% (Figure 4.28) of respondents indicated that they were likely to consult with a homeopath because the medication is safe. 29% would consult with a homeopath because homeopathy is natural. 28% would consult a homeopath if conventional medicine failed and only 4% would do so in pregnancy. A further association with homeopathy as being 'natural' emphasizes the likelihood of confusion between homeopathy and herbalism, and again indicates the need to address this misconception and provide a basic homeopathic education to the public, as

previously discussed. It was encouraging to note that 30% of the respondents were aware that homeopathic medicines are safe and have minimal side effects.

5.5.10 Question 29: Should homeopathic treatment be offered for most medical conditions?

Majority of respondents (66.43%) (Figure 4.29) indicated that homeopathy should be offered for most medical conditions. This indicates that respondents have a positive attitude towards homeopathic treatment for acute and chronic conditions. 29.29% of respondents were unsure if homeopathic treatment should be offered for most medical conditions. Only 4.29% of respondents indicated that homeopathic treatment should not be offered for most medical conditions.

Correlation analysis showed that Black respondents were more likely to be negative or unsure if homeopathic treatment should be offered for most diseases since they are unaware of what homeopathy is about.

5.5.11 Question 30: Should homeopathic treatment be available in hospitals and clinics?

A significant percentage of respondents (77.14%) indicated that homeopathic treatment should be available in hospitals and clinics (Figure 4.30). This indicates that most of the respondents perceive that integrated medicine is needed in hospital and clinic setting. Only 3.57% felt that it should not be incorporated in hospitals and clinics and 19.29% were unsure. These results are in keeping with that obtained by Von Bardeleben's (2009) who found that 65.6% of respondents believed homeopathy should be available in hospitals.

Correlation analysis showed that Black respondents were more likely to be unsure if homeopathic treatment should be available in hospitals and clinics.

5.5.12 Question 31: Should there be more awareness of homeopathy?

Majority of respondents (90.71%) (Figure 4.31) felt that there should be more awareness of homeopathy and this shows us that respondents are very keen on learning about homeopathy. This also indicates that there is insufficient homeopathic exposure and knowledge about homeopathy. This reiterates the point made previously by the researcher that there is a concerted need for homeopathic education in this and other groups. Only 7.14% of respondents were unsure if

there should be more awareness of homeopathy. It was very encouraging to note that only 2.14% felt there should not be awareness of homeopathy.

Correlation analysis showed that respondents who were older than 45 and African language speakers were more likely to be negative or unsure if more awareness of homeopathy is needed.

5.5.13 Question 32: Which of the following best reflects your view of homeopathy?

The most common responses show a split between positive opinions (excellent mode of treatment – 40.29%) (Figure 4.32) and lack of information (not informed enough – 46.04%). 12.95% of respondents were uncomfortable with homeopathy, but found it effective for some patients. A very small percentage felt that homeopathy was quackery and does more harm than good.

CHAPTER 6

CONCLUSIONS AND RECOMMENDATIONS

6.1 Conclusions

The results of this survey provided data on parents whose children were below 5 years and attended a registered Crèche or Educare in the Durban area. Their general knowledge of homeopathy, perceptions of homeopathy and their experience with health care provision were assessed. The respondents portrayed genuine interest and a desire to know more about homeopathy. Overall the respondents had a positive and accepting attitude towards homeopathy. However the study indicated that in this target group there is a definite lack of knowledge with regard to homeopathy. A variety of misconceptions with regard to the profession were noted. The response rate (47%) indicates that the results of the study may not be representative of the entire paediatric population.

The aim of this study was to determine the knowledge and perceptions of parents towards homeopathy as a form of treatment for their children that were below 5 years.

It was encouraging to note that 72.1% of respondents perceived that homeopathy is a legitimate form of medicine. This is an indication that the awareness towards alternative forms of treatment and particularly homeopathy is growing amongst parents in the paediatric population. But it was clear from the study more needs to be done to inform the public as well as parents with children.

Respondents in general had a limited knowledge of homeopathy with regards to level of education needed to qualify, awareness of training programmes, mode of practice, procedures performed and conditions treated.

Analysis revealed that the following misconceptions exist within this sample: homeopaths emphasize a healthy lifestyle, homeopaths usually prescribe a diet, and homeopaths use iridology to diagnose disease. These are common misconceptions that exist among parents and very often this highlights the possible confusion of the general public with regard to the profession. Although, some homeopaths make use of the modalities mentioned but that is not homeopathy.

Other misconceptions highlighted in this study was that homeopaths will study herbal medicine and natural medicine. Educational programmes can develop and establish clear guidelines for the public, to define the different forms of complementary and alternative medicine since herbal medicine and natural medicine are often confused as being apart of homeopathy. These misconceptions

are dangerous and they may limit the true potential of using homeopathic treatment effectively. It is dangerous because not all natural and herbal medicines are safe and reliable, and they may be perceived to be homeopathic medicines.

Attitudes towards homeopathy indicated that respondents were more likely to seek homeopathic treatment for minor and common ailments, and less likely to seek homeopathic treatment for more serious or debilitating conditions.

Despite the lack of knowledge and understanding of homeopathy, the majority of respondents (66.43%) indicated that homeopathy should be available for treatment for most conditions, 77.14% indicated that homeopathic treatment should be available in hospitals and clinics and 90.71% of respondents felt that there should be more awareness of homeopathy. This indicates that respondents are open and keen to use homeopathy as an alternative form of medicine and have a desire to learn more about homeopathy.

This study provides valuable information on the knowledge and attitudes of parents in the paediatric community towards homeopathy. It also indicates the lack of understanding and knowledge regarding this topic.

The researcher concludes that if basic homeopathic education is offered, to the public, this will definitely prompt individuals to seek homeopathic treatment in the future without skepticism.

6.2 Recommendations

- This study was limited to the Durban area. A larger study would be appropriate in order to obtain a wider perspective and a broader understanding of parents in the paediatric population. It is recommended that surveys be conducted in other areas of South Africa.
- This study was limited to registered facilities only. Further studies could be conducted amongst registered and unregistered facilities and the results be compared between the two groups of parents in the paediatric population.
- Education programmes for parents need to be formulated in order to clear up any misconceptions regarding homeopathy. Seminars and lectures could be offered by homeopaths at registered facilities in order to further educate parents of homeopathy. This could lead to an improvement of communication and co-operation.
- Use other methods of data collection - for example, interviews because of the low response rate.

- The researcher found that collection of the questionnaires timeously was difficult. Facilities should ensure prompt collection is recommended in the future therefore another form of data collection might help.
- There is a definite need for a concerted education initiative by homeopathic practitioners and the Homeopathic Association of South Africa (HSA) to provide the public with a basic homeopathic education so that they are able to understand what homeopathy is, the scope of treatment and the benefits of homeopathic treatment for children as a possible alternative to orthodox medicine.
- Advertising via the media (radio talk shows, short advertisements) to increase the exposure of homeopathy amongst the public about homeopathy is recommended.
- The following open ended questions should be included in the questionnaire: 'Would you like to know more about homeopathy?' and 'What information do you want on homeopathy?' In the future this would indicate the level of interest there is in homeopathy and what information is lacking by the public and what knowledge is available to the public.
- A different questionnaire could be drawn up that is able to elicit better responses from parents. The questionnaire could be simpler, shorter and

worded clearly with more direct questions. The introduction should include a definition page for difficult terminology. The questionnaire could have mainly 'Yes' and 'No' questions.

- There is also a definite need for advertising the Homeopathic Clinics at DUT and UJ, indicating to the public that homeopathy is available as a form of treatment.

REFERENCES

- Allopi, K. 2008. *A survey to determine the perceptions of nurses in the eThekweni Region Towards Homeopathy*. M. Tech (Hom) dissertation, Durban University of technology, Durban.
- Anello, S. 2007. *The Scope of Homeopathy* [online]
Available: <http://www.sueanellohomeopathy.co.uk/phdi/p1nsf/suppages/1958?opendocument&p...> [Accessed 2 April 2007].
- Bernard, H.R. 2000. *Social research methods: qualitative and quantitative approaches*. Thousand Oaks: Sage Publications Inc.
- Constitutional [online]. 2009
Available: www.answers.com/.../homeopathy-constitutional-prescribing
[Accessed 10 June 2009].
- Cuzzolin, L., Zaffani, S., Murgia, V., Gangemi, M., Meneghelli, G., Chameniti, G., and Benoni, G. 2003. Patterns and perceptions and complementary/ alternative medicine among paediatricians and patients' mothers: a review of literature. *European Journal of Paediatrics*, 162(12): 820-827

- *Department of Homeopathy Handbook*, 2009. Durban University of Technology.
- De Schepper, L. Dr 2001. *Hahnemann Revisited*. Santa Fe, United states: Full of Life Publications.
- De Villiers, L. 2006. *A prospective epidemiological pilot study to investigate the level of knowledge of homeopathy and its contextualization in pharmacy front shop assistants in the K.Z.N area*. M Tech (Hom) dissertation, Durban Institute of Technology, Durban.
- Durban City and Surrounding Suburbs, 2006 [online].
Available: <http://www.safarinow.com/destinations/durban/map.aspx>
[Accessed 3 March 2008].
- Ekins-Daukes, S., Helms, P., Taylor, M., Simpson, C., Mclay, J. 2005.
Paediatric homeopathy in general practice: where, when and why? *British journal of clinical Pharmacology*, 59(6); 743-749.
- Fink, A. and Kosecoff, J. 1985. *How to conduct surveys: a step-by-step guide*. Thousand Oaks: Sage Publications.

- Herscu, P. 2005. *The Homeopathic Treatment of Children*.
B. Jain Publishers.
- Homeopathic Association of South Africa. 2007. [Online] Available:
<http://www.hsa.org.za>. [Accessed December 2007].
- Kayne, S.B. 1997. *Homeopathic Pharmacy an Introduction and Handbook*.
Edinburgh: Churchill Livingstone.
- Khoosal, B.G. 2007. *A survey of the perceptions of homoeopathy by
registered Chiropractors in South Africa*. M Tech (Hom) dissertation,
Durban University of Technology.
- Leckridge, B. 1997. *Homeopathy in Primary Care*. United States: Churchill
and Livingstone.
- Lipschutz-Robinson, S., 1996. *Homeopathic Medicine for Children and
babies* [online]. Available: [http://www.shirleys-wellness-café.com/c-
homeo.htm](http://www.shirleys-wellness-café.com/c-homeo.htm) [Accessed 15 September 2006].
- Macquet, T. 2007. *The perceptions and awareness of homoeopathy at the
homoeopathic day clinic (H.D.C) amongst students at D.U.T.*
M Tech: (Hom) dissertation, Durban University of technology, Durban.

- Madsen, H., Anderson, S., Nielsen, R. Dolmer, B., Host, A., Damkier, A. 2003. Use of complementary/ alternative medicine among paediatric patients. *European Journal of Pediatrics*, 162(5); 334-341.
- Maharajh, D. 2005. *A survey to determine the perception of general practitioners and pharmacists in the greater Durban region towards homeopathy*. M. Tech. Thesis, Durban Institute of Technology, Durban.
- Myths About homeopathy, 2006 [online].
Available: <http://www.hpathy.com/basics/homeopathicmyths.asp>.
[Accessed 12 march 2008]
- Naicker, S. 2008. *A survey of Medical specialists perceptions and interactions with homeopathy*. M Tech: (Hom) dissertation, Durban University of technology, Durban.
- Nanduri, 2005. *Homeopathy Treatment Case Histories* [online].
Available: <http://www.drnanduri.com/casehistories.html>
[Accessed 16 July 2006].
- National Health Service. *Outcome of the Scoping for an Health Technology assessment in Homeopathy*. Scotland, 2006.

- National Institute of Health. 2009. What is CAM? [online].
Available: <http://nccam.nih.gov/health/whatiscam/>
[Accessed 7 June 2009].
- Nel, N. 2008. Personal Communication to S. Harripershad [4 March 2008].
- Nel, N. (nicknell@webmail.co.za), 20 March 2009. Statistics completed. E-mail to S. Harripershad. (sheromanih@yahoo.com).
- Paruk, F. 2006. *A survey to determine the perceptions that exist amongst pregnant adults towards the use of homoeopathy during pregnancy*.
M. Tech. Thesis, Durban Institute of Technology, Durban.
- Prinsloo, J. 2000. *Homeopathy on perspective*. [online] Available:
http://www.homeopathy.org.za/hom_in_per.htm, [Accessed 13 June 2009].
- Scheuren, F. 2004. What is a survey? *American statistical Association*.
Available: www.whatisasurvey.info/. [Accessed 5 June 2009].
- Sevak, N. 2002. *Homeopathy and Children* [online].
Available: <http://www.sweetpoison.com/health-articles/issue20.php>
[Accessed 15 September 2006].

- Shah, R. 2006. *Homeopathy For Your Child* [online].
Available: <http://www.askdrshah.com/childhel.htm>
[Accessed 15 September 2006].
- Sibinga, E., Ottolini, M., Duggan, A., Wilson, M. 2004. Parent –
Paediatrician Communication about Complementary and Alternative
Medicine Use for Children. *Clinical Paediatrics*, 43(4): 367-372.
- Simon, S. 2006. *Steve's attempt to teach stats*. [online]
Available: <http://www.childrensmarcy.org/stats/definitions/phi.htm>
[Accessed 15 June 2009].
- Small, D. 2004. *The perception of Homeopathy amongst Grade 12 learners
in Durban, South Africa*. M.Tech. Homeopathy dissertation, Durban Institute
of Technology.
- Spigelblatt, L. 2005. Homeopathy in the paediatric population.
Paediatrics & Child Health, 10(3): 173-177
- *Stedman's medical dictionary for the health professions and nursing*.
5th edition, 2005. United States of America. Lippincott, Williams and
Wilkins.

- Steinsbekk, A., Bentzen, N., Brien S. 2006. Why Do Parents Take Their Children to Homeopaths? – an Exploratory Qualitative Study. *Research in Complementary Medicine*, 13(2):88-93.
- Swayne, J. 1998. *Homeopathic Method: Implications for Clinical Practice and Medical Science*. Edinburgh. Churchill Livingstone.
- The Society of Homeopaths, 2005. *Homeopathic Treatment of Children*. Available: www.homeopathy-soh.org/about-homeopathy/HomTreatmentofChildren [Accessed 22 July 2006].
- Thorvaldsen, S 2007. *A survey to determine the perceptions of 3rd year medical students at the University of Cape Town and the University of KwaZulu Natal towards homeopathy*. M. Tech. thesis, Durban University of Technology, Durban.
- Turner, T.L. 2005. *A survey to determine the perceptions of veterinarians towards homeopathy and the utilization of homeopathy by veterinarians in KwaZulu-Natal*. M.Tech. (Hom) Durban Institute of Technology, Durban.
- Ullman, D 1991. *Discovering homeopathy: Medicine for the 21st Century*. Berkeley, California: North Atlantic Books.

- Ullman, D 1992. *Homeopathic Medicine for Children and Infants*. G.P. Putnam's Sons. New York.
- Ullman, D 2003. *Ten most frequently asked questions on homeopathic medicine*. [online] Available:
<http://www.homeopathic.com/articles/intro/tentopquestions.php>.
[Accessed 17 May 2008].
- Ullman, D., 2004. *Treating Children with Homeopathic Medicines* [online]. Available: <http://www.hpakids.org/holistic-health/articles/139/1>
[Accessed 21 August 2006].
- Ullman, R and Reichenberg-Ullman, J.1995. *The Patient's Guide to Homeopathic Medicine*. Edmonds, Washington: Picnic Point Press.
- Vithoulkas, G. 1987. *Homoeopathy, Medicine of the New Man*. New Dehli, India. B Jain Publishers.
- Vithoulkas, G. 1998. *The Science of Homeopathy*. New Delhi, India: B Jain Publishers.

- Vlieger, AM., Van de Putte, EM., Hoeksma, H. 2006. The use of complementary and alternative medicine in children at a general paediatric clinic and parental reasons for use. *Ned Tijdschr Geneesk*, 150(11):625-630.
- Von Bardeleben, C.L. 2009. *A survey of the perception of homoeopathy amongst parents of children aged 3 to 7 years old at pre primary schools in the Pinetown district*. M. Tech. (Hom) Durban University of Technology. Durban.
- Wikipedia. 2009. Entries for data clustering, dendrogram, Kendall's tau, Cramer's V coefficient, non-parametric statistics, Pearson's chi-square test, Phi coefficient. [online]. Available: <http://en.wikipedia.org/wiki/> [Accessed 5 June 2009].

LIST OF APPENDICES

- Appendix A – Permission letter to the Durban District Office
- Appendix B – Letter of Permission to the Principal of Facility
- Appendix C – Participant Information Letter
- Appendix D – Informed Consent Form
- Appendix E – Permission Letter
- Appendix F – Questionnaire
- Appendix G – Pamphlet
- Appendix H – List of Registered Crèches and Educarees
- Appendix I – Map of Durban

APPENDIX A
PERMISSION LETTER TO THE DURBAN DISTRICT OFFICE

Dear Sir / Madam

Re: List of the registered Crèches and Educarees for the Durban area

I am currently registered for a Master's Degree at the Durban University of Technology: Homeopathy. In order to obtain my degree I am required to complete a dissertation. My dissertation is a survey to determine the perceptions that exist amongst parents, with regards to their understanding of homeopathy and the use of homeopathic treatment for their children.

Title of survey: *A survey to determine the perceptions of parents in the central Durban area towards paediatric homeopathy.*

Requirements from the Durban District Office

In order to conduct this survey, I am requesting a list of the *registered Crèches and Educarees in the Durban area*. I will require the name of the facility, a contact number and an address. We would like to assure you that the information you offer is strictly confidential.

Purpose of this survey:

The purpose of this survey is to determine how informed parents are about the availability of homeopathy as a form of treatment for their children, and what their attitudes towards homeopathy may be so that the homeopathic profession may address these in the near future.

Your time and involvement will be greatly appreciated.

Contact Details:

Research student: Sheromani Harripershad Tel: 082 796 8585

Research supervisor: Dr. Corne' Hall
M. Tech. (Hom) Tel: 031 3732041

Co-supervisor: Dr. Ingrid Couchman
M. Tech. (Hom) Tel: 031 3732041

APPENDIX B
PERMISSION LETTER TO THE PRINCIPAL OF FACILITY

Dear Sir / Madam

Re: Permission to conduct a survey

I am currently registered for a Master's Degree at the Durban University of Technology: Homeopathy. In order to obtain my degree I am required to complete a dissertation. My dissertation is a survey to determine the perceptions that exist amongst parents, with regards to their understanding of homeopathy and the use of homeopathic treatment for their children.

Title of survey: A survey to determine the perceptions of parents in the central Durban area towards paediatric homeopathy.

The survey will attempt to highlight the following issues:

- Current perceptions that exist amongst parents with regards to homeopathy.
- To ascertain whether parents are aware of the benefits that homeopathy carries in the paediatric population.
- The use of homeopathic treatment for children as an alternative to allopathic medicine.
- We aim to bring knowledge of homeopathy to the community through this survey.

In order to complete the survey, I am requesting permission to approach parents whose children attend your facility, to fill out the attached questionnaire. Anonymity and confidentiality of information is guaranteed. Participants are not required to disclose their personal details.

What will be required of the participant?

- The participant will be requested to use approximately 10 minutes of their time to answer the questionnaire.
- The participant must answer all questions honestly and to the best of their knowledge.
- No participant will be obliged to answer the questionnaire.

What is required of the class instructor?

- Address parents giving them basic information about the study as outlined
- in this document.
- Hand out questionnaires to willing participants.
- Let participants know that the researcher will be available at the end of the session to address any questions that may arise.
- Collect completed questionnaires once they have been filled out.

Your time and involvement will be greatly appreciated.

I, _____, grant Sheromani Harripershad the permission to approach the above specified parents, whose children currently attend this facility.

Date

Contact Details:

Research student:
Sheromani Harripershad
Tel: 082 796 8585

Research supervisor:
Dr. Corne' Hall
M.Tech. (Hom)
Tel: 031 3732041

Co-supervisor:
Dr. Ingrid Couchman
M. Tech. (Hom)
Tel: 031 3732041

APPENDIX C
PARTICIPANT INFORMATION LETTER

Dear participant

Thank you for taking the time to participate in this study.

This questionnaire forms part of the research project required for the completion of my Master's Degree in Homeopathy at the Durban University of Technology.

Title of research:

A survey to determine the perceptions of parents in the central Durban area towards paediatric homeopathy.

Purpose of this study:

We aim to determine how informed parents are about the availability of homeopathy as a form of treatment for their children, and what their attitudes towards homeopathy may be. We hope the information we gather will help to identify areas of concern so that the homeopathic profession may address these in the near future.

What is required of the participant?

- All that is required is 10 minutes of your time to answer the attached questionnaire.
- Please answer all questions honestly and to the best of your knowledge.

Confidentiality:

We would like to assure you that the information you offer is strictly confidential, and no personal details are required of you. During the processing of the data the participants will be referred to by numbers. Participation in this study will render no risk to you the respondent.

Your time and involvement will be greatly appreciated.

Sheromani Harripershad
Research Student
Contact number: 082 796 8585

Dr. Corne Hall
M. Tech. (Hom)
Supervisor
Contact number: 031 3732041

Dr. Ingrid Couchman
M. Tech. (Hom)
Co-supervisor
Contact number: 031 3732041

APPENDIX D

INFORMED CONSENT FORM

Title of research:

A survey to determine the perceptions of parents in the central Durban area towards paediatric homeopathy.

Name of supervisors:

Dr. C. Hall - M. Tech. (Hom)

(031 - 3732041)

Dr. I. Couchman - M. Tech. (Hom)

(031 - 3732041)

Outline of research:

This study involves the completion of the "Perceptions of homeopathy in the treatment of children" questionnaire within facilities such as Crèches and Educare. The aim of this study is to determine the perceptions and attitudes that exist amongst parents with regards to their understanding of homeopathy, as well as the use of homeopathic treatment for their children, as a safer alternative.

Please circle the appropriate answer:

- | | |
|------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Have you read the patient information sheet? | YES/NO |
| 2. Have you had the opportunity to ask questions regarding this study? | YES/NO |
| 3. Have you received satisfactory answers to your questions? | YES/NO |
| 4. Have you had an opportunity to discuss the study? | YES/NO |
| 5. Have you received enough information about this study? | YES/NO |
| 6. Do you understand the implications of your involvement in this study? | YES/NO |
| 7. Do you understand that you are free to withdraw from this study? | |
| a.) At any time | |
| b.) You are not required to give a reason for withdrawing. | YES/NO |
| 8. Do you understand that no personal details are required of you, and that confidentiality will be maintained at all times? | YES/NO |
| 9. Do you agree to voluntarily participate in this study? | YES/NO |

Participant

Name: _____

Date: _____

Signature: _____

Research Student

Sheromani Harripershad

Contact number: 082 796 8585

If you have answered 'NO' to any of the above questions, please obtain the relevant information from the supervisors or myself before signing this form.

APPENDIX E **PERMISSION LETTER**

Permission was obtained to adapt the questionnaire from (Maharajh, 2005), (Paruk, 2006) and (Khoosal, 2007).

Contact Details:

Dr Dheepa Maharajh **079 5171458**

Tel: 031 400 8811

Cell: 079 517 1458

Email: Dheepa@ananzi.co.za

Dr Bharti Khoosal **073 5783977**

Tel: 0419662405

Cell: 073 5783977

Email: bhartihealth@yahoo.com

Dr Fatima Paruk **083 4455040**

APPENDIX F

PERCEPTIONS OF HOMEOPATHY IN THE TREATMENT OF CHILDREN - QUESTIONNAIRE

Modified from: Maharajh, D. [M. Tech. Hom., 2005], Paruk, F. [M. Tech Hom.,2006]
Khoosal, B.G. [M. Tech. Hom., 2007]

Part 1a: PERSONAL INFORMATION OF PARENT

Please answer by ticking the appropriate box in each category.

1. Gender:

Female	
Male	

2. Which age group do you fall into?

15-17 years	
18-24 years	
25-34 years	
35-44 years	
45 years and above	

3. Which race/ethnic group do you belong to?

(Please note for statistical purposes only)

Black	
Coloured	
Indian	
White	
Other (Please specify)	

4. What is your home language?

English		Sesotho	
Afrikaans		Setswana	
IsiNdebele		SiSwati	
IsiXhosa		Tshivenda	
IsiZulu		Xitsonga	
Northern Sotho		Other (Please specify)	

5. What is your occupational status?

Unemployed	
Employed part time	
Employed full time	
Self employed	
Housewife	
Student	
Other	

6. Your general health status:

Excellent	
Good	
Reasonable / Satisfactory	
Poor	

Part 1b: PERSONAL INFORMATION OF CHILD

Please answer by ticking the appropriate box in each category.

7. How many children do you have?

1	
2	
3	
4	
If more, please state:	

8. Which age group does your child / children fall into?

Tick more than 1 option if needed.

0-6 months	
7-12 months	
1-2 years	
2-3 years	
3-4 years	

9. Health status of your child:

Excellent	
Good	
Reasonable / Satisfactory	
Poor	

10. Is your child taking any medication at present?

Supplements	
Natural / herbal remedies	
Homeopathic remedies	
Over the counter / non-prescription medications	
Prescription medications	

Other, please specify: _____

Part 2: GENERAL KNOWLEDGE OF HOMEOPATHY

Please answer EACH statement by ticking the appropriate box:

11. Do you consider homeopathy to be a legitimate form of healthcare?

Yes	
No	
Unsure	

Comments: _____

12. Do you think a homeopath does the following?

	Yes	No	Not sure
Takes blood pressure			
Stimulates the skin with sharp needles			
Boosts the immune system			
Usually prescribes painkillers			
Prescribes medicines that are diluted and shaken			
Can diagnose the majority of diseases			
Makes use of medicines that can cause the same symptoms			
Makes use of antibiotic treatments			
Iridology / ophthalmic exam			
Prescribes plant extracts			
Emphasizes a healthy lifestyle			
Usually prescribes a diet			
Can treat the majority of diseases			
Prescribes and dispenses their own homeopathic medicine			

Comments: _____

13. What kind of procedures would you expect a homeopath to perform on his / her patient?
Tick more than 1 option if needed.

Checks height, blood pressure, pulse, temperature, weight	
Examines the chest	
Examines the stomach	
Listens to heart and breath sounds	
Request laboratory tests (Such as blood tests)	
Request special investigations (Such as X-ray)	
Stimulates the pressure points	
Surgery	
Tests muscles	
Tests nerves	
Other (Please specify)	

Comments: _____

14. For which of the following conditions and symptoms would you consider homeopathic treatment for your child?

	Yes	No	Not sure
<u>Abdominal problems</u> (<i>Such as</i> : pain, constipation, diarrhoea, vomiting)			
<u>Behavioural concerns and problems</u> (<i>Such as</i> : aggression, bed-wetting, eating problems, hyperactivity, lack of confidence, poor concentration, restlessness, temper tantrums)			
<u>Bone and Musculoskeletal problems</u> (<i>Such as</i> : growing pains, muscle pain, cramping)			
<u>Cancer</u>			
<u>Childhood complaints</u> (<i>Such as</i> : allergies, fever, colds and flu, colic, ear infections, headaches, sorethroat, tonsilitis, teething, loss of energy, tiredness, weakness, childhood insomnia, motion sickness)			
<u>Developmental disorders</u> (<i>Such as</i> : ADHD - Attention Deficit Hyperactivity Disorder, delayed speech, walking)			
<u>Growth related problems</u>			
<u>Infections</u> (<i>Such as</i> : bladder infection / urinary tract infection, chicken pox, measles, mumps)			
<u>Mental disorders</u> (<i>Such as</i> : childhood anxiety, fears, emotional changes)			
<u>Respiratory problems</u> (<i>Such as</i> : asthma, croup, cough)			
<u>Skin conditions</u> (<i>Such as</i> : eczema, rash, acne, psoriasis, cuts, bruises, burns)			
<u>Trauma</u>			

Do you wish to elaborate on any of the above conditions or symptoms?

15. Do you agree with each of the following statements regarding homeopathy?

	Yes	No	Not sure
Homeopathy has a scientific base			
Homeopathy has a religious base			
Homeopathy deals with the occult			
Homeopathic medicines do not contain chemical / drug substances			
Medicines are made from plants only			
For the medicines to work you must believe in it			
Medicines have been tested through trial and error over many years			
Homeopathic medicines have undergone clinical trials			
Homeopathy works only on conditions that are not treatable by conventional medicine			
Homeopathic medicines are safe to use during pregnancy			
Homeopathic medicines can be used during the labour process effectively and safely			
Homeopathic medicines are safe to use in newborns and infants			

Comments: _____

16. The average homeopathic consultation lasts approximately:

10-30 minutes	
30-60 minutes	
60-90 minutes	
90-120 minutes	
More than 2 hours	

Comments: _____

17. Which of the following subjects do you think a homeopath will study?

Herbal medicine	
Natural medicine	
Energy medicine	
Spiritual healing	
African traditional medicine	
Placebo	
Unsure	

Comments: _____

18. What level of qualification do you think a homeopath graduates with in South Africa?

1 year	
2 years	
3 years	
4 years	
5 years	
> 5 years	

19. Are you aware of the homeopathic training institution at the Durban University of Technology - DUT and the University of Johannesburg?

Yes	
No	
Unsure	

Part 3: YOUR EXPERIENCE WITH HEALTH CARE PROVISION

Please answer by ticking the appropriate box in each category.

20. At present who is your child's primary healthcare provider?

Tick more than 1 option if needed.

A general practitioner	
A medical specialist	
A paediatrician	
A homeopath	
A naturopath	
An ayurvedic practitioner	
Other	

Comments: _____

21. In your opinion, how applicable is EACH of the following statements for your healthcare provider(s) with respect to the treatment of your child?

	Always	Usually	Sometimes	Never
Listens to all you have to say about your child's illness or indisposition				
Talks to your child on a level which is understandable and applicable				
Is interested in your child as an individual				
Examines your child thoroughly				
Soon finds out what is wrong with them				
Diagnoses the majority of ailments correctly				
Knows of the best treatment for your child's illness or indisposition				
Discusses with you the treatment that he/she has in mind for your child				
Prescribes medicines that make your child feel better				
Prescribes medicines too easily				
Prescribes too many medicines				
Puts you at ease about your child's illness or indisposition				
Makes you feel as if he or she is hiding something from you about your child				
Merely wants to make money				

Comments: _____

22. Have you ever consulted a homeopath for your child?

Yes	
No	

If no, why? _____

If yes, why? _____

If your answer is "No" please skip questions 23. / 24. / 25. and go to question 26.

If your answer is "Yes" please skip questions 26. / 27.

23. In the past, how many times have you consulted with a homeopath for your child?

Once	
2 - 4 times	
5 - 9 times	
10 times or more	

Comments: _____

24. What made you decide to consult a homeopath for your child?

Conventional medicine failed	
Homeopathy is natural	
Personal recommendation, referral (GP, paediatrician, nurses, family, friend etc.)	
During pregnancy	
Homeopathic medicines are safe and have minimal side effects	

Comments: _____

25. Where did you first hear about homeopathy?

Relative, friend or acquaintance	
Media (newspaper, T.V., radio, leaflets)	
Doctor or paramedical services (paediatrician, pharmacist, nurse, chiropractor, etc)	
Not applicable - never heard of it	

Comments: _____

26. If you have never consulted a homeopath for your child what reason(s) would you give?

Never heard of homeopathy	
Have never needed their service	
Know too little about them	
Too expensive	
My medical aid scheme does not cover them	
I am unsure of their methods	
I have heard of their failures	
They are nothing but quacks	
Their training is not up to standard	

Comments: _____

27. If you have not consulted a homeopath for your child, would you be likely to do so in the future?

Yes	
No	
Unsure	

Comments: _____

28. If you answered yes to 27. above, for which reason might you consider consulting a homeopath, for your child?

If conventional medicine failed	
Homeopathy is natural	
During pregnancy	
Homeopathic medicines are safe and have minimal side effects	
Not applicable	

Comments: _____

29. Do you think homeopathic treatment should be offered for most medical conditions?

Yes	
No	
Unsure	

Comments: _____

30. Do you think homeopathic treatment should be available in hospitals and clinics?

Yes	
No	
Unsure	

Comments: _____

31. Do you think there should be more awareness of homeopathy?

Yes	
No	
Unsure	

Comments: _____

32. Which of the following best reflects your view of homeopathy?

I am uncomfortable with it, but it is effective for some patients	
It is an excellent mode of treatment	
It is quackery and does more harm than good	
I am not informed enough to comment	

Comments: _____

Thank you for participating in this survey.

**ISELEKO F: UHLA LOMKLAMO WOCWANINGO MAYELANA NOKULASHWA
KWEZINGANE NGENDLELA YEHOMEOPTHY**

Isuselwe ku: Maharaj, D. [M.Tech. Hom. (DUT), 2005], Paruk, F. [M.Tech. Hom. (DUT), 2006], Khoosal, B.G.

INGXENYE YOKUQALA (a): IMINININGWANE YOMZALI

Uyacelwa ukuba ubeke umaka kulelo bhokisi elilodwa olikhethayo eliqondene eliyiyona mpendulo.

1. Ingabe

Ungowesilisa	
Ungowesifazane	

2. Ingabe ukuliphi iqoqo leminyaka?

Kusukela ku15 kuya ku 17	
Phakathi kweminyaka engu 18 kuya ku 24	
Phakathi kweminyaka engu 25 kuya ku 34	
Phakathi kweminyaka engu 35 kuya ku 44	
Kusukela ku 45 kuyangaphezulu	

3. Uhlanga (Qaphela ubuzelwa isibalo kuphela)

uNsundu	
uyiKhaladi	
umNdiya	
umLungu	
Olunye uhlanga (uyacelwa ukuba uchaze)	

4. Ulimi lwasekhaya

IsiNgisi		ISetswana	
IsiBhunu		IsiSwati	
IsiNdebele		ITshivenda	
IsiXhosa		IXitsonga	
IsiZulu		ISesotho	
ISepedi		Olunye ulimi (uyacelwa ukuba uchaze)	

5. Ingabe wenzani kwezomsebenzi?

Angisebenzi	
Ngisebenza part time	
Ngisebenza ngokugcwele	
Ngiyazisebenza	
Ngiwunkosikazi wekhaya	
Ngiwumfundi	
Okunye (uyacelwa ukuba uchaze)	

6. Izinga lakho lezempilo

Lihle kakhulu	
Lihle	
Liyagculisa	
Alilihle	

INGXENYE YOKUQALA (b): IMINININGWANE NGENGANE

Uyacelwa ukuba ubeke umaka kulelo bhokisi elilodwa olikhethayo eliqondene eliyiyona mpendulo.

7. Ingabe unezingane ezingaki?

1	
2	
3	
4	
Uma ziningi zingaki?	

8. Ingabe ingane yakho ikuliphi iqoqo leminyaka?

Kusuka ezinyangeni 0 kuya kweziwu 6	
Kusuka ezinyangeni 7 kuya kweziwu 12	
Kusuka onyakeni 1 kuya kwewu 2	
Kusuka eminyakeni 2 kuya kwewu 3	
Kusuka ominyakeni 3 kuya kwewu 4	

9. Izinga lezempilo lengane yakho:

Lihle kakhulu	
Lihle	
Liyagculisa	
Alilihle	

10. Ingabe ikhona yini imithi ephuzwa ingane yakho njengamanje?

Amasupplements	
Amakhambi emvelo nemithi yemvelo	
Imithi yehomeopathy	
Imithi etholakala ezitolo eningayinikwanga udokotela	
Imithi eniyinikwe udokotela	

Okunye, uyacelwa ukuba uchaze :

INGXENYE YESIBILI:

ULWAZI OLWEJWAYELEKILE NGEHOMEOPATHY

Uyacelwa ukuba ubeke umaka kulelo bhokisi elilodwa olikhethayo eliqondene eliyiyona mpendulo.

11. Ingabe ithuba uyibona njengendle esemthethweni esebenzayo nekhona kwezokwelapha?

Yebo	
Cha	
Anginasiqiniseko	

Uvo lwakho:

12. Tshengisa ngezansi ukuthi ngokucabanga kwakho ngabe yenza msebenzi muni ihomeopath?

	YEBO	CHA	ANGINASO ISIQINISEKISO
Ihlola Ihayihayi (BP)			
Itshopa isikhumba ngezinaliti			
Ikhuthaza amandla omzimna okuzilwela nezifo			
Ivamise ukunikeza amaphilisi ezinhlungu			
Ivamise ukunikeza imithi exutshiwe yaxukuzwa kakhulu			
Iyakwazi ukuthola izifo eziningi			
Isebenzisa imithi leyo engaba nezimpawu ezifanayo			
Isebenzisa ama antibiotics ukwelapha			
Ibuka emehlweni esiguli ukuthola ukuthi siphethwe yini			
Ilapha ngamakhambi ezihlahla			
Ikhuthaza ezempilo nokuziphatha kwempilo			
Ivamise ukukutshela ngendlela okumele udle ngayo			
Yelapha izifo eziningi nezahlukenene			
Iyakubona, ikhiphe umuthi wehomeopathybese ikunika wona			

Uvo lwakho:

13. Iyiphi indlela yokuxilongwa ongalindela ukuba nini ihomeopath iyisebenzise esigulini sayo. Ungabeka umaka babe ngaphezulu kowodwa uma kudingekile.

Ukubanini ihlole ihayihayi (BP), ukushaya komthambo, izinga lokushisa komzimba, isisindo, ubude	
Ukuhlola isifuba nokuphefumula	
Ukuhlola isisu	
Ukunanini alalele ukushaya kwenhliziyo	
Ukufuna ucwaningo laselaboratory (njengokuhlolwa kwegazi)Ukuhlola izicubu zomzimba	
Ukucela ukubakwenziwe ucwaningo oluphezulu (njengama X-ray)	
Ukucindezela izindawo ezikhuthaza amapressure points	
Ukuhlinza	
Ukuhlola izicubu zomzimba	
Ukuhlola izinzwa zomzimba	
Okunye, uyacelwa ukuba uchaze	

Uvo lwakho:

14. Ingabe iziphi izimo noma izifo nezimpawu zokugula ongacabanga ukuthi imithi yehomeopathy ingaba usizo kakhulu ekwelapheni umntwana wakho, kuloluhla olungaphansi?

	YEBO	CHA	ANGINASO ISIQINISEKISO
<u>Izinkinga zesisu</u> (ezinjengo: ubuhlungu, ukusongelana, ukukhishwa isisu, ukuhlanza)			
<u>Indlela aziphatha ngayo umntwana nezinkinga ezihambisa nacho:</u> (njengo: ulaka, ukuchamela umbhede, izinkinga zokudla, ukutshakadula kakhulu, ukungazethembi, ukungakwazi ukuhlala entweni ngomcabango, ukusantuza, ukuhlale kancane kancane esethukuthela azinikine)			
<u>Amathambo nezinkinga zawo kanye nezicubu zomzimba:</u> (njengo: ubuhlungu bamathambo uma ekhula, ubuhlungu bezicubu zomzimba, inkwantshu)			
<u>Umdlavuzo</u>			
<u>Izikhazazo zezinkinga zabantwana</u> (njenge: isihlungu, imfiva, umkhuhlane, isisu, izindlebe, ikhanda, umphimbo obuhlungu, amathansela, ukuqhumisa, ukuphelelwa amandla, ukukhathala, ukubantekenteke, ukuqwasha kwabantwana, izinkinga zokunyakaziswa)			
<u>Izinkinga zokukhula</u> (njenge: ADHD-Attention Deficit Hyperactivity Disorder, ukuphuza ukukhuluma, inkinga yokuhamba)			
<u>Izinkinga ezibangelwa ukukhulu nemithelela yazo</u>			
<u>Ukuhlaselwa amagciwane</u> (njenge: amagciwane esinyeni/ nasesithweni sonke sokuchama, Uchiken pox, isimungumungwane, uzagiga)			
<u>Izinkinga zengqondo</u> (njengo: uvalo lwabantwana, ukwesaba, ukushintshashintsha komoya)			
<u>Izinkinga zomhhume wokuphefumula</u> (njenge: isifuba, ugonqogonqo, ukukhwehlela)			
<u>Izinkinga zesikhumba</u> (njenge: i-eczema, amaqhuquva, i-acne, i-psoriasis, ukusikeka, ukophela ngaphakathi, ukusha)			
<u>Ukushaqeka</u> (trauma)			

Uvo lwakho:

15. Ingabe uyavumelana yini nalezizitatimende ezilandelayo mayelana nehomeopathy?

	YEBO	CHA	ANGINASO ISIQINISEKISO
Ihomeopathy inesisekelo sezesayensi			
Ihomeopathy inesisekelo sezenkolo ethize			
Ihomeopathy inesisekelo sezinkoleloze			
Imithi yabo ayinawo amakhemikhali kanye namadrug			
Imithi yabo yenziwa ngezihlahla kuphela			
Ukuze imithi yabo isebenze kuwe kumele ukholelwe kuyo kuqala ukuthi izosebenza			
Imithi yabo ihloliwe kaninginingi iminyaka ngeminyaka ukuthola amaphutha			
Imithi yehomeopathy iyacwaningwa ukusebenza kwayo kaninginingi			
Imithi yehomeopathy isebenza kuphela kulezo zifo ezingalapheki kulemithi ejwayelekile			
Imithi yehomeopathy iphephile ekusetshenzisweni nakubantu abakhulelwe			
Imithi yehomeopathy ingasetshenziswa nalapho umuntu esebeletha noma eteta khona ngokuphepha okukhulu			
Imithi yehomeopathy ingasetshenziswa ngokuphepha ebantwaneni abasanda kuzalwa nakwabancane			

Uvo lwakho:

16. Isilinganiso sesikhathi esithathwayo sokubonwa yihomeopath:

Imizuzu engu 10 kuya kwengu 30	
Imizuzu engu 30 kuya kwengu 60	
Imizuzu engu 60 kuya kwengu 90	
Imizuzu engu 90 kuya kwengu 120	
Kungaphezulu kwamahora angu 2	

Uvo lwakho:

17. Ingabe yiziphi izifundo ocabanga ukuthi i-homeopath ingazifunda?

Ukwelapha ngamakhambi	
Ukwelapha ngendlela yemvelo	
Ukwelapha ngendlela yamandla	
Ukwelapha ngendlela yokukamoya	
Ukwelapha ngendlela yesintu	
Ukwelapha ngesithako esingenabuthi	
Anginasiqiniseko	

Uluvo/umbono wakho:

18. Ingabe yiliphi izinga lokufunda nokuqeqeshwa ihomeopath enalo. Iziqu zemfundo ephakeme. Ngokucabanga kwakho ingabe kuthatha iminyaka emingaki ukubanini uqeqeshelwe futhi uthole iziqu kulomkhakha wehomoeopathy ukuze uthole ukubanini ubhalise ngokusemthethweni njengodokotela wayo kuleli laseNingizimu Afrika?

Unyaka owodwa	
Iminyaka emibili	
Iminyaka emithathu	
Iminyaka emine	
Iminyaka emihlanu	
Iminyaka engaphezulu kweyisihlanu	

19. Ingabe unalo yini ulwazi lwesikhungo esiqeqesha loluhlobo lodokotela behomeopathy esibizwa ngokuthi yi Durban University of Technology - DUT kanye ne University of Johannesburg?

Yebo	
Cha	
Anginasiqiniseko	

INGXENYE YESITHATHU: ISIPILIYONI SAKHO NGABANIKEZIMPILO

Uyacelwa ukuba ubeke umaka kulelo bhokisi elilodwa olikhethayo eliqondene eliyiyona mpendulo.

20. Okwamanje ubani onakekela ezempilo zomntwana wakho

Igeneral practitioner	
Imedical specialist	
Udokotela wezingane	
I-homeopath	
I-naturopath	
Owenza i-ayurveda	
Omunye, chaza	

Uluvo/umbono wakho:

21. Ngokubona kwakho ingabe uthini umbono wakho kulokhu okushiwo yilezizitatimende ezingezansi mayelana nomnikimpilo wengane yakho umakulashwa umntwana wakho?

	NJALO	KUJWAYELE	NGEZINYE IZIKHATHI	AKUKAZE KWENZEKI
Uhlalela konke engikushoyo ngokungaphatheki kahle komntwana wami nokugula kwakhe				
Ukhulumisana nomntwana wami ngendlela ezwakalayo neqondwa umntwana				
Uyikhathalele ingane yami njengomuntu naye ohlukile				
Uxilonga umntwana wami ngokupheleleyo				
Usheshe athole ukuthi yini eyinkinga kumntwana wami				
Uyazigagula izifo eziningi ngaphandle kokwenja iphutha				
Uyazazi futhi ukuthi zonke izifo eziphethe umntwana wami zilashwa kanjani				
Uyabonisa axoxisane kanye nami nalokho acabanga ukukunika umntwana wami				
Ukhipha leyomithi eyenza umntwana wami abengcono				
Uyikhipha kalula imithi				
Ukhipha imithi eminingi ngesikhathi esisodwa				
Uyakukhulula emphefumulweni ngokubonisa nawe ngesifo esiphethe umntwana wakho				
Uye enze sengathi kukhona akufihlela khona mayelana nokugula okuphethe umntwana wakho				
Kubasengathi uzifunela imali nje kuphela kinina				

Uluvo/umbono wakho:

22. Ingabe usuke wahambisa ingane yakho ukuba iyobona ihomeopath ngaphambilini?

Yebo	
Cha	

Uma uthi Cha, kungani?

Uma uthi Yebo, kungani?

Uma impendulo yakho kungu “Cha” ngicela uyeqe imibuzo 23. / 24. /25. bese uqhubekela kumbuzo 26.

Uma impendulo yakho kungu “Yebo” ngicela uyeqe imibuzo 26. / 27.

23. Zingaki izikhathi ngaphambilini osuke wabona ngazo ihomeopath lapho usuke uyise umntwana wakho?

Kanye	
Ka 2 kuya ku 4	
Kawu 5 kuya ku 9	
Kawu10 nangaphezulu	

Uluvo/umbono wakho:

24. Yini eyenza wakhetha ukuhambisa umntwana wakho ukuba abonwe ihomeopath?

Imithi eyejwayelekile yayehluleka ukumlapha umntwana wami	
Indlela yeHomeopathy ingeyemvelo	
Bangiyalela mathupha (GP, udokotela wezingane, unesi, umndeni, umngani)	
Ngenkathi ngikhulelwe	
Ingenxa yokuthi imithi yamahomeopath iphephile futhi ayinazo izimpawu ezimbi eziningi emveni kokuyithatha	

Uluvo/umbono wakho:

25. Wezwa kuphi okokuqala ngehomeopathy?

Ngesihlobo, ngomngani, ngomlingani	
Ngomsasazo (amaphephandaba, umabonakude, umsakazo, amapheshana)	
Ngodokotela noma umsebenziwezabosizo lokuqala (udokotela wabantwana, ipharmacist, unesi, ichoropractor nokunye)	
Akunampendulo ngoba angikaze ngizwe nhlobo ngayo	

Uluvo/umbono wakho:

26. Uma wena qobo ungakaze uyihambise ingane yakho ukuba ibonwe ihomeopath, yisiphi isizathu ongasinikeza esenza lokhu?

Yingoba angikakaze ngizwe nhlobo nje nge homeopathy	
Yingoba angikakaze nje ngiludinga usizo lwabo	
Yingoba ngazi okuncane ngabo	
Yingoba bayadula kakhulu	
Yingoba iMedical aid engikuyo ayizikhokheli lezizindleko	
Yingoba angiziqondisisi izindlela zokwelapha kwabo	
Yingoba sengizwe kanini ngokungaphumeleli kwabo	
Yingoba abasilutho nje, bayimbudane	
Ukuqeqeshwa kwabo akukho ezingeni eligculisayo	

Uluvo/umbono wakho:

27. Uma wena qobo ungakaze uyihambise ingane yakho ukuba ibonwe ihomeopath, ingabe ungaba naso yini isifiso sokunanini untwana wakho abonwe yihomeopath?

Yebo	
Cha	
Anginasiqiniseko	

Uluvo/umbono wakho:

28. Uma ngabe uphendule ngo yebo kumbuzo 27. ngenhla, isiphi isizathu esingakwenza ufune ukubanini untwana wakho abonwe yihomeopath?

Uma ngabe izindlela ezejwayelekile zokwelapha zihluleka	
Indlela yeHomeopathy ingeyemvelo	
Uma sengikhulelwe	
Ingenxa yokuthi imithi yamahomeopath iphephile futhi ayinazo izimpawu ezimbi eziningi emveni kokuyithatha	
Akukho engingalusho	

Uluvo/umbono wakho:

29. Ingabe kufanele yini ukubanini indlela yokwelapha yehomeopathy yethulwe njengendlela eyelapha izifo ezinhlobonhlobo ngempumelelo?

Yebo	
Cha	
Anginasiqiniseko	

Uluvo/umbono wakho:

30. Ingabe kufanele yini ukubanini indlela yokwelapha yehomeopathy yethulwe njengendlela eyelapha izifo ezibhedlela nasemitholampilo?

Yebo	
Cha	
Anginasiqiniseko	

Uluvo/umbono wakho:

31. Ingabe kumele yini ukubanini kubenokuqwashisa ngolwazi ngehomeopathy?

Yebo	
Cha	
Anginasiqiniseko	

Uluvo/umbono wakho:

32. Yikuphi kulokhu okulandelayo okuveza ngokusobala nokucacileyo ngemibono yakho ngehomeopathy?

Angiyikhonzisisile futhi angiyizwa kahle, kepha iyabasebenzela abanye abagulayo	
Iyindlela yokwelapha esezingeni eliphezulu kahulu	
Iymbudane nje futhi yenza umonakalo omkhulu kunokusiza	
Anginalwazi olwanele olungangenza ngiphawule ngayo	

Uluvo/umbono wakho:

Ngiyabonga kakhulu ngokuzibandakanya kulolucwaningo.

APPENDIX G

Pamphlet

What happens when you see a homeopath?

In the assessment of you, the patient, homeopaths will take into account the range of physical, emotional and lifestyle factors in order to prescribe the right medicine(s). To stimulate your body's own healing process, a remedy closest to your individual symptom picture is prescribed. Healing begins from within you body, strengthening your health and immune system, without any danger of damaging side effects. As a primary-contact practitioner, a homeopath manages all aspects of patient healthcare, diagnosis, treatment and management, including referral and communication with other healthcare professions and institutions.

Career description in South Africa

Homeopathy is a legally recognized profession and is becoming increasingly important part of the South African healthcare provision. It is a medical approach that respects the wisdom of the body. It is an approach that can be potentially very effective in treating the new types of diseases that are afflicting us now and in the future.

Contact details for a registered Homeopath in your area may be obtained from the Homeopathic Association of South Africa; www.hsa.org.za
Email: info@hsa.org.za

APPENDIX G

Durban University of Technology **Homeopathic Day Clinic**

Ritson Road Campus
Tel: (031) 3732041

Consulting Days:
Monday - Friday
1:00pm - 4:30pm

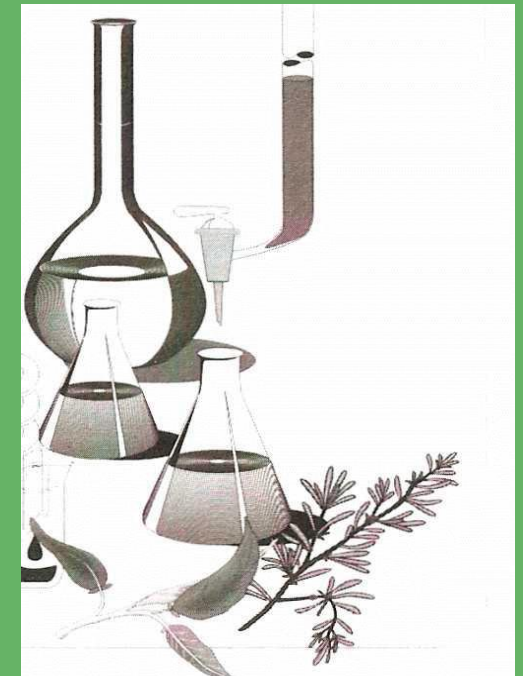
RATES INCLUDING STANDARD **HOMEOPATHIC MEDICATION:**

GENERAL PATIENT
NEW PATIENT: R1 00.00
FOLLOW UP: R70.00

PENSIONERS/STUDENTS/
CHILDREN:
NEW PATIENT: R80.00
FOLLOWUP: R60.00

*For more information on
homeopathy in South Africa
visit: **www.hsa.org.za***

HOMEOPATHY



What is homeopathy?

The word “homeopathy” explains the basis of this safe, effective and increasingly popular form of medicine. “Homeo” means “like” and “pathos” means disease. This means, a substance that can produce a set of symptoms if taken in toxic amounts by a healthy person, will cure those same symptoms if they appear in a diseased person.

Homeopathy is an alternative method of treatment, based on the Law of Similars, namely '*Like Cures Like*'. The truth of this law was discovered by a German scientist Dr.Samuel Hahnemann in 1796, and has been verified experimentally and clinically for 200 years.

Homeopathy is a revolutionary, natural medical science. Homeopathy is a gentle, holistic system of healing and an effective system of medicine suitable for everyone, young and old. The remedies are prepared from natural substances to precise standards and work by stimulating the body's own healing power.

Principles of Homeopathy

1. *“Like cures like”.*
2. *A substance having the power to produce a symptom in toxic amounts will cure a diseased person if his or her symptom picture is similar.*
3. *Homeopathy treats the person and not the disease. Each person must be treated as a totality, because each will be of a different temperament, and will manifest his or her disease symptoms in a unique and individual way.*
4. *Healing takes place from within outwards, with an increased sense of well being often occurring before improvement of the physical symptoms.*

Why should homeopathy be the first choice of therapy?

Homeopathy is highly scientific, logical, safe, quick and extremely effective method of healing. It offers long lasting to permanent cure, treating the disease from its roots, for most of the ailments.

Homeopathy is the most rational science with respect to its concepts of health, disease and cure. Homeopathy does not treat superficially by just driving away the symptoms but heals the patient from within.

Are homeopathic remedies safe?

Homeopathic remedies are a unique, potentized energy medicine, drawn from the plant, mineral and animal worlds. They work by gently boosting the natural energy of the body, and are very safe, even for pregnant and sensitive patients. There is no danger of addiction or toxicity.

Homeopathy: Ideal for Infants and Children

Most of the children's ailments like Colds, Cough, Fever, Vomiting, Diarrhoea, Dysentery, Colic, Tonsillitis, Bronchitis, Asthma, Measles, Chickenpox, Mumps, Dentition problems, etc., could be very effectively and quickly treated with homeopathy without producing any side effects. Homeopathic pills being sweet in taste, is willingly ingested by children.

Indeed, homeopathy is child-Friendly !

Homeopathy is also effective in temperament and behavioral problems seen commonly in children like irritability, obstinacy, temper-tantrums, fears, phobias, destructiveness; and thumb- sucking, nail biting, bed-wetting; as well as in mentally & physically backward children.

Homeopathy: A complete system of medicine

Homeopathy is not limited to certain diseases but is universally applicable to all kinds of diseases.



Appendix H

List of Registered Crèches and Educares

Durban central

Inkulisa Day Care 176 West Street	Ethel 072 5367670
Bumble Bee 101 Victoria Embankment	Nathaniel 031 3063826
Claire Ellis Brown, South Beach 79 Hospital Road	Nora Saneka 031 3370057
Cinderella Day Care, Halvert House 412 Smith Street	Mrs Chetty 031 3071114
Beatis Street Educare	031 3098109

Berea

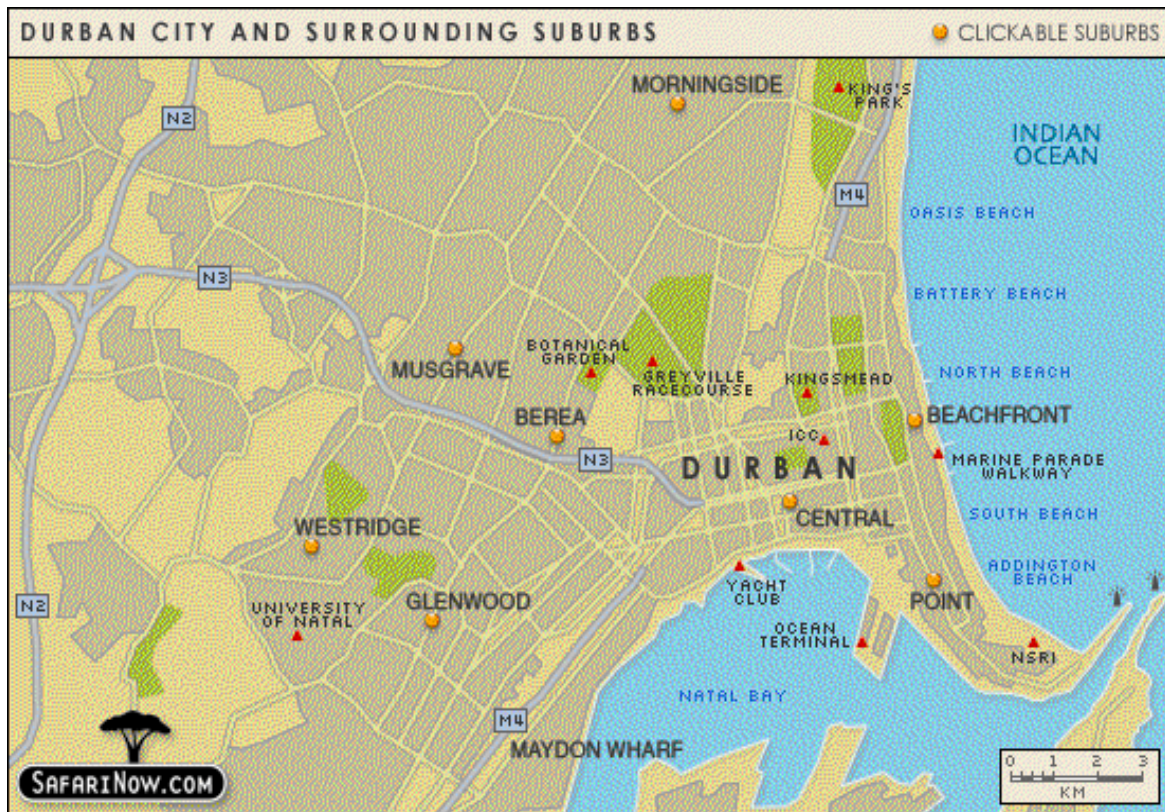
Berea Pre-Primary Aftercare Centre 122 Botanic Gardens Rd	Mrs Pretorius 031 2026910
Joyce Broadhead Pre-Primary School 62 Silverton Road	Suzana 031 2023427
Three Tops Pre-Primary School 74 Silverton Road	Carolyn 031 2017305
Entabeni Hospital Play Centre 148 Ridge Road	Nicky 031 2041300

Morningside

Benny Bunny Play Centre 276 Percy Osborn Road	Wendy 031 303 4997
AKA Mighty Minds 95 Livingstone Road	Bhavna 082 8518536
We Friends Pre-School 48 Gordon Road	Nicky 031 3031787
Little Bears Play School 18 Rose Bank, Morningside	Jenifer 031 2073836

Appendix I

MAP OF DURBAN



(Durban City and surrounding suburbs, 2006)