

Original Research Article

Public perception of Jan Aushadhi medicines in Mysore city: a prospective observational study

Mahima Prakash M. D., Sai Meenakshitha Panyala, Jennifer James,
Mahima H. Krishna, B. R. Jaidev Kumar*

Department of Pharmacy Practice, JSS College of Pharmacy, Mysuru, Karnataka, India

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*Correspondence:

Dr. B. R. Jaidev Kumar,

E-mail: jaidevkumarbr089@gmail.com

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ABSTRACT

Background: Generic medicines are crucial to ensuring affordable healthcare. The Jan Aushadhi scheme (JAS) was initiated in India to provide quality drugs at lower costs. However, public perception of such medicines remains understudied in certain regions.

Methods: A prospective observational study was conducted among the general population over six months. Data from all participants were collected using a validated bilingual questionnaire distributed through social media platforms, and the responses were compiled in a Google Excel sheet. Descriptive statistical methods were used for data analysis.

Results: Among the 1,316 participants, 54.86% were female, and a majority (55.24%) were aged between 18 and 25 years. Awareness of the JAS was reported by 68% of respondents, while 66% were able to distinguish between branded and generic medicines. Overall, 75% expressed a preference for generic medicines over branded ones; however, the remaining participants opted for branded medications. 27% believed that generic medicines were more effective than branded, whereas 86% agreed that Jan Aushadhi medicines were more cost-effective.

Conclusions: Despite high perceived affordability, knowledge gaps about the quality and effectiveness of Jan Aushadhi medicines remain. Awareness campaigns and policy efforts are needed to promote trust and utilization.

Keywords: Jan Aushadhi, Generic medicines, Public perception, Healthcare, Affordability

INTRODUCTION

Generic medicines, which are intended to be equivalent to branded drugs in dosage, safety, strength, route of administration, quality, and performance, play a significant role in reducing treatment costs for patients across the world.¹ Generic medicines must adhere to bioavailability and bioequivalence standards and should be safe and effective for various therapeutic indications regardless of patient demographics or condition severity.² However, despite these standards, generic medicines often face skepticism from both healthcare professionals and patients due to differences in formulation

characteristics like color, size, and excipients, which may influence perceptions of quality and efficacy.

In India, the cost burden of healthcare is a growing concern, particularly for patients from economically disadvantaged backgrounds. With over 79% of rural healthcare spending on medicines (NSO, 2018), the Indian government recognized the need to improve access to medicine, which led to the initiation of Jan Aushadhi scheme (JAS) in 2008. This initiative aims to provide quality generic medicines at prices significantly lower than branded medicine, with some medications being 50–90% cheaper.³⁻⁵ Despite the main objectives of JAS, the

actual uptake and public confidence in Jan Aushadhi medicines remain uneven across regions. Previous research in Karnataka and other Indian states has shown that although Jan Aushadhi stores are widely distributed, public awareness and utilization rates vary significantly. Barriers to generic medicine acceptance include a lack of public trust, limited promotion by healthcare professionals, and misconceptions regarding the safety and efficacy of generics.⁶

A rapidly developing urban center with a diverse population was chosen to explore the level of awareness, attitudes and perceptions surrounding Jan Aushadhi medicines among the public. Understanding local perceptions will help policymakers and healthcare providers tailor educational interventions, improve prescribing practices and ultimately provide greater trust in the Jan Aushadhi initiative. This study, therefore, seeks to bridge the knowledge gap by providing empirical data on public perception toward generic medicines in a representative urban Indian population.⁷

METHODS

Study design and study populations

A prospective observational study was conducted among the general public between October 2020 and March 2021. Individuals aged 18 years and above who had access to a smartphone or computer with internet connectivity were considered eligible for participation. A convenience sampling technique was employed and the sample size was determined without formal statistical calculation. Ethical approval for the study was obtained from the Institutional Review Board of JSS Hospital and informed consent was obtained from all participants before their inclusion in the study.

Sampling, recruitment and data collection procedures, analysis

Participants who met the inclusion criteria were enrolled in the study and their demographic information, including age, gender, educational qualification was recorded using a data collection form. These details were systematically entered into a Google Excel spreadsheet developed specifically for the study. The survey instrument comprised 16 closed-ended questions designed to assess participants' perceptions of generic medicines. The questionnaire underwent content validation by experts proficient in both English and Kannada to ensure clarity and accuracy. Due to the COVID-19 pandemic, the questionnaire was distributed electronically through various social media platforms, including WhatsApp, Facebook, Messenger, LinkedIn and Telegram. All participant responses were carefully documented in the designated spreadsheet. Data were subsequently analyzed using descriptive statistical methods, and the results were presented as percentages.

RESULTS

A total of 1,316 individuals participated in the study. The gender distribution showed a higher proportion of females (n=104, 54.86%) compared to males (n=96, 48%). The majority of participants (n=118, 55.24%) belonged to the 18–25 age group. graduates constituted the largest group (n=83, 41%) and 48% of respondents reported a monthly income ranging between INR 0–10,000. The study cohort represented participants from both urban and rural areas, providing a diverse cross-section of the general population. Most participants were from urban regions (62%), while 38% resided in rural settings, reflecting the outreach of Jan Aushadhi awareness across varying socio-economic backgrounds. Furthermore, 58% of participants reported having prior experience purchasing medicines for chronic conditions, which could have influenced their awareness and perception regarding generic medicine usage. The detailed demographics of the participants enrolled in the study are mentioned in (Table 1).

Table 1: Demographic data.

Demographic details	Categories	Total (%)
Gender	Male	590 (54.86)
	Female	722 (44.83)
	Others	4 (0.30)
Age (in years)	Below 18	10 (0.76)
	18-25	727 (55.24)
	25-35	446 (33.89)
	35-45	77 (5.85)
	45-55	39 (2.96)
	55-65	12 (0.91)
	65-75	5 (0.38)
Education	PUC	100 (7.60)
	Graduate	741 (56.31)
	Masters	256 (19.45)
	PHD	68 (5.17)
	Others	151 (11.47)
Monthly income (INR)	0 to 10,000	626 (47.57)
	10,000 to 50,000	393 (29.86)
	50,000 to 10,0000	156 (11.85)
	1,00,000 to 5,00,000	86 (6.53)
	5,00,000 and above	23 (1.75)
	NA	32 (2.43)

In terms of perception, 68% of participants were aware of the availability of Jan Aushadhi Kendras, while the remaining participants lacked such awareness. Among those aware, 45% had personally visited a Jan Aushadhi outlet at least once, mainly to compare medicine prices or availability. A majority (86%) expressed a positive opinion, emphasizing the need for Jan Aushadhi outlets in every hospital to enhance accessibility and affordability. Additionally, 84% of participants reported being aware of generic medications, and a majority (66%) of the participants knew about the differences between generic

and branded medicines. However, the remaining individuals demonstrated confusion regarding the equivalence in safety and efficacy of generic formulations compared to branded ones.

A significant proportion (75%) indicated a preference for generic medicines over branded medicines. Despite this preference among the public, 73% of participants reported that medical consultants preferred prescribing branded medicines, suggesting a prevalent belief in the superior quality of branded drugs. This indicates a gap between patient preference and physician prescribing behavior. Moreover, 74% of participants purchase medicines based on the recommendation of their medical

consultants, while only 26% reported having requested their consultant to prescribe Jan Aushadhi medicines (Table 2). 46% of participants (n=610) reported that not all medicines needed for various health conditions were available at Jan Aushadhi stores. This limitation was more commonly reported among participants from rural regions. However, 88% of participants acknowledged that Jan Aushadhi medicines were more economical than branded medications, and 91% believed that the use of generic medicines could reduce overall medicine expenditure, particularly for chronic disease management. Participants also highlighted that frequent stock shortages and limited therapeutic categories available in some outlets were barriers to consistent use.

Table 2: Study specific questionnaire.

No.	Questions	Options	Percentage (%)
1.	Is Jan Aushadi Kendra available in your locality?	Yes	68
		No	23
		Don't know	9
2.	Do you think that Jan Aushadhi medicine store should be available in every hospital?	Yes	86
		No	14
3.	Are you aware of the generic medicines?	Yes	84
		No	16
4.	Do you understand the difference between generic and branded medicines?	Yes	66
		No	18
		Don't know	16
5.	Would you prefer to purchase Generic medicines over branded medicines?	Yes	75
		No	25
6.	Which type of medicines are often prescribed by your medical consultant?	Generic medicines	14
		Branded medicines	73
		Don't know	13
7.	Do you prefer to buy only the specific medicines as prescribed by the doctor?	Yes	74
		No	26
8.	Have you ever asked your doctor to prescribe Jan Aushadhi medicine?	Yes	74
		No	26
9.	Do you find medicines for all types of health problems in Jan Aushadhi stores?	Yes	26
		No	46
		Don't know	28
10.	Do you think generic medicines are less cost as compared to branded medicines?	Yes	88
		No	12
11.	Do you think that using generic medicines will help you to reduce medicine cost?	Yes	91
		No	9
12.	Do you think that Generic medicines are not effective as compared to that of branded medicine?	Yes	27
		No	47
		Don't know	26
13.	Do you think is there any difference in the quality of generic medicine as compared to branded medicine?	Yes	36
		No	39
		Don't know	25
14.	Do you think that generic medicines has more side effects than that of brand medicines?	Yes	75
		No	25
15.	Do you think that government should implement law in such a way that all the medical practitioners should prescribe only Jan Aushadhi medicine?	Yes	75
		No	25
16.	When was Jan Aushadhi medicine launched in India?	2008	57
		2009	21
		2010	22

About 27% thought that Jan Aushadhi medicines are equally efficacious as branded medicines, and all of them believed that Jan Aushadhi medicines are equally safe. In terms of quality perception, 36% (n=519) opined that generic medicines were of good quality, while 25% (n=334) expressed concerns that generic medicines may cause side effects. The remaining participants conveyed confidence in the safety of generic medicines, particularly those administered orally. Furthermore, 42% believed that improved labeling and packaging would enhance public trust in generic medicines. Overall, 75% of participants supported the prescription of generic medicines by healthcare professionals in the future due to their cost-effectiveness, whereas 25% remained in favor of branded medications. However, only 57% of participants (n=751) correctly answered a key question, suggesting that awareness regarding the availability of generic medicines at Jan Aushadhi stores remains suboptimal. This study highlights the need for targeted educational initiatives and stronger advocacy by healthcare professionals to promote generic medicine use and improve accessibility across both urban and rural populations.

DISCUSSION

The findings from this study provide valuable insights into the public perception and awareness of Jan Aushadhi medicines among residents of Mysuru city. Al-Jumaili et al in their study, main aim was to explore the knowledge, perceptions, and attitudes of Iraqi physicians regarding generic and locally manufactured medicines.⁸ The demographic distribution indicated a predominance of young adults and a slightly higher participation of females. This age distribution aligns with similar studies such as that by Sadiq et al, where younger populations were more involved in evaluating healthcare initiatives, possibly due to their higher digital literacy and greater engagement on social platforms.⁵ A significant proportion of the participants were aware of Jan Aushadhi Kendras (JAKs), which reflects a moderately high level of public outreach. However, awareness still lags behind optimal levels when compared with the scale and importance of the PMBJP initiative.⁵ An observation from the study is that while 84% of participants were aware of the existence of generic medicines, only 66% understood the difference between generic and branded drugs. This knowledge gap could lead to misconceptions about efficacy, as reflected by the finding that only 27% of respondents believed generic medicines to be more effective than branded medicines. Deb et al, students & interns were aware about generic medication but their perception toward generic medicines was negative.⁹ Furthermore, 47% lacked clarity, and 26% were completely unsure, highlighting the need for educational interventions targeting both the general public and healthcare providers. The economic advantage of Jan Aushadhi medicines was widely acknowledged. These results are consistent with studies by Mukherjee and Deshpande et al, who emphasized the affordability of

PMBJP medicines despite inconsistent pricing for some drugs.^{3,10}

However, a concern was the low prescription rate of generics by physicians only 26% of participants reported ever requesting generic prescriptions, and 73% indicated doctors continued to prefer branded medicines. This reflects ongoing hesitancy among healthcare providers, potentially due to concerns about quality and efficacy. Furthermore, only 36% of participants perceived generic medicines as high quality, and believed they could cause side effects. Aivalli et al in their study, Negative perceptions of generic medicines and preferential promotion of branded medicines over generics by pharmaceutical companies could influence prescriber behaviour and affect trust in healthcare provided in public services.¹¹ Such concerns suggest a lack of trust in generic formulations, which may hinder widespread acceptance. Similarly in many studies have shown that public perception towards generic medicine is different and most of the public recommend branded medicine over generic medicine. Therefore, while the JAS has significantly improved access to affordable medicines, enhancing public education and encouraging physician endorsement remain critical to achieving broader acceptance and utilization of generic drugs in India.¹²⁻¹⁴

CONCLUSION

This study evaluated public awareness and perception of Jan Aushadhi medicines among residents of Mysuru. The findings revealed that while a significant proportion of the population is aware of Jan Aushadhi Kendras and acknowledges the economic benefits of generic medicines, there remains a considerable gap in understanding their efficacy and quality. The limited prescribing of generic medicines by healthcare providers further reflects persisting concerns within the healthcare community. These results emphasize the need for strengthened public education initiatives and physician engagement to build trust in the JAS. Addressing misconceptions and promoting evidence-based awareness can enhance the acceptance and utilization of generic medicines. Conducting such studies in other regions and correlating economic status with medicine affordability could offer broader insights for national health policy and program implementation.

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