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# Consumers' attitudes toward advertising by traditional Chinese medicine practitioners

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**Consumers' attitudes toward advertising by  
traditional Chinese medicine practitioners**

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## **Consumers' attitudes toward advertising by traditional Chinese medicine practitioners**

### **Abstract**

This study investigated consumers' attitudes toward advertising by traditional Chinese medicine (TCM) practitioners, and how attitudes varied among different demographic groups and user experiences in TCM. A survey using quota sampling was conducted. Altogether 1,039 adults aged 20 or above in Hong Kong filled in an online questionnaire in March 2014. Factor analysis found that attitudes toward TCM advertising consisted of four underlying dimensions: information value of TCM advertising; benefits of TCM advertising; confidence in financial aspects of TCM; and doubts about TCM advertising. Consumers' attitudes toward TCM practitioners were in general favorable. Respondents appreciated information value of TCM advertising, but held some skepticism and worries about it. Respondents perceived strongly that advertising by medical professionals would lead to increase in the cost of services. Respondents with TCM consultation experience demonstrated a more positive attitude toward TCM advertising than respondents without TCM experience. Practical implications and limitations were discussed. (149 words)

**Keywords** Health services, culture, survey, consumer perception, advertising regulation

## **Consumers' attitudes toward advertising by traditional Chinese medicine practitioners**

### **Introduction**

Even though TCM has long been practiced in Hong Kong, it has only been officially professionalized with given legitimacy within the last twenty years. Before Hong Kong's handover to China in 1997, medical education in this former British Colony was dominated exclusively by western medicine. TCM was not a formal part of the healthcare system, and there were no regulations governing the registration and quality of TCM practitioners. Nor were there educational institutions to provide formal training for TCM practitioners. TCM was marginalized and was relatively unpopular in Hong Kong ([Dong & Chan, 2014](#)).

After the handover in 1997, the formalization of TCM in Hong Kong started to accelerate. With the introduction of the Chinese Medicine Ordinance in 1999, TCM became officially professionalized at the policy level in Hong Kong. In 1999, the Chinese Medicine Council of Hong Kong was established to implement regulations on the practice of TCM. Various universities in Hong Kong began to provide formal TCM education. The first one was the School of Chinese Medicine at Hong Kong Baptist University established in 1998. As of 2013, there are over 9,000 TCM practitioners in Hong Kong, and over 70% of these are registered Chinese Medicine Practitioners (Chinese Medicine Council of Hong Kong, 2014). The number of registered Chinese medicine practitioners is about half the number of registered western medical practitioners.

Advertising is considered as a legitimate source of information for promoting products and services, including medical services, and consumers in Hong Kong generally have positive attitudes toward advertising by professional practitioners including accountants, lawyers, and doctors. A survey found that a majority of

respondents expressed that advertising by practitioners in the accounting, legal, and medical professions would not lower their prestigious images, although most respondents worried that the cost of professional service would increase as a result of advertising (Au, 1997). Another more recent survey found that public attitudes toward advertising of western medical professionals, such as doctors and dentists, were favorable in Hong Kong. A majority of the respondents appreciated the information value of such advertising. Again, many expressed worry of deceptive advertising by medical professionals, as well as its impact in the elevation of consultation fees (Chan, Tsang & Leung, 2013).

TCM in Hong Kong is making steady progress in terms of law-based regulation, scientific research and education, and acceptance by the public. Should marketing communication tools such as advertising be used to promote TCM practices? How do consumers respond to such advertising? Against the background outlined above, the focus of this study is to examine the attitude toward advertising by TCM practitioners. The objectives of the current study are as follows:

1. to investigate consumers' attitude toward advertising by TCM practitioners;
2. to examine if attitude toward advertising by TCM practitioners vary among different demographical groups;
3. to examine if consumers with TCM experience have different attitude toward advertising by TCM practitioners versus consumers with no such experience.

## **Literature review**

### ***Public attitude toward TCM***

The general public in Hong Kong holds positive toward TCM. A survey found that a majority of respondents perceived that TCM has fewer side effects than western

therapies (Chung, Wong, Woo, Lo & Griffiths, 2007). A focus group study found that most of the interviewees used Chinese and western medication concurrently; interviewees' decisions on which type of doctors to consult depended on specific illnesses. Interviewees believed that in most cases TCM was able to cure the root of the problem but was slow to act. Interviewees also perceived that TCM medications were difficult to prepare. On the other hand, interviewees perceived that western medicine was stronger but came with significant side effects (Lam, 2001). Another survey employed cluster analysis to differentiate consumer groups based on their attitude toward TCM and western medicine. Results generated three clusters, where the largest cluster made up about 63 percent of the sample. Respondents in the cluster were generally younger and had more trust in western medicine than TCM. The second cluster was made of around 24 percent of the sample and was skeptical of western medicine. Respondents in this group were generally older, with lower incomes, with more women and more victims of chronic conditions. The remaining respondents expressed faith in both types of medicine (Chan, Mok, Wong, Tong, Day & Tang, 2003).

While public attitude toward TCM in Hong Kong is generally positive, views about TCM among the Hong Kong western medical community are mixed. Western medical students demonstrated skepticism toward TCM practices. Another focus group study of medical students found that most of the interviewees criticized TCM for its lack of scientific evidence. Though some interviewees perceived that TCM was a holistic approach to patient care and treatment, most perceived that professional standards and the regulation of TCM practice have much room for improvement (Wong, Lee, Wong, Wu & Robinson, 2006). Another survey of registered nurses in Hong Kong found that around two-fifths of the respondents considered

complimentary and alternative medicine un-scientific, and over half found it not as effective as biomedicine in the treatment of acute diseases. Nearly ninety percent of respondents perceived that biomedicine should not be utilized simultaneously with complementary and alternative medicine. Respondents with training in complementary and alternative medicine were more likely to initiate discussion of this type of medical treatment with nursing colleagues than those without the training (Holroyd, Zhang, Suen & Xue, 2008). On the other hand, a recent study of western medical doctors in Hong Kong found that a majority of the respondents had positive attitude toward TCM. However, these respondents seldom referred their patients to consult TCM practitioners. The low referral rate was attributed to the historical dominance of biomedicine and lack of collaborative policy within the current healthcare system (Chung, Hillier, Lau, Wong, Yeoh & Griffiths, 2011).

The Hong Kong government's initiative in TCM development has provided an opportunity for integrative TCM-biomedicine care among patients. However, there is a need for a structured and educational solution that fosters mutual understanding and safe referral between biomedicine doctors and TCM doctors (Chung et al., 2011).

### ***Advertising by professionals***

Privatization of health care systems leads to the need for health providers, such as hospitals and medical practitioners, to promote health care and medical services. Although restrictions on advertising have been removed or relaxed in Hong Kong, many professionals and their associations still regard advertising with suspicion and regulate its use. Opinions toward advertising by professionals vary significantly among professionals and the general public. Many professional bodies in Hong Kong perceived that advertising commercializes and thus demeans professional services (Chan, 1992). Studies in the 1970s showed that professionals disliked

advertising and most professionals worried that such advertising would lower the public image of the professions (Shimp & Dyer, 1978).

A survey found that professionals, including accountants, lawyers, and doctors, enjoy a highly favorable public image in Hong Kong. Respondents appreciated advertising by professionals as a source of information about services and fee structures. They perceived that advertising by professionals would not jeopardize their favorable images. However, respondents also believed that professionals who advertise would eventually transfer the costs onto the consumers (Au, 1997).

A study was conducted to investigate Hong Kong people's attitude toward advertising by western medical professionals (Chan et al., 2013). Again, results indicated that consumers' attitudes toward advertising by western medical professionals were favorable. A majority of respondents perceived that advertising by western medical professionals provides consumers with information about the services and qualifications of practitioners. However, many respondents worried about misleading information in these advertisements. Respondents also perceived strongly that advertising by western medical professionals would lead to increase in the price of services. Younger respondents and respondents with higher education were more skeptical toward advertising by medical professionals (Chan et al., 2013).

In the past, medical practitioners in western medicine were not allowed to advertise in Hong Kong (Au, 1997). However, in view of the increasing demand for private medical treatment by the public and the need for information about specialist services among doctors, the Medical Council of Hong Kong relaxed the regulation on practice promotion for western medicine doctors in 2008. According to the Council's code of practices, the communication in professional practice serves the informational needs of patients who want to make informed decisions about selecting a doctor and



obtaining the best services. Furthermore, advertisements of medical services should not be presented in a way so as to portray the medical care as merely a commercial activity. The Council considered that advertising medical care as a commercial activity would undermine public trust in the profession and would diminish the standard of medical care in the long run (Medical Council of Hong Kong, 2009). Regarding tone and manner of advertisements of medical professional, western medical doctors were allowed to public their service information in websites, bona fide newspapers, magazines, journals and periodicals for the purpose of information dissemination only. Furthermore, in the process of the dissemination of service information, no attempt should be made to abuse the trust of patients, to put the patient under undue pressure, or to offer guarantee of curing of particular conditions (Medical Council of Hong Kong, 2009). In other words, the advertisements of medical professionals should be strictly informational, and be refrained from being persuasive. The same code of practices was endorsed by TCM doctors in Hong Kong (Chinese Medicine Council of Hong Kong, 2011). In 2011, the advertising expenditure spent on health services in Hong Kong was HK\$ 435,817,000 (admanGo, 2012). Most of the advertisers were hospitals, clinics, laboratories or healthcare groups. Only one percent of the advertising expenditure of the category was about individual medical doctors.

## **Methods used in this study, Consumers' attitudes toward advertising by Traditional Chinese Medicine (TCM) Practitioners**

### ***Sampling***

A quota sampling survey of Hong Kong residents aged 20 or above was conducted in March 2014. A communication research method class of 85 students in a public university in Hong Kong was asked to invite friends to fill in an online

questionnaire. Each student was asked to recruit at least one male and one female adult in the age groups of 20-29, 30-39, 40-49, and 50 or above. Altogether 1,396 online questionnaires were submitted. Among them, 92 percent or 1,309 sets of questionnaire were complete.

### ***Measures***

The questionnaire was adapted from a previous study on consumers' attitudes toward advertising by medical professionals (Chan et al., 2013). The 23 statements on the questionnaire were classified into three categories: "Attitude toward advertising on Registered Chinese Medicine Practitioners" (Part 1 statements), "Attitude toward Registered Chinese Medicine Practitioners" (Part 2 statements), and "Perceived effects of advertising on Registered Chinese Medicine Practitioners" (Part 3 statements). [The three categories were modelled after Chan et al.'s \(2013\) study on attitudes toward advertising by western medical professionals. The 23 statements generated four factors using factor analysis. These statements were grouped and presented according to the four-factor solution in Tables 2 and 3.](#) To facilitate reading, Registered Chinese Medicine Practitioners are referred as TCM practitioners. Respondents measured each statement using a 5-point scale with "1" indicating "disagree strongly" and "5" indicating "agree strongly". All 23 statements used in the study were modified by replacing biomedical professionals with Registered Chinese Medicine Practitioners (Chan et al., 2013).

Demographic information about the respondent's age group, sex, education, housing, occupation, and household income was also collected. The respondents were also asked whether or not they had consulted any Registered Chinese Medicine Practitioners during the previous three years. The study was conducted in Chinese.

### ***Data analysis***

Factor analysis of the 23 statements using principal component analysis and varimax rotation method was conducted. Results of the factor analysis generated the underlying dimensions of consumers' attitude. Subsequent to the factor analysis, descriptive statistics of individual statements as well as its factor solutions are presented. Furthermore, attitude toward advertising by TCM practitioners by demographic variables would be examined with t-tests and ANOVA tests. A focus group study on acupuncture was conducted among 37 participants aged 35 or above in Hong Kong. The objective was to examine the perceived advantages and disadvantages of adopting acupuncture among acupuncture users and non-users. The study found that interviewees who had experience with acupuncture were more positive toward acupuncture than non-users (\*\*\*, forthcoming). The attitude toward advertising by TCM practitioners among those who had consulted TCM in the previous three years and those without recent consultation would be compared using t-tests.

## **Findings**

Altogether, 1,309 completed questionnaires were collected. The demographic profile is summarized in Table 1. There were nearly equal proportions of male and female respondents. A majority of them were aged 20-29 (35.9 percent). More than half of the respondents had post-secondary or university education. One quarter of the sample comprised students, another one quarter white collar workers. More than half of the sample had a monthly household income over HK\$20,000. The median monthly household income in Hong Kong in 2010 was \$18,000 (Information Services Department, Hong Kong SAR Government, 2012). So the sample contained a higher proportion of individuals from high-income households than is seen in the general

population. Over sixty percent of respondents reported having consulted TCM practitioners over the past three years.

[Insert Table 1 about here]

### ***Factor analysis***

The 23 statements of perceptions and attitudes toward TCM and TCM advertising were subjected to principal components analysis with the varimax rotation method. The results revealed the presence of four components with eigenvalues exceeding one, explaining 15.1%, 13.3%, 12.2% and 9.3% of the variance respectively. The four-factor solution explained roughly half (49.9%) of the total variance. Table 2 summarizes the factor loadings of the component solution. The first factor was named “Information value of TCM ad”. It reflected respondents’ appreciation of the information value of TCM advertising as well as their expectations of the ad contents. The second factor was named “Benefits of TCM ad”. This factor measured how individual or the society as a whole can benefit from TCM advertising. The third factor was named “Confidence in financial aspects of TCM”. It was a factor with three items reflecting how the respondents’ confidence was related to the financial conditions of TCM practitioners. The last factor was named as “Doubts and worries about TCM ad”. This factor focused on the doubts and worries of the TCM practitioners who advertise. Most of the Part 1 statements formed the factor “Information value of TCM ad”. Most of the Part 2 statements formed the factor “Confidence in financial aspects of TCM”. Most of the Part 3 statements formed the factor “Benefits of TCM ad”. The factor “Doubts and worries about TCM ad” was generated from statements from all three Parts.

Conventionally, items with a factor loading of 0.4 or greater (or smaller than - 0.4) within a particular factor are considered important. In order to have a clean factor

structure, items with a factor loading greater than 0.4 in two or more factors were removed. As a result, six items were removed for the compilation of means for the factors. These statements are shown in italics in Tables 2 and 3. Mean scores for the four factors were compiled based on the remaining 17 statements. Cronbach's alpha coefficients of the four factors were 0.82, 0.75, 0.71, and 0.61, respectively.

[Insert Table 2 about here]

### *Overall attitude*

The mean score for the 23 statements and the four factors are summarized in Table 3. As mentioned above, only 17 statements were used in the compilation of the mean scores of the four factors. Among all four factors measured, the highest mean score of 3.4 was reported for factor two, i.e., "Benefits of TCM ad". Respondents perceived that they would be more aware of the qualifications of TCM practitioners and that the TCM profession would be more transparent through advertising (mean=3.5). They also expressed strong views that TCM advertising would save the public time and effort in locating such services (mean=3.4). In their perception, advertising along with competition would bring better quality of TCM service and help consumers to make intelligent choices among TCM practitioners (mean=3.2). Furthermore, respondents had a favorable image of TCM practitioners.

The mean score of factor one for "Information value of TCM ad" is 3.3. Respondents reported that advertising by TCM practitioners can offer useful information in general (mean=3.5), and information about services and specializations in particular (mean=3.4). They considered advertising by TCM practitioners to be proper (mean=3.3) and expressed a desire for it (mean=3.2). While some respondents perceived that TCM advertising should focus on individual doctors (mean=3.3), others perceived that it should focus on health organizations (mean=3.2).

However, respondents were skeptical and had worries about TCM advertising, demonstrated by the mean score of 3.1 for factor four. They worried most about the misleading and exaggerated information in TCM ads (mean=3.5). Furthermore, they were suspicious of those who advertised (mean=3.1). Nevertheless, respondents did not believe that advertising by TCM practitioners would be more deceptive than other forms of advertising. They also did not believe that the image of TCM practitioners would be lowered because of advertising (mean=2.9). The highest mean score of 3.7 was reported for the statement “Advertising would lead to increase in prices of Chinese medical service as the advertising costs will be passed on to the clients”. This indicated that a majority of the respondents worry about the possible increase in service costs when TCM practitioners advertise.

Factor three had the lowest mean score of 3.0, which demonstrated a neutral attitude. Respondents did not have strong views about how the financial aspects of TCM may influence their confidence in TCM practitioners.

[Insert Table 3 about here]

#### ***Attitudes toward advertising by TCM practitioners by prior experience of TCM***

The respondents were categorized into two groups based on their prior consultation experience with TCM. A series of t-tests were conducted to find out whether attitudes toward TCM advertising differed significantly between the two groups. The mean scores of the two groups as well as the t-values of the statistical tests are summarized in Table 3. Significant differences in attitude were found with respect to 15 of the 23 attitudinal statements. In general, those respondents with TCM consultation experience had a significantly more favorable attitude than those without prior experience.

All five statements contributing to factor 1 about the information value of TCM advertising demonstrated significant t-values. Respondents with experience of TCM were more likely to perceive TCM advertising as a proper and useful means of providing information. They were also more likely to welcome TCM advertising and believe TCM advertising should focus on individual doctors.

Three of the five statements in factor 2 on the benefits of TCM advertising showed significant differences in mean scores between two groups. Respondents with TCM experience were more likely to consider that advertising can help improve public awareness of the qualifications of TCM practitioners and help the public make more intelligent choices. They also tended to believe that advertising would increase the transparency of the Chinese medical profession.

Two of three statements about confidence in the financial aspects of TCM showed significant differences in mean scores between the two groups. Respondents with TCM experience demonstrated greater confidence in TCM if advertising is employed. Similarly, they were more likely to believe that TCM practitioners who advertise were more trustworthy.

Three of four statements regarding doubts and worries about TCM advertising showed significant differences between the two groups. Respondents without any TCM experience expressed greater doubts toward TCM advertising. They were more likely to be suspicious of TCM practitioners who advertise and believed TCM advertising would be more deceptive than other advertising. They held a stronger perception that the image of TCM would be lowered because of advertising.

#### ***Attitudes toward TCM advertising by demographic groups***

A series of t-tests and one-way ANOVA statistical tests were conducted to examine whether respondents in different demographic groups had different attitudes

toward advertising by TCM practitioners. Male and female respondents showed statistical difference in only one factor. Male respondents were more likely to consider financial aspects of TCM than female respondents ( $t=3.9, p<0.01$ ). They tended to have a higher level of trust in TCM practitioners who advertised ( $t=3.4, p<0.01$ ). They also believed more strongly that TCM practitioners who charge a higher price will provide better quality services ( $t=4.1, p<0.01$ ).

The age variable demonstrated the only significant influence on doubts and worries about TCM advertising. Respondents aged 30-39 as well as respondents aged over 50 demonstrated the strongest skepticism toward TCM advertising ( $F=5.6, p<0.01$ ).

Educational level, household income and occupation variables had no significant influence on attitudes toward advertising by TCM professionals.

## **Discussion**

A survey was conducted to investigate consumers' attitudes toward advertising by TCM practitioners. Attitudinal statements were factor analyzed to reveal the underlying dimensions. Four attitudinal domains were identified. It provided a useful validated scale for the future study of advertising by medical professionals as well as other professionals.

We first compared our results with a study of Hong Kong consumers' attitudes toward advertising by biomedical professionals (Chan et al., 2013). We found many significant differences between the two studies. First, respondents in the current study demonstrated fewer doubts and worries about TCM advertising than about that of biomedical professionals. Respondents in the current study also believed more strongly that advertising by TCM practitioners would benefit both consumers and the profession more than advertising by biomedical professionals. Furthermore,



respondents appreciated more the information value of TCM advertising than they did that of advertising by biomedical professionals. In other words, public attitudes toward TCM advertising were more favorable than attitudes toward advertising by biomedical professionals. The only similarity was that respondents had similar levels of confidence in the financial aspects of both TCM and biomedical profession advertising.

We speculate that the more favorable attitude shown toward TCM advertising than that by biomedical professionals can be attributed to society's unfamiliarity with TCM practices. Consequently, the public would like to see more information about the qualifications, specializations, and fee structures of TCM practitioners through advertising.

We then compared our results with a study of Chinese consumers' attitudes toward advertising (Chan, 2006). Chan's study found that Hong Kong consumers appreciated the information function of television advertising. However, respondents did not endorse the buying confidence function of television advertising. They doubted the truthfulness of commercials. They disagreed that advertising would help them to get the best buy. In the current study, respondents showed similar attitudes toward advertising by TCM practitioners. The information function of advertising by TCM practitioners was well received by the respondents. However, respondents did not consider that TCM ads enhance their buying confidence. They had a neutral attitude toward TCM practitioners who advertise. A majority expressed the worry that TCM ads would be exaggerating or misleading.

A deep rooted belief about the economic costs of advertising was reflected in the current study as well as in Chan's (2006) study. Similarly to Chan's (2006) study,

the statement with the highest mean among all statements was “advertising would lead to increase in price of Chinese medical services as the advertising costs would be passed on to the clients” (mean=3.7). This indicated that the strongest belief among respondents was the high cost of advertising to consumers.

The current findings were compared with that reported by Chan et al.’s (2013) study of attitudes toward biomedical professionals’ advertising by demographic groups. Older respondents of a lower educational level were found to be less skeptical toward advertising by biomedical professionals in Chan et al.’s (2013) study. However, older respondents in the current study were more skeptical toward TCM advertising. This may be because older respondents still have the outdated impression that TCM is not formalized in the healthcare system. Further qualitative study is needed to verify our speculation.

Similarly to Chan et al.’s (2013) study, respondents with experience of TCM were less skeptical toward advertising by TCM practitioners. This may suggest that skepticism about advertising may arise from lack of experience in medical treatment.

To conclude, the current study measured consumers’ attitudes toward advertising by TCM practitioners in a Chinese context. The insight is useful for TCM practitioners in designing their advertising messages and for media professional bodies and policy makers to make informed decisions on regulation of such advertising.

### **Marketing implications**

The marketing implication of this study is that advertisers should design commercial messages that are in line with consumers’ attitudes and beliefs. Advertisements for TCM practitioners should emphasize the practitioners’ services, expertise, and qualifications in order to assist consumers in making informed

decisions. Price appeal should not be used because consumers generally believe that service quality is far more important than price. Based on this study, it is clear that advertisements should contain information that can assist consumers in making a choice among TCM practitioners. TCM practitioners may consider selecting media channels of high credibility in placing their commercial communication. They should also adopt a professional and nonaggressive advertising tone to enhance consumer confidence in their communications.

Two-fifths of the sample did not have TCM experience in the previous three years. From this, we expect that the general public may have difficulties in understanding TCM in terms of concepts, treatments, and specific practice. TCM practitioners could play a role in public education of basic TCM knowledge and treatment procedures. Further, TCM practitioners may consider the use of public relations tools such as information leaflets, events, or talks to enhance the image of TCM as that of an advanced, progressive and innovative profession.

Table 1  
Demographic profile of respondents (N=1,309)

<b>Demographic</b>	<b>Number</b>	<b>Percentage</b>
Female	705	53.9
Male	694	46.1
Aged 20 - 29	470	35.9
Aged 30 - 39	279	21.3
Aged 40 - 49	291	22.2
Aged 50 or above	269	20.6
Primary or below	99	7.6
Secondary school or high school	450	34.4
Post-secondary or university	760	58.1
Monthly household income at HK\$9,999 or below	261	19.9
HK\$10,000 - HK\$19,999	343	26.2
HK\$20,000 - HK\$29,999	313	23.9
HK\$30,000 or above	391	29.9
Blue collar	122	9.3
White collar	296	22.6
Professional/executive/managerial	250	19.1
Students	345	26.4
Housewives	167	12.8
Retired	121	9.2
Living in public housing	378	28.9
Home ownership scheme housing	324	24.8
Private rental housing	209	16.0
Private owned housing	392	29.9
Not consulted TCM in the past 3 years	497	38.0
Consulted TCM in the past 3 years	812	62.0

Table 2  
Factor loadings of four-factor solutions

	Factor loadings			
	1	2	3	4
<b>Factor 1: Information value of TCM ad (<math>\alpha=0.82</math>)</b>				
It is proper for registered Chinese medicine practitioners to advertise (1.1*)	<b>0.71</b>	0.35	0.07	-0.11
Advertising by registered Chinese medicine practitioners would be a useful means of informing potential consumers about services and specializations (1.3)	<b>0.69</b>	0.35	0.00	-0.07
The public would be provided with useful information through advertising by registered Chinese medicine practitioners (1.5)	<b>0.68</b>	0.28	0.05	-0.03
I would like to see more advertising by registered Chinese medicine practitioners (1.2)	<b>0.67</b>	0.25	0.21	-0.10
I think advertising for registered Chinese medicine practitioners should focus on individual doctors (1.8)	<b>0.57</b>	0.03	0.22	0.11
<i>I would like the services (if needed) of registered Chinese medicine practitioners who advertise (1.6)#</i>	0.53	0.23	0.45	-0.05
<i>I think registered Chinese medicine practitioners should focus on the contributions of the clinics or the health care organizations they belong to (1.9)#</i>	0.48	-0.04	0.44	0.12
<b>Factor 2: Benefits of TCM ad (<math>\alpha= 0.75</math>)</b>				
Advertising makes the public more aware of the qualifications of registered Chinese medicine practitioners (3.5)	0.24	<b>0.72</b>	0.04	-0.05
Advertising would increase the transparency of the Chinese medical profession (3.8)	0.23	<b>0.68</b>	0.14	-0.03
Advertising by registered Chinese medicine practitioners would reduce the time and effort needed to find a suitable Chinese medical professional (3.7)	0.18	<b>0.67</b>	0.2	-0.06
Advertising would increase the quality of Chinese medical services through competition (3.3)	0.08	<b>0.58</b>	0.25	0.08
Advertising would help consumers make more intelligent choices between registered Chinese medicine practitioners (3.4)	0.23	<b>0.53</b>	0.32	-0.01
<i>I presently have a high image of registered Chinese medicine practitioners (2.1)#</i>	0.27	0.34	0.01	-0.02
<b>Factor 3: Confidence in financial aspects of TCM (<math>\alpha=0.71</math>)</b>				
Registered Chinese medicine practitioners who charge a higher price will provide better quality services (2.5)	0.08	0.19	<b>0.71</b>	0.07
I have more confidence on the registered Chinese medicine practitioners who advertise (2.4)	0.23	0.37	<b>0.65</b>	-0.06
I believe registered Chinese medicine practitioners who advertise are stronger financially and should be more trustworthy (2.3)	0.22	0.31	<b>0.63</b>	-0.02
<i>I believe a greater use of advertising would improve the quality of their services (1.10)#</i>	0.45	0.21	0.52	-0.05

**Factor 4: Doubts and worries about TCM ad ( $\alpha=0.61$ )**

I would be suspicious of registered Chinese medicine practitioners who advertise (3.1)	-0.18	0.01	-0.11	<b>0.70</b>
I worry about misleading and exaggerated information in the advertising by registered Chinese medicine practitioners (1.7)	0.21	0.00	-0.24	<b>0.65</b>
Advertising by registered Chinese medicine practitioners would be more deceptive than other forms of advertising (1.4)	0.15	-0.27	0.24	<b>0.63</b>
In general, my image of registered Chinese medicine practitioners would be lower as a result of advertising (2.2)	-0.24	-0.13	0.28	<b>0.61</b>
<i>Advertising would lead to increase in prices of Chinese medical services as the advertising costs will be passed on to the clients (3.2)#</i>	-0.04	0.29	-0.45	<b>0.50</b>
<i>Advertising by registered Chinese medicine practitioners would benefit only quacks and incompetents (3.6)#</i>	-0.06	0.22	0.31	0.36
Eigenvalue	3.47	3.05	2.81	2.14
% variance	15.1	13.3	12.2	9.3
Total variance				49.9

Notes. Boldface indicates highest factor loadings.

# statements not included in the compilation of mean score corresponding factors

\*1.1 indicates the first statement in Part 1 of the questionnaire

Table 3  
Attitude toward TCM advertising by prior TCM experience

	Overall Mean	TCM experience		t-value
		Yes	No	
<b>Factor 1: Information value of TCM ad (<math>\alpha=0.82</math>)</b>	3.3	3.4	3.2	5.7**
The public would be provided with useful information through advertising by registered Chinese medicine practitioners (1.5)	3.5	3.5	3.3	4.1**
Advertising by registered Chinese medicine practitioners would be a useful means of informing potential consumers about services and specializations (1.3)	3.4	3.5	3.3	5.0**
It is proper for registered Chinese medicine practitioners to advertise (1.1)	3.3	3.4	3.2	4.3**
I think advertising for registered Chinese medicine practitioners should focus on individual doctors (1.8)	3.3	3.4	3.2	2.8**
I would like to see more advertising by registered Chinese medicine practitioners (1.2)	3.2	3.3	3.0	4.7**
<i>I would like the services (if needed) of registered Chinese medicine practitioners who advertise (1.6)#</i>	3.2	3.2	3.2	1.6
<i>I think registered Chinese medicine practitioners should focus on the contributions of the clinics or the health care organizations they belong to (1.9)#</i>	3.2	3.2	3.1	0.7
<b>Factor 2: Benefits of TCM Ad (<math>\alpha= 0.75</math>)</b>	3.4	3.4	3.3	2.8**
Advertising makes the public more aware of the qualifications of registered Chinese medicine practitioners (3.5)	3.5	3.6	3.4	2.7**
Advertising would increase the transparency of the Chinese medical profession (3.8)	3.5	3.5	3.4	2.2*
Advertising on registered Chinese medicine practitioners would reduce the time and effort needed to find a suitable Chinese medical professional (3.7)	3.4	3.4	3.3	1.7
Advertising would increase the quality of Chinese medical services through competition (3.3)	3.2	3.2	3.2	1.2
Advertising would help consumers make more intelligent choices between registered Chinese medicine practitioners without getting involved in the advertising of my services (3.4)	3.2	3.3	3.2	2.1*
<i>I presently have a high image of registered Chinese medicine practitioners (2.1)#</i>	3.5	3.6	3.3	7.0**
<b>Factor 3: Confidence in financial aspects of TCM ad (<math>\alpha=0.71</math>)</b>	3.0	3.1	3.0	2.4*
I have more confidence on the registered Chinese medicine practitioners who advertise (2.4)	3.1	3.2	3.0	2.7*
I believe registered Chinese medicine practitioners who advertise are stronger financially and should be more trustworthy (2.3)	3.0	3.1	2.9	2.4*
Registered Chinese medicine practitioners who charge a higher price will provide better quality services (2.5)	2.9	3.0	2.9	0.9

<i>I believe a greater use of advertising would improve the quality of their services</i> (1.10)#	3.1	3.2	3.0	3.4*
<b>Factor 4: Doubts and worries about TCM ad (<math>\alpha=0.61</math>)</b>	3.1	3.1	3.2	-2.9**
I worry about misleading and exaggerated information in the advertising by registered Chinese medicine practitioners (1.7)	3.5	3.5	3.5	0.6
I would be suspicious of registered Chinese medicine practitioners who advertise (3.1)	3.1	3.0	3.2	-3.3**
Advertising by registered Chinese medicine practitioners would be more deceptive than other forms of advertising (1.4)	2.9	2.9	3.0	-3.2**
In general, my image of registered Chinese medicine practitioners would be lower as a result of advertising (2.2)	2.9	2.8	3.0	-2.2*
<i>Advertising would lead to increase in prices of Chinese medical services as the advertising costs will be passed on to the clients</i> (3.2)#	3.7	3.7	3.7	-1.6
<i>Advertising by registered Chinese medicine practitioners would benefit only quacks and incompetents</i> (3.6)#	3.1	3.1	3.1	-1.2

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Notes: # statements not included in the compilation of mean score corresponding factors  
\*indicates significance at the  $p \leq 0.05$  (\*\* $p \leq 0.01$ ; \*\*\* $p < .001$ ) level of confidence

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