

Transforming Healthcare Systems: Research-Based Integration of Homoeopathy and Community Medicine for Preventive Care and Lifelong Wellness

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Abstract

Healthcare systems are finding more ways to integrate to enhance preventive care, treat more efficiently, and adopt patient-centred health management. Other complementary systems of therapy like homoeopathy have found their place in the community healthcare through their high use and perceived contribution to preventive and supportive care. The objective of this study was to determine the level of awareness, the level of use, and the level of perception towards integration of homoeopathic therapeutics in the preventive health care services. This was a cross-sectional questionnaire study that was carried out among 150 adult participants in the rural, semi-urban, and urban communities. A structured questionnaire that included demographic features, preventive health behaviours, awareness and use of homoeopathic medicine, utilization of community health care services and attitudes towards integrative healthcare models was used to collect the data. A chi-square test and descriptive statistics were used to test the relationship between awareness and use of homoeopathic therapeutics. The findings revealed that 77.3% of the respondents had heard about homoeopathic medicines, and 51.3% had used them. The engagement in preventive behaviours was inconsistent with 58.7% of the respondents reporting on preventive health check-ups. About half of the participants reported the availability of community healthcare services but only 30.0% had accessed the healthcare services. The attitudes to the inclusion of homoeopathy in the community healthcare were rather moderate with a good part of the respondents stating about careful support of the approaches towards integrative healthcare. Chi-square test revealed a strong relation of awareness and use of homoeopathics medicines ($p < 0.05$). In general, the results show that there is a relatively high level of awareness, but the use of homoeopathy is not steady, which demonstrates the need to provide the population with education on health and enhance the access to preventive care services.

Keywords: Homoeopathy, Preventive Healthcare, Community Medicine, Integrative Healthcare, Therapeutic utilization

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1. Introduction

Healthcare systems in the world are experiencing a tremendous change as they strive to meet the growing disease burden, rising cost of healthcare, and the desire of more affordable and patient-centered healthcare services. Many nations have responded to these issues by initiating studies to develop integrative healthcare models that could integrate traditional and conventional medical care with a complementary and traditional

therapeutic regimen. These integrative models will facilitate better preventive health care service delivery, better access to treatment, and holistic health care management of various populations. CAM systems such as ethnomedicinal and traditional medicine practices remain a significant part of healthcare practices in a number of areas, especially in those countries with a long history of using alternative medicine¹.

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The homeopathy is a kind of the complementary therapeutic system that has become very popular due to its use in the past and also due to its current presence in the modern healthcare facility. Homoeopathic medicine is generally used by the patients who are interested to receive alternative or complementary therapy to chronic diseases, prophylaxis, and overall care. Integrative healthcare systems in several countries have homeopathy co-existing with traditional medicine suggesting a growing interest in multidisciplinary patient care systems². The current trend of the use of complementary therapies in clinical practice has prompted researchers and policymakers to analyze how such systems can be integrated in a responsible manner into the contemporary healthcare delivery and still ensure patient safety and therapeutic efficacy³.

Homoeopathic medicines are based on the therapeutic exploitation of very dilute medicinal preparations produced out of natural substances such as plant, mineral and animal products. These preparations come in a typical dosage of oral globules, tablets or fluid solutions. Even though the scientific discussion of the mechanisms of action of the homoeopathic preparations remains a pressing issue, there have been theoretical approaches indicating that even ultra-low doses of the homoeopathic preparations can influence the biological adaptive systems through a complex process of physiological responses⁴. Modern studies have also been conducted to examine the possibility of using homoeopathic interventions as an adjunct in the clinical setting and especially in the fields where complementary therapy is demanded by patients in addition to conventional medical care⁵.

The role of community medicine plays an important role in the provision of preventive medical care and provision of the people with relevant health services. This is since community healthcare systems are usually the primary contact point among the health care providers and individuals particularly in rural and semi-urban areas where there may not be strong health care infrastructures. These systems emphasize health education, disease prevention, and also the early diagnosis of diseases and also the accessibility of therapeutic interventions. The Complementary therapeutic systems introduced into the community healthcare systems may potentially broaden the range of potential healthcare and assist in providing healthcare in a more personalized and culture-sensitive form. It is also capable of increasing the number of people who will participate in preventive health programs and enhancing holistic health management practices via such integrations⁶.

Several research studies have so far found the applicability of the homoeopathic medicine in modern medical practice. Research studies that examine the application of the complementary medicine have shown that a high proportion of population in most countries use the complementary therapies as either alternative or complementary medicine⁷. Other studies have focused

on the significance of studying the patient perception and the practitioner view on the role of integrating the complementary medicine in the primary healthcare systems⁸. These studies indicated that perceived therapeutic advantage, patient preferences and cultural beliefs can be of significant importance in deciding whether integrative healthcare methods can be adopted and utilized or not.

Though, integrative healthcare models have attracted interest, much remains to be done on the integration of the application of complementary medicine into the community health system. Recent research which has evaluated quality and extent of the homoeopathic clinical research studies have indicated that more research on its applications and evidence base is needed⁹. At the same time, new clinical literature has described a number of clinical applications of homeopathy within the contemporary clinical patterns, which has fueled the further debate on its potential use in integrative healthcare systems¹⁰.

In this respect, the information of community awareness, patterns of utilisation and attitudes to homoeopathic therapeutics can be considered useful in establishing the sustainability of integration of complementary therapies in the preventive health care systems. The perspectives of the people on the complementary medicine as a whole may influence the health care utilization behavior, policy acceptance of the integrative healthcare and the policy in the general community health program.

Therefore, the presented study was carried out with an aim of assessing the community knowledge and application of homoeopathic therapeutic in prevention treatment. The study also involved the perception of the individuals concerning the incorporation of homeopathy in the community healthcare service provision, and the extent to which the integrative model of treatment delivery was accepted. This study will assist in augmenting the current understanding of the role of complementary therapeutic systems in the prevention systems through the analysis of the responses to the questionnaires filled by the participants of the community regarding their perception and utilization of the systems. The major objectives of the study are:

1. To assess the level of community awareness, utilization patterns, and perceived effectiveness of homoeopathic therapeutics in preventive healthcare.
2. To evaluate community perceptions and acceptance regarding the integration of homoeopathy within community healthcare systems for preventive care.

2. Materials and Methods

2.1 Study Design

The conducted research was a cross-sectional observational study, which was conducted in form of cross-sectional questionnaires, and it was conducted to determine the perceptions of the population and their therapeutic pattern of using homoeopathic therapeutics as one of the preventative healthcare systems. The research goal entailed determination of community

knowledge and use and perception of the inclusion of homoeopathic drugs into community health care. Longitudinal survey approach was selected to collect consistent information of the respondents of different demographic backgrounds. This design was useful to measure the correlation between demographic variables, prevention medical practices, and embracement of an integrative system of therapeutic delivery. The data collection method based on the cross-sectional research design was effective in collecting data at a specific time and performing descriptive and inferential analysis.

2.2 Study Population

The respondents were sampled as 150 adults of rural, semi-urban and urban societies. The research incorporated persons who were above 18 years and would attend and be part of the research on voluntary grounds. The subjects of the study were selected to capture the divergent educational, occupational and socioeconomic backgrounds so as to capture the perceptions of the community level towards preventive healthcare and homoeopathic treatment. The study did not include the participants who did not consent to participate in the study or provided incomplete responses to the questionnaires. Informed consent was obtained and the goals of the research explained to the respondents before the exercise. The final sample was the participants of different demographic characteristics.

2.3 Questionnaire Development

The questionnaire is a structured questionnaire, which is designed based on the models of community health research and the previous research concerning therapeutic awareness and the use of healthcare. The questionnaire was broken down into seven sections and these sections included demographic, health, preventive health care, awareness and consumption of the homoeopathic medicines, community health care services, attitudes concerning the provision of integrative therapies and acceptance of integrative health care systems. The perception based questions were conducted using a five-point Likert scale, which went in the range of strongly disagree to strongly agree. The instrument was also open ended which would require qualitative opinions regarding the inclusion of homeopathy in community health care and suggestion on methods of enhancing preventive health care.

2.4 Data Collection

The information has been gathered using structured questionnaires that were used with the participants in community contexts. Respondents were contacted in residential neighborhoods and the community places and informed about the objective of the research beforehand. The respondents were made to participate on a voluntary basis and their participation was guaranteed to be anonymous and confidential. Questionnaires were filled by each participant, but clarification was given to respondents where necessary to get the right response. Any questionnaire that was filled was re-examined to ensure that the questionnaires were complete. The answers obtained were then coded and put in a spreadsheet database where they were to be statistically processed.

2.5 Statistical Analysis

Data that were collected were coded and analyzed with descriptive and inferential statistics. The analysis of demographic features, awareness, and use behaviour and perceptions of the community towards homoeopathic therapeutics were summarised using frequency distributions and percentages. The cross-tabulation analysis was conducted to analyze the correlation of chosen variables including awareness, use of homeopathy and acceptance of integrative healthcare systems. Chi-square (χ^2) test was used to find the statistically reliable relationships between the categorical variables, such as demographic variables and attitudes of integration of homoeopathic therapeutics. The p value of less than 0.05 was regarded as being significant. The statistical tools adopted in data analysis were Microsoft Excel.

3. Results

3.1 Demographic Characteristics

A total of 150 participants completed the questionnaire. The age distribution indicated that younger adults represented the majority of the sample, with 18–25 years accounting for 25.3% (n=38) and 26–35 years accounting for 27.3% (n=41) of respondents. Participants aged 36–45 years represented 18.7% (n=28), while 46–55 years and ≥ 56 years accounted for 14.0% (n=21) and 14.7% (n=22), respectively. The gender distribution included 51.3% males (n=77), 46.0% females (n=69), and 2.7% individuals identifying as other (n=4). Respondents were relatively balanced by residence, with rural participants comprising 36.0% (n=54), semi-urban 33.3% (n=50), and urban 30.7% (n=46), as also shown in Table 1.

Table 1. Demographic characteristics of study participants (n = 150)

Variable	Category	n	%
Age group (years)	18–25	38	25.3
	26–35	41	27.3
	36–45	28	18.7
	46–55	21	14.0
	≥ 56	22	14.7
Gender	Male	77	51.3

Residence	Female	69	46.0
	Other	4	2.7
	Rural	54	36.0
	Semi-urban	50	33.3
	Urban	46	30.7

3.2 Preventive Healthcare Practices

Preventive healthcare behaviors varied among participants. A total of 58.7% (n=88) reported undergoing preventive health check-ups, whereas 41.3% (n=62) indicated they did not regularly participate in such check-ups. Regarding lifestyle behaviors, 35.3% (n=53) reported regularly following healthy lifestyle practices including exercise and balanced diet, while 38.7% (n=58) practiced them occasionally, as also presented in Figure 1. Approximately 20.0% (n=30) reported rarely following healthy lifestyle behaviors and 6.0% (n=9) reported never doing so. Chronic or recurrent health conditions were reported by 41.3% (n=62) of respondents, whereas 58.7% (n=88) indicated no chronic health problems.

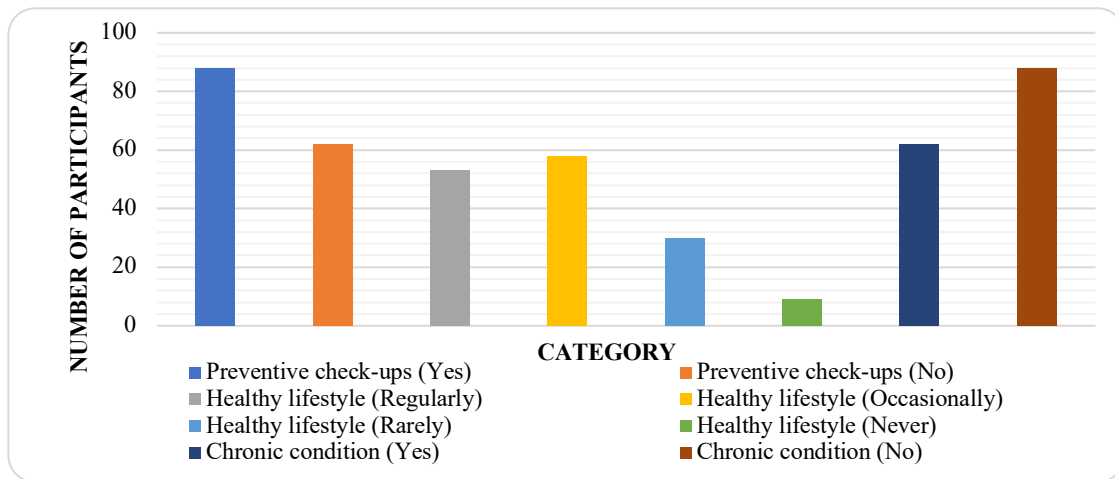


Figure 1. Preventive Healthcare Practices (n=150)

3.3 Awareness and Utilization of Homoeopathic Therapeutics

Awareness of homoeopathic medicines was reported by 77.3% (n=116) of respondents, whereas 22.7% (n=34) indicated they were not aware of homoeopathic treatments. Among the total participants, 51.3% (n=77) reported previous use of homoeopathic medicines, while 48.7% (n=73) had never used them. Participants reported using homeopathy for various conditions, including acute illnesses, chronic diseases, preventive care, and general wellness. In terms of perceived effectiveness, 21.3% (n=32) considered homoeopathic medicines effective, while 7.3% (n=11) rated them very effective (Figure 2). Neutral perceptions were reported by 23.3% (n=35), whereas 0.7% (n=1) considered them ineffective.

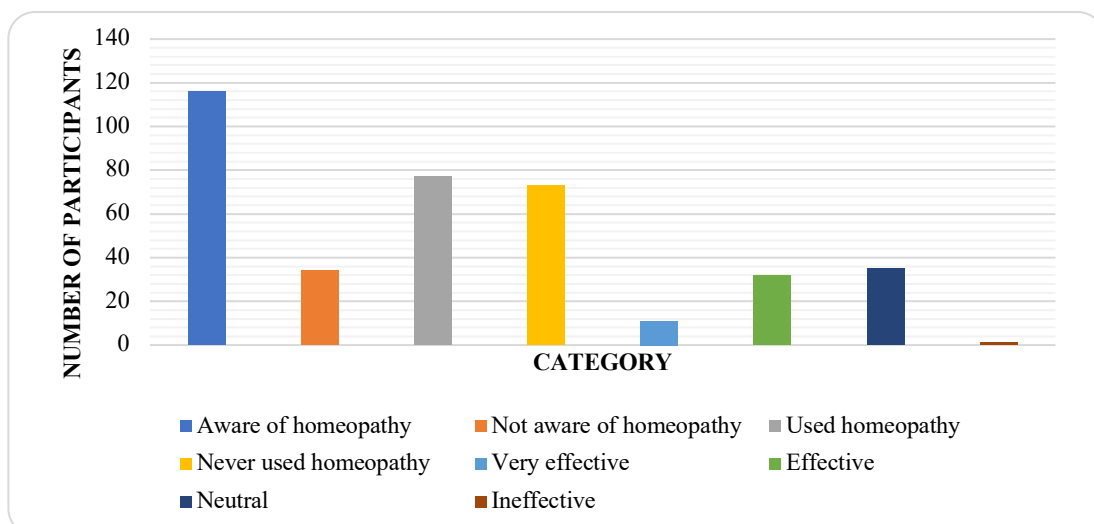


Figure 2. Awareness and Utilization of Homoeopathic Therapeutics (n=150)

Further analysis indicated that individuals who were aware of homoeopathic medicines were more likely to report previous use of such treatments compared with those who were unaware. Chi-square analysis demonstrated a statistically significant association between awareness and utilization of homoeopathic medicines among participants ($\chi^2 = 24.63, p < 0.001$), suggesting that awareness may play an important role in influencing the adoption of homoeopathic therapeutics within community healthcare settings, also presented in Table 2.

Table 2. Association between awareness and utilization of homoeopathic medicines among participants (n = 150)

Awareness of Homeopathy	Used Homeopathy n (%)	Not Used n (%)	Total n (%)
Aware	77 (66.4)	39 (33.6)	116 (77.3)
Not aware	0 (0.0)	34 (100.0)	34 (22.7)
Total	77 (51.3)	73 (48.7)	150 (100)

Chi-square test: $\chi^2 = 24.63, p < 0.001$

3.4 Community Healthcare Service Utilization

Availability of community healthcare services was reported by 51.3% (n=77) of participants, while 20.0% (n=30) indicated that such services were not available in their area and 28.7% (n=43) were uncertain. Despite moderate service availability, only 30.0% (n=45) reported utilizing community healthcare services, whereas 70.0% (n=105) reported no direct experience with such services. Among those with experience, satisfaction levels varied, with 12.0% (n=18) reporting satisfaction, 4.7% (n=7) reporting very high satisfaction, 9.3% (n=14) reporting neutral satisfaction, and 4.0% (n=6) reporting dissatisfaction with available preventive healthcare services (Figure 3).

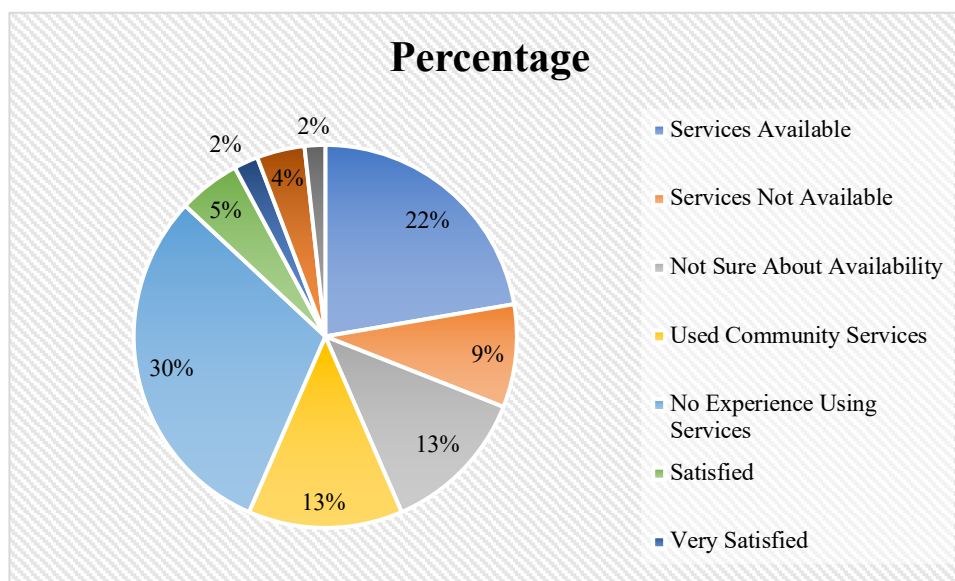


Figure 3. Distribution of Participants' Perceptions on the Integration of Homoeopathic Therapeutics in Community Healthcare (n = 150)

3.5 Perceptions of Integrative Therapeutic Delivery

Participants expressed mixed perceptions regarding integration of homoeopathic therapeutics within community healthcare systems. Approximately 32.7% (n=49) agreed or strongly agreed that integrating homeopathy could improve preventive healthcare services, as shown in Figure 4. Similarly, 42.0% (n=63) believed that homoeopathic medicines could complement conventional treatments. Around 34.7% (n=52) agreed that such integration could contribute to long-term wellness, while 39.3% (n=59) believed it could improve accessibility to healthcare services. However, a considerable proportion of participants reported neutral perceptions across several statements, indicating moderate rather than strong consensus regarding the benefits of integrative therapeutic delivery.

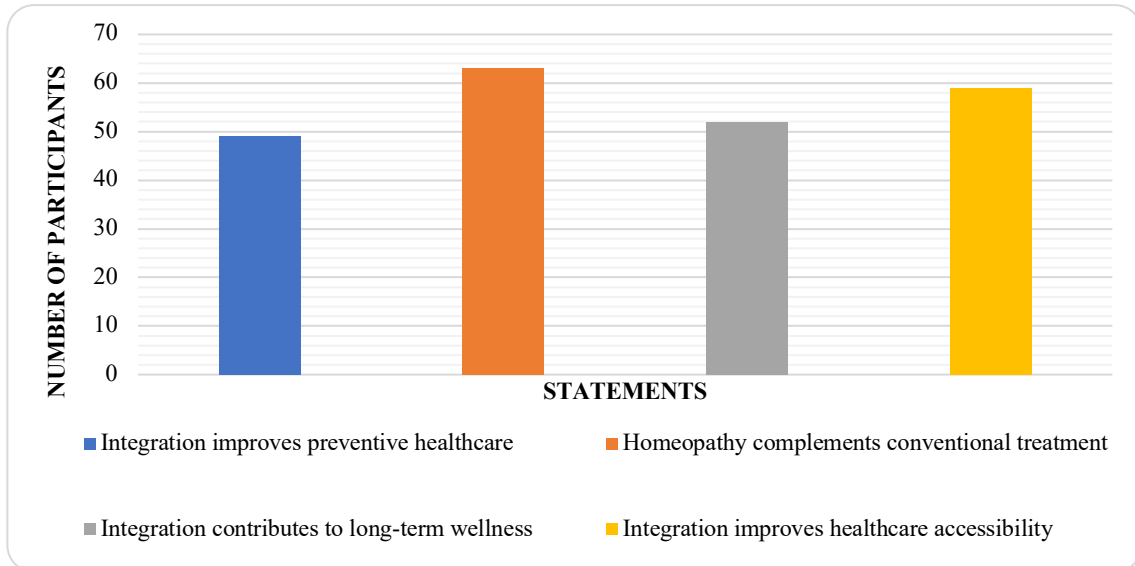


Figure 4. Perceptions of Integrative Therapeutic Delivery (n=150)

3.6 Acceptance of Integrative Healthcare Systems

Support for integrative healthcare approaches was observed among many participants. Approximately 60.7% (n=91) expressed support for integrating homoeopathic therapeutics within community healthcare programs, while 29.3% (n=44) indicated conditional support and 10.0% (n=15) opposed the concept. When asked about personal willingness to use integrative healthcare services, 44.7% (n=67) responded positively, while 34.0% (n=51) were uncertain and 21.3% (n=32) expressed unwillingness. Reported barriers to integration included policy limitations (30.7%), lack of awareness (27.3%), scientific concerns (22.0%), and shortage of trained professionals (20.0%).

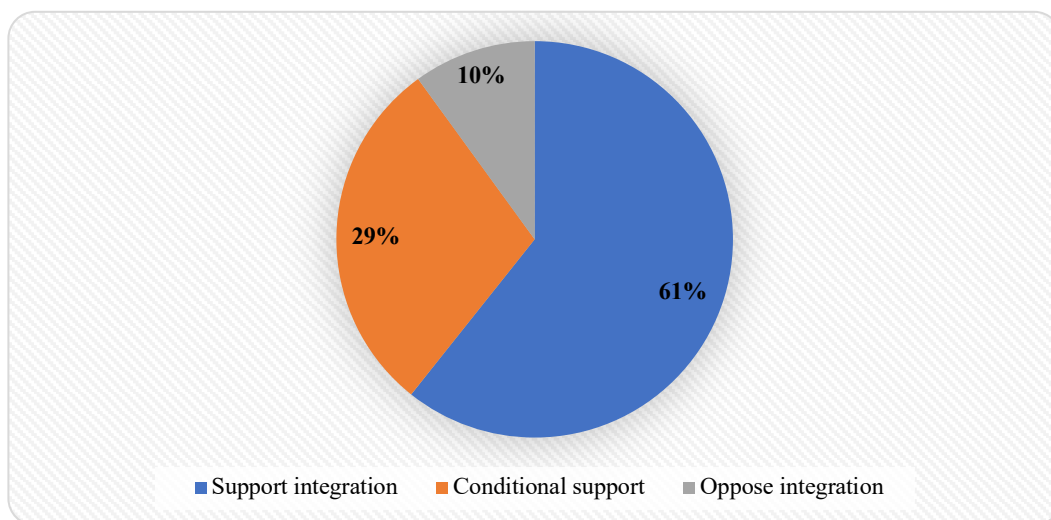


Figure 5. Acceptance of Integrative Healthcare Systems (%)

3.7 Qualitative Feedback

The qualitative data which were developed as a result of the open ended questions assisted to expound on the community perceptions of integrative healthcare models. Some of the respondents were keen on the holistic type of healthcare which involved the use of different systems of therapeutic approaches. This was based on the suggestion of most of the respondents who suggested that there should be more awareness amongst the population on preventive medical care and integrative therapeutic solutions. Other recommendations that were commonly cited concerning

the same included training the community health workers on different therapeutic interventions, and ensuring that preventive healthcare programs were more accessible due to community clinics and health camps. The applicability of scientific studies, the proper regulation and collaboration of different healthcare systems was also defined as the significant elements of safe and effective integration of integrative healthcare models as perceived by the participants.

4. Discussion

The present research article was on the awareness level of communities, usage and perceptions regarding the inclusion of homoeopathic therapeutic in preventive healthcare systems. The findings indicate that the level of knowledge regarding homoeopathic medicines was not that low since more than three-quarters of the interviewed reported to be acquainted with such medicine. However, the actual application was in the middle range, which means that awareness does not necessarily translate into habitual consumption of therapeutics. The preventive healthcare engagement of the population was also distributed unevenly. Although over half of the respondents claimed to have observed preventive health check-ups, a considerable number of them were not practicing preventive health activities on a regular basis. This highlights the problem of improving preventative health care in the community setting.

The perception data revealed that the respondents were moderate in their support to the introduction of homoeopathic therapeutics in the community healthcare services. Most of them had positive or conditional perceptions about such kind of integration, whilst a good proportion of them were neutral. This indicates that the perceived views of the community are still undergoing a transition and they can be identified by the availability and accessibility of the services, trust in the healthcare system, and access to valid information. Furthermore, the data has shown that the level of support to integrative models of healthcare was more pronounced, as opposed to personal willingness to receive such services. It implies that, as much as theoretically, individuals can integrate at system level, individual health care decisions can be reached in view of other aspects such as perceived efficiency, safety and health literacy on the use of treatments.

Another aspect that demonstrates the importance of community healthcare platforms in provision of preventive health services and therapeutic interventions is the results. The respondents who claimed to have access to the community health services were more likely to have gone through preventive healthcare programs. However, practical application of it was still quite limited, which implies that the availability issue does not predetermine the active participation. Community involvement, prevention and awareness awareness may thus be important in the improvement of the integrative models of healthcare. Overall, the analysis has shown that the attitudes of the population to integrative therapeutic methods are more subtle and require more community-based engagements and educational interventions to convert the knowledge about such methods into the practice.

Previous research has indicated that complementary and alternative medical systems have remained in influencing the decision-making process of the healthcare in the majority of the populations. The qualitative research on the improving care measures has shown that homeopathy may be introduced as an auxiliary tool to enable their patients feel empowered

and motivated to assume an active role in the management of their healthcare in specific, the people who are interested in the use of complementary practices of treatment¹¹. Scientific discourse regarding the concept of homeopathy has also touched on the theoretical basis of homeopathy and its holistic approach to illness and individual approach to treatment in the context of the integrative approach to medicine.¹² Other than this, research studies into the perception of integration of the complementary medicine have also noticed that the patients themselves, and the medical care providers, are more likely to appreciate the potential significance of integrating the alternative medical care with the primary health care services delivery¹³.

The current reviews that assess the evidence base of homoeopathic research in the world have reported the increasing amount of scientific evidence regarding its usage in clinical cases and methodology¹⁴. Subsequent evaluation of homoeopathic research quality has suggested that there are still ongoing attempts to solve the standards of research and measure the outcomes of the therapeutic process in modern clinical practice¹⁵. The desire of the patients towards the inclusion of homeopathy into the conventional medical care has also been described in the community based studies carried out in India which is a pointer of the increased demand of the pluralistic models of healthcare¹⁶. In addition, present-day clinical reviews have provided diverse clinical settings where the homeopathy has been used as a component of integrative medical practices, also depicting its growing role in the current medical care¹⁷. Despite the fact that the current study provides useful information about the views of the community and the patterns of using healthcare services, one can single out several limitations. Firstly, the research was grounded in a study design of the type of questionnaire, which is not an objective measure of healthcare actions or clinical outcomes but is a self-report of perceptions. The social desirability of the answers may have been provided by the participants or they may not be very familiar with the previous means of healthcare delivery. Second, the sample size was extremely small (150 respondents) and it made the findings less applicable to generalizing the research to a larger population. Third, the study under discussion was devoted to the evaluation of the consciousness, the attitude and the perceived effectiveness rather than the real clinical outcomes associated with the homoeopathic therapies. The study also fails to have causal relationships and causality that could be evaluated due to cross-sectional nature of the study. Among the considerations made when interpreting the results is consideration of these limitations.

The findings of the current study have several implications on the healthcare policy, community medicine and integrative systems of therapeutic delivery. Through creating awareness and education on preventive health practices, the community can be more involved in the existing health services. The medical

strategies providing the systems of therapeutic treatment in combination with the conventional medicine can open the opportunities for extending the prophylaxis care strategies and improving patient-centered healthcare services. Community health programs can be employed as viable tools of providing different therapeutic interventions and also promoting holistic health and well-being. In addition, policymakers and medical practitioners can be more concerned with the improvement of collaboration between diverse healthcare systems with the view of facilitating accessibility and delivering safe, evidence-based integration of the practices of integrative health care. Future research that uses a larger population sample and clinical outcome would help to uncover the contribution of complementary therapeutic to preventive care delivery.

5. Conclusion

The study researched the extent of community awareness, usage behaviors and perceptions towards the integration of the homoeopathic therapeutics in the preventive health care systems. The findings indicate that a large proportion of the respondents knew about homoeopathic medicines but the consumption was average. The respondents were not uniform on their preventive health care practices with the majority of them reporting that they had been performing health check-ups and practising healthy lifestyles but some of them had low involvement on preventive measures. Many of the participants were able to utilize community healthcare services, and the attendance rates of community healthcare services were not that high. The majority of the respondents were generally cautious yet optimistic on their thoughts over the inclusion of homoeopathy in the community healthcare programs. The support of integrative healthcare models was more than the intended use of such healthcare services which means that the policy or system acceptance does not inevitably result in individual healthcare decisions. It was also mentioned that the research found out that there were several perceived obstacles of integration which were the restriction of policy, lack of awareness and the problem of the scientific validation. At the same time, such potential benefits as improved access to healthcare, holistic treatment approaches, and increased prevention were also mentioned by respondents. Such findings suggest that the community involvement and health education to the population can play an important role in improving the proper integration of the complementary therapeutic systems into the existing healthcare systems. It should be adopted in the future that larger and more diverse population should be utilized in the future studies in order to increase the generalizability of the findings and provide more detailed insights into the community health behaviors. The clinical utilization of the homoeopathic therapeutics in preventive healthcare and inform the evidence-based treatment of integrative healthcare delivery also can be explained on the basis of

the longitudinal studies and measurements of clinical outcomes.

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