



A study on brand awareness towards selected ayurvedic healthcare products with special reference to palladam

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Abstract

Ayurveda is considered one of the world's oldest healing sciences, originating in India at least 5,000 years ago. Its name is a Sanskrit word that literally translates as "the wisdom of life" or "the knowledge of longevity" (it is a compound of ayus, meaning life or longevity, and veda, meaning deep knowledge or wisdom). In accordance with this definition, Ayurveda views health as much more than the absence of disease. Health, from an Ayurvedic perspective, is defined as a gracious, tranquil, content, joyous, bright, and clear state of the body, senses, mind, and spirit, including the balanced state of one's natural constitution, all bodily tissues, the digestive capacities, and waste excretion. The objective of the research work is to study about the customer's brand awareness towards selected ayurvedic healthcare products and customer's brand loyalty of selected Ayurvedic healthcare products. Tools used for the analysis are weighted average analysis, one way anova, simple percentage and spearman rank correlation. It is concluded that most of the respondents have high awareness about herbal ingredients factors and most of the respondents are not changed the preferred brand.

Keywords: ayurveda, customers, brand awareness, brand loyalty, healthcare products

1. Introduction

Ayurveda is one of the great gifts of the sages of ancient India to mankind. It is one of the oldest scientific medical systems in the world, with a long record of clinical experience. However, it is not only a system of medicine in the conventional sense of curing disease. It is also a way of life that teaches us how to maintain and protect health. It shows us both how to cure disease and how to promote longevity. Ayurveda treats man as a "whole" – which is a combination of body, mind and soul. Therefore it is a truly holistic and integral medical system.

The word "Ayu" means all aspects of life from birth to death. The word "Veda" means knowledge or learning. Hence Ayurveda indicates the science by which life in its totality is understood. It is a way of life that describes the diet, medicine and behavior that are beneficial or harmful for life. The roots of Ayurveda can be traced to the beginning of cosmic creation. Indian philosophers state that Ayurveda originated from Brahma, the creator of the universe. Brahma is not a mere individual but the unmanifest from the Divine Lord, from whom the whole manifest world comes into being. The desire to maintain fitness, health and longevity is one of the basic instincts of all creatures. Ayurveda in this respect sets the pattern for other system of medicine. It is a tradition with an antiquity comparable to that of life itself. The magico-religious aspect of medicine in the Vedas was gradually supplemented by observations based on scientific thinking. Ayurvedic scholars from subsequent generations gave a sound

and logical footing of philosophy to Ayurveda. The material scattered in the Vedas was collected, subjected to rigid tests of efficacy and systematically arranged. Such compilations were called "Samhitas" Many of these compilations no longer exist. Only three authentic works have stood the test of time and are available today – the Charaka Samhita, Sushruta Samhita and Ashtanga Hridaya Samhita. This great trio – the Brihatrayi as it called – has enjoyed much popularity and respect for the last two thousand years. Although these texts have undergone some modification by various authors in subsequent periods, their present form is at least 1200 years old. They are all in the Sanskrit language.

2. Statement of problem

The study deals with the brand awareness and brand loyalty of selected ayurvedic healthcare products in palladam taluk at Tirupur district. Many ayurvedic companies are available in the market so peoples have some confuses at the time of purchase the products. Which brand of ayurvedic product is good for health? The companies attract the prospective brand conscious customers by claiming quality and image and try to satisfy these customers by adopting various strategies in the market. Brand loyalty is one of the most important issues in the world of marketing and business due to the great importance that the brand subjected to the international business level in particular. Brand-loyal consumers may be willing to pay more for a brand. This strategy considered a more effective and efficient way than attracting a new

customer. Similarly, brand loyalty leads to greater market share when the same brand is repeatedly purchased by loyal consumers consequently; the brand is the sole distinguishing factor among competing and similar products.

3. Review of literature

Martinez-Ruiz *et al.*, (2009) a study on “Store brand proneness and maximal customer satisfaction in grocery stores with special reference to Spanish city”, is a study on Spanish consumers, identified the factors whose perception had the greatest influence on customer satisfaction. The authors analyzed a database of 422 Spanish consumers who purchased from different types of self service grocery stores in a representative Spanish city. The findings revealed that among consumers who exhibited a low propensity to buy store brands, perceptions of the quality image, as well as perceptions of service and convenience, and positive and significant influences on the maximum level of customer satisfaction. However, for those consumers who were not prone to buying store brands, only the perception of services and convenience influenced their maximum level of satisfaction. This research found the features which could help retailers focus their strategies on appropriate consumer targets and thus attain a sustainable competitive advantage through their differentiation.

Dr P. Natarajan and U. Thiripurasundari (2010) in their study focus on the “consumer preference of global brands versus local brands in the Indian car industry”. Consumer brand perceptions have substantial implications in marketing. The customers’ preference towards local and global brands is studied by administering a structured interview schedule with one hundred and fifty customers in Pondicherry city. The findings of the study advised that the consumers who possessed global car brands preferred their car brands due to factors such as global presence, worldwide reputation and the quality of being imported. Consumers made favourable perceptions on the country wherein they tend to associate factors such as superior quality, technical advancements, modernization etc. to the country from which the brand had taken its origin. Consumers who owned a local brand evaluated the local brand in a favourable manner, wherein they tended to associate the brand to India’s strong automobile sector making quality and technically efficient cars.

Xiao Tong and Jana M. Hawley (2010) in their research work in the topic, “Measuring Customer Based Brand Equity Empirical Evidence from the Sportswear Market in China”. Examine practicality and applications of a customer-based brand equity model in the Chinese sportswear market. Based on Aaker’s conceptual framework of brand equity, this study employed structural equation modeling to investigate the causal relationships among the four dimensions of brand equity in the sportswear industry. The findings conclude that brand association and brand loyalty are influential dimensions of brand equity. Weak support was found for the perceived quality and brand awareness dimensions. The paper shows that sportswear brand managers and marketing planners should consider the relative importance of brand equity in their overall brand equity evaluation, and should concentrate their efforts primarily on building brand loyalty and image.

Dr. G. T. Vijayalashmi, Dr. N. Manimozhy (2015) in their

study entitled “A study on brand preference towards smart phone users in Thiruvur district, Tamilnadu” analyzed on brand preference towards smart phone users in Thiruvur district and to find out the satisfaction level of various mobile phones. Descriptive and analytical research method has been used for this study with a sample size of 159 respondents. They concluded that the respondents constantly consider the quality as the important factor for brand preference. Age and income does not influence their preference for the brand of smart phone.

4. Need for the study

Ayurvedic products are safe because they are made from natural ingredients. Now a day’s Ayurvedic product companies are increasing in modern society. Maximum peoples are getting ayurvedic products benefits related awareness through television advertisement, ayurvedic shops websites and other ways. Ayurvedic products are easily available in medical shops, departmental stores, ayurvedic shops etc. People when using ayurvedic products at the time they will not suffer any allergies and side effects. So peoples are buying ayurvedic products. The Ayurvedic products thus are great by every means possible. Holistic health is available to everyone. Integrating yoga and Ayurveda into everyday life can result in peace and well-being in mind, body, and spirit.

5. Objectives

1. To study the awareness level of the respondents towards select ayurvedic healthcare products.
2. To study the brand loyalty of the respondents towards select ayurvedic healthcare products

6. Methodology

1. **Area and Sample selection:** The study has been conducted in Palladam taluk from Tirupur district.
2. **Sample Size:** The study was conducted towards ayurvedic healthcare product users. The size of the respondents is 100.
3. **Sampling Technique:** Convenient sampling method has been adopted.
4. **Data collection tool:** Interview schedule.
5. **Period of study:** The data has been collected through structured interview schedule of ayurvedic products users from September 2017 to December 2017
6. **Tools used for analysis:** The following are the tools applied.
 1. Weighted average analysis
 2. One way anova.
 3. Simple percentage and Spearman rank correlation

7. Analysis and Interpretation

1. Weighted average analysis.
2. One Way Anova.
3. Simple percentage and Spearman rank correlation

Objective 1: To study the awareness level of the respondents towards selected ayurvedic healthcare products. To examine the above said objective weighted average analysis.

7.1 Weighted average analysis

$$Weighted\ Avg_x = w_1x_1 + w_2x_2...w_nx_n$$

w = relative weight(%)

x = value

The weighted average formula is used to calculate the average value of a particular set of numbers with different levels of relevance. The relevance of each number is called its weight. The weights should be represented as a percentage of the total relevancy. Therefore, all weights should be equal to 100%, or 1. The most common formula used to determine an average is the arithmetic mean formula. This formula adds all of the numbers and divides by the amount of numbers.

7.1.2. Weighted average analysis

Table 2

Factors	5	4	3	2	1	Total	Mean
Natural Healing	30	70	0	0	0	100	
Weighted avareage Score	150	280	0	0	0	430	4.3
Solutions for Health Care Issues	53	41	2	4	0	100	
Weighted avareage Score	265	164	6	8	0	443	4.43
Herbal ingredients	78	18	4	0	0	100	
Weighted avareage Score	390	72	12	0	0	474	4.74
Authenticated Brands (Available in the market)	23	60	17	0	0	100	
Weighted avareage Score	115	240	51	0	0	406	4.06
Product Quality	43	49	8	0	0	100	
Weighted avareage Score	215	196	24	0	0	435	4.35
Product Usage	17	64	16	3	0	100	
Weighted avareage Score	85	256	48	6	0	395	3.95
Product Variety	12	73	6	7	2	100	
Weighted avareage Score	60	292	18	28	2	400	4
Price Ranges	18	46	22	9	5	100	
Weighted avareage Score	90	184	66	36	5	381	3.81
Point of Sales	12	64	13	9	2	100	
Weighted avareage Score	60	256	39	18	2	375	3.75
Manufacture of the Product	37	53	10	0	0	100	
Weighted avareage Score	185	212	30	0	0	427	4.27

The above table reveals that the respondents have well awareness of herbal ingredients. Next is solution for healthcare issues and product quality, Manufacture of the product, authenticated brands, natural healing, product variety, product usage, price ranges and point of sales.

Objective 2: To study the brand loyalty of the respondents towards selected ayurvedic healthcare products.

7.2. One way Anova

Analysis of Variance (ANOVA) is a hypothesis-testing technique used to test the equality of two or more population (or treatment) means by examining the variances of samples that are taken. ANOVA allows one to determine whether the differences between the samples are simply due to random error (sampling errors) or whether there are systematic treatment effects that causes the mean in one group to differ from the mean in another. Most of the time ANOVA is used to

7.1.1. Respondents Details

Table 1: Level of awareness towards ayurvedic healthcare products

Factors	5	4	3	2	1	Total
Natural Healing	30	70	0	0	0	100
Solutions for Health Care Issues	53	41	2	4	0	100
Herbal ingredients	78	18	4	0	0	100
Authenticated Brands (Available in the market)	23	60	17	0	0	100
Product Quality	43	49	8	0	0	100
Product Usage	17	64	16	3	0	100
Product Variety	12	73	6	7	2	100
Price Ranges	18	46	22	9	5	100
Point of Sales	12	64	13	9	2	100
Manufacture of the Product	37	53	10	0	0	100

The Table 1 described that the respondents details about level of awareness towards ayurvedic healthcare products. Very high (5), high (4), moderately (3), low (2), very low (1).

compare the equality of three or more means, however when the means from two samples are compared using ANOVA it is equivalent to using a t-test to compare the means of independent samples. ANOVA is based on comparing the variance (or variation) *between* the data samples to variation *within* each particular sample. If the between variation is much larger than the within variation, the means of different samples will not be equal. If the between and within variations are approximately the same size, then there will be no significant difference between sample means.

Assumptions of ANOVA:

- All populations involved follow a normal distribution.
- All populations have the same variance (or standard deviation).
- The samples are randomly selected and independent of one another.

Since ANOVA assumes the populations involved follow a

normal distribution, ANOVA falls into a category of hypothesis tests known as parametric tests. If the populations involved did not follow a normal distribution, an ANOVA test could not be used to examine the equality of the sample means. Instead, one would have to use a non-parametric test (or distribution-free test), which is a more general form of

hypothesis testing that does not rely on distributional assumptions.

Null Hypothesis (H_0) = There is no association between gender and number of years using ayurvedic healthcare products.

7.2.1. Respondents Details

Table 3: Number of years using ayurvedic healthcare products

Male	less than 3 years	4-6 years	7-9 years	10 years and above
Patanjali	23	14	9	6
Himalaya	5	16	19	12
Dabur	3	12	21	16
Baidhyanath	23	11	12	6
Hamdard	18	16	13	5
Female	less than 3 years	4-6 years	7-9 years	10 years and above
Patanjali	18	11	12	7
Himalaya	8	21	13	6
Dabur	11	20	8	9
Baidhyanath	19	14	7	8
Hamdard	20	12	11	5

Table 4

Summary				
Groups	Count	Sum	Average	Variance
Less than 3 years	10	148	14.8	55.06667
4-6 years	10	147	14.7	12.67778
7-9 years	10	125	12.5	20.05556
10 years and above	10	80	8	12.44444

Table 5: ANOVA Table

Source of Variation	SS	Df	MS	F	P-value
Between Groups	303.8	3	101.2667	4.040789	0.014175
Within Groups	902.2	36	25.06111		
Total	1206	39			

The ANOVA result shows that the table value of F for $v_1 = 3$ and $v_2=36$ at 5% level of significance 3.24 and the calculated value is 4.040. Since the calculated value is higher than the table value. Hence the Hypothesis is rejected. There is no association between gender and number of years using ayurvedic healthcare products.

7.3. Simple Percentage and Spearman’s Rank Correlation

7.3.1 Simple Percentage

The following table shows the distribution of respondents

based on whether they have changed the preferred brand in any time of the product usage classified as Yes / No.

Table 6: Changed the brand at present

Changed the brand	No. of Respondents	Percentage
Yes	34	34
No	66	66
Total	100	100

Source: Primary data

The Table 6 described that out of 100 respondents taken for the study, 66 (66%) of the respondents have not changed the brand and 34 (34%) of the respondents have changed the brand at present.

It is concluded that the majority of the respondents have not changed the brand at present.

7.3.2. Spearman’s rank correlation coefficient

Spearman’s Rank correlation coefficient is used to identify and test the strength of a relationship between two sets of data. It is often used as a statistical method to aid with either proving or disproving a hypothesis.

The formula used to calculate Spearman’s Rank is shown below.

Table 7: Changed the brand at present

S. No.	Factors	R ₁	R ₂	R ₃	R ₄	R ₅	R ₆	R ₇	R ₈	R ₉
1	Non-Availability of product in the market	4	1	2	3	4	6	6	6	2
2	Attractive sales offer by competitive brands	3	6	1	4	2	7	4	2	5
3	Advice from reliable sources	6	11	3	2	4	5	2	1	0
4	Advice from doctor	12	6	3	5	1	2	3	0	2
5	Price hike of current brand	3	4	5	3	1	2	3	7	6
6	Inferior quality/ Deterioration in quality	3	4	6	1	2	5	1	5	7
7	Intensive advertisement of competitive brand	2	2	6	5	6	1	3	4	5
8	Just for change	3	0	6	7	5	2	4	5	2
9	Influence of family members	0	2	3	4	6	3	5	5	6

$1 - \frac{6\sum D^2}{N^3 - N}$ NB. Sometimes $n^3 - n$ is written as $n(n^2 - 1)$. Both mean the same thing.

7.3. Respondent's Details

The above table explains the rank details given by the respondents for changed the brand at present.

Table 8

S. No	Rank between,	$\sum D^2$	Spearman Rank
1	$R(1-2)^2$	73	0.392
2	$R(2-3)^2$	157	-0.308
3	$R(3-4)^2$	47	0.609
4	$R(4-5)^2$	39	0.675
5	$R(5-6)^2$	84	0.3
6	$R(6-7)^2$	48	0.6
7	$R(7-8)^2$	48	0.6
8	$R(8-9)^2$	46	0.617
9	$R(1-9)^2$	218	-0.816

Since coefficient of correlation is maximum in the ranks of the fourth and fifth. It is concluded that have the customers changed the brand at the time of advice from doctor and price hike of current brand.

8. Findings

Respondents have well awareness of herbal ingredients. Next is solution for healthcare issues and product quality, Manufacture of the product, authenticated brands, natural healing, product variety, product usage, price ranges and point of sales. Most of the respondents are (66 %) not changed the brand. And (34 %) of the respondents are changed the brand. Customers changed the brand at the time of advice from doctor and price hike of current brand.

9. Suggestions

1. Majority of the respondents feel that the ayurvedic product companies are maximum not provide any offers and discounts. So the ayurvedic companies can try to provide the some offers and discount for the customers.
2. To create ayurvedic products health benefits awareness for all the peoples in some different ways.
3. As majority of the young and educated customers have high level of attitude towards ayurvedic products, more number of ayurvedic shops may be opened especially at commercial area bazaars, etc., this would help in increasing the sales of ayurvedic products.
4. The ayurvedic shops that sells these products should be have prominent place and with attractive sign boards. In addition display the products with catchy words.
5. Door to door canvassing will go in along way to mass sale of the ayurvedic products.

10. Conclusion

The research is based on the brand awareness towards selected ayurvedic healthcare products with special reference to palladam. Respondents have well awareness of herbal ingredients. Most of the respondents are (66 %) not changed the brand. And (34 %) of the respondents are changed the brand. Customers changed the brand at the time of advice

from doctor and price hike of current brand.

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