# Consumer Awareness and Adoption of Nutraceutical Products in India

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## Abstract:

Nutraceuticals, products that sit at the crossroads of food and medicine, have moved from a niche wellness category to a mainstream part of everyday consumption in India. This paper examines how aware Indian consumers are of nutraceutical products, what pushes them toward adoption, and what continues to hold a large section of the population back. Drawing on recent market analyses and consumer behaviour research, the paper finds that awareness is rising quickly in urban India on the back of preventive-health messaging, rising disposable incomes, and heavy e-commerce penetration, yet remains uneven across income groups, education levels, and rural-urban lines. Adoption is shaped less by scientific literacy than by trust: word-of-mouth, family influence, and recommendations from gym trainers or pharmacists often matter more than clinical evidence. Regulatory ambiguity, price sensitivity, and doubts about product authenticity are identified as the main constraints on wider adoption. The paper closes with practical suggestions for manufacturers, regulators, and health communicators aiming to convert awareness into sustained, informed use.

## 1. Introduction:

The word nutraceutical, a blend of "nutrition" and "pharmaceutical," describes any substance that is technically a food but is consumed for a health or medical benefit rather than for taste or hunger alone (Ramdasi et al., 2023). This includes dietary supplements, fortified foods, probiotics, herbal extracts, and functional beverages. In India, this is not entirely a new idea. Long before the term existed, households were adding turmeric to milk for immunity or fenugreek to curries for digestion. What has changed is the scale and the packaging: what used to be kitchen wisdom is now sold as capsules, protein sachets, and immunity gummies, marketed through Instagram reels and quick-commerce apps.

The Indian nutraceutical sector has grown rapidly over the last decade, and most industry estimates place its current value somewhere between eight and fifteen billion US dollars, with projections of continued double-digit growth through 2030 (Ken Research, 2025). This growth, however, is not simply a story of production capacity. It is fundamentally a story of consumer behaviour: whether people know these products exist, whether they trust them, and whether they are willing to pay for them repeatedly rather than as a one-off purchase driven by a health scare or a festival discount.

This paper looks specifically at that behavioural layer. It asks three linked questions. First, how aware are Indian consumers of nutraceutical products and their claimed benefits? Second, what factors convert that awareness into an actual purchase, and eventually into habitual use? Third, what stands in the way of adoption, particularly for consumers outside metro cities? The

discussion draws on peer-reviewed consumer behaviour studies, industry market reports, and India's regulatory documentation to build a rounded picture rather than relying on any single data source.

## 2. The Indian Nutraceutical Landscape

Before discussing awareness, it helps to sketch the market these products sit in. India's nutraceutical industry is generally split into three broad segments: dietary supplements (vitamins, minerals, protein powders, and herbal capsules), functional foods and beverages (fortified milk, probiotic drinks, energy bars), and nutricosmetics (collagen and biotin-based skin and hair products). Dietary supplements currently hold the largest share of this market, largely because of the growing base of health-conscious, working-age consumers in cities (Ken Research, 2025).

Metro cities such as Mumbai, Delhi, and Bengaluru continue to dominate consumption, a pattern tied closely to purchasing power and access to premium retail and healthcare infrastructure (Ken Research, 2025). At the same time, the sector is no longer purely an urban, upper-income phenomenon. Domestic players such as Dabur, Himalaya, and Patanjali have used their existing distribution networks, built originally for Ayurvedic and herbal products, to push nutraceuticals into semi-urban and rural markets at price points far lower than imported multivitamin brands (Jadhav et al., 2023). This dual structure, premium urban demand alongside a value-driven mass market, is a distinctive feature of India's nutraceutical economy and explains why awareness studies conducted in different regions often report quite different results.

Two structural forces deserve mention because they resurface throughout this paper. The first is India's own pharmaceutical manufacturing base, which gives domestic nutraceutical companies an existing supply chain and formulation expertise to build on (Majeed et al., 2025). The second is e-commerce, which has changed how products reach consumers who have no nearby pharmacy stocking a wide supplement range; industry data associates a large share of recent category growth with online retail and quick-commerce delivery of sports nutrition and immunity products in particular.

## 3. Understanding Consumer Awareness

Awareness in this context is not a single, uniform thing. It can mean simply knowing that a product category exists, understanding what specific ingredients are supposed to do, or being able to judge whether a health claim printed on a label is credible. Studies that have measured this in India tend to find the first kind of awareness, bare recognition of the term or the product,

is now fairly widespread in urban samples, while the second and third kinds, ingredient-level and claim-level literacy, remain considerably weaker.

A survey-based study covering 650 consumers and 50 clinicians found that most respondents had heard of nutraceuticals and associated them broadly with immunity and general wellness, yet fewer could correctly distinguish a nutraceutical from an ordinary fortified food or a prescription supplement (Menon et al., 2021). The same study found that willingness to use these products was shaped strongly by age group, gender, and occupation, with working professionals in their late twenties and thirties showing the highest reported usage. Interestingly, the clinicians surveyed in that study were considerably more cautious about efficacy claims than the general public, suggesting a gap between professional and lay understanding that nutraceutical marketing does not always bridge.

This gap matters because awareness built mainly through advertising and social media tends to be shallow and benefit-focused ("boosts immunity," "aids muscle recovery") rather than mechanism-focused. Jadhav et al. (2023) note that in several Asian markets, including India, younger consumers are drawn to energy drinks, protein powders, and fortified foods largely because these products are visible in gyms, on social media, and in peer circles, not necessarily because consumers have independently evaluated the underlying science. This is not unique to nutraceuticals, but it does mean that measured awareness can overstate genuine understanding.

A further distinction worth making is between awareness of the product category and awareness of where to buy it safely. Pharmacies remain a dominant channel because consumers associate them, rightly or wrongly, with a baseline level of product safety, given their role in dispensing medicines (Jadhav et al., 2023). Specialty health stores and e-commerce platforms follow behind. This channel-linked trust is itself a form of awareness: many consumers judge a nutraceutical product's legitimacy by where it is sold rather than by reading its ingredient panel.

## 4. Drivers of Adoption

Several overlapping factors explain why awareness is now translating into actual purchase behaviour for a growing share of Indian consumers.

Preventive health orientation. The clearest driver is a shift from treating illness to preventing it. India's preventive healthcare sector has been estimated to be worth close to two hundred billion dollars, growing at over twenty percent annually, and nutraceuticals sit squarely inside this shift (Research and Markets, n.d.). Rising household income, urban

lifestyles with limited time for home-cooked balanced meals, and an ageing population managing lifestyle diseases all feed into this orientation.

The COVID-19 pandemic as an accelerant. Multiple sources point to the pandemic as a turning point rather than a gradual trend. Consumer demand for multivitamins, zinc, and immunity-linked supplements rose sharply worldwide during the pandemic's early waves, and Indian consumers followed a broadly similar pattern, shifting from an occasional-use mindset to more routine daily supplementation (Jadhav et al., 2023). This period also normalised buying health products online, which had lasting effects on distribution.

Social and interpersonal influence. Contrary to what might be expected of a health-related purchase, clinical evidence is often not the strongest motivator. Consumers report being more persuaded by other people's lived experience, whether that is a friend's weight-loss result or a gym trainer's recommendation, than by scientific literature (Jadhav et al., 2023). Nutritional and healthcare professionals who speak positively about a product category tend to expand its consumer base considerably, while sceptical professionals have the opposite effect.

Trust in traditional and Ayurvedic roots. India's long-standing familiarity with herbal remedies gives domestically positioned nutraceuticals an advantage that imported vitamin brands do not automatically enjoy. Products marketed around turmeric, ashwagandha, or amla tend to overcome scepticism faster because they map onto pre-existing cultural knowledge rather than requiring consumers to learn something entirely new (Menon et al., 2021).

Packaging, labelling, and price framing. Consumers use visible cues, attractive packaging, clear nutritional information, and eco-friendly materials, as proxies for product quality when they cannot independently verify a health claim (Jadhav et al., 2023). Price also plays a dual role: while affordability expands the addressable market, a very low price can itself raise doubts about authenticity, especially for herbal or Ayurvedic-branded products where consumers associate higher cost with genuine sourcing.

Convenience and channel access. The expansion of e-commerce and quick-commerce has lowered the effort required to try a new product. Categories such as sports nutrition, whose core buyers are younger and more digitally native, have grown particularly fast through online channels (Research and Markets, n.d.).

## 5. Barriers and Challenges to Adoption

Despite these favourable conditions, adoption is far from universal, and several recurring barriers appear across the literature.

Regulatory ambiguity and the food-versus-drug question. Nutraceuticals in India are legally treated as foods under the Food Safety and Standards Act, 2006, even though many of

them are marketed with therapeutic-sounding claims (Ramdasi et al., 2023). This creates confusion for consumers who are unsure whether a product has been through the same scrutiny as a medicine, and it creates space for weakly substantiated health claims to reach the market. Some scholars have argued that India's economic and educational diversity makes a purely food-based regulatory model risky, because a large share of the population may lack the literacy to independently judge a product's claims, and have called for a more rights-based, consumer-protection-oriented regulatory approach that sits between the food model and the drug model.

Price sensitivity outside metro markets. While urban, upper-income consumers may treat a supplement as a routine monthly expense, this is a harder sell in smaller towns and rural areas where health spending competes directly with other household priorities. This is one reason large domestic players have leaned on their existing low-cost herbal product lines rather than premium imported formulations to enter these markets (Jadhav et al., 2023).

Doubts about authenticity and adulteration. Because nutraceuticals occupy a regulatory grey zone, counterfeit and substandard products do circulate, and awareness of this risk makes some consumers cautious even when they are otherwise interested in the category. Trust in a specific brand or retail channel becomes a substitute for trust in the entire category.

Professional scepticism. As noted earlier, not every doctor, dietician, or pharmacist is convinced of a given nutraceutical's benefit, and when professionals are hesitant to discuss or recommend these products, some consumers are actively discouraged from trying them (Jadhav et al., 2023). This is a barrier that pure advertising spend cannot easily overcome, since word from a trusted clinician tends to carry more weight than a brand's own claims.

Limited scientific literacy for self-assessment. Even where awareness of a product's existence is high, the ability to evaluate a specific health claim, for instance, distinguishing a well-supported claim about vitamin D and bone health from a vaguely worded “detox” claim, remains uneven, and this gap is more pronounced outside urban, educated segments (Menon et al., 2021).

## 6. Regulation and Its Bearing on Consumer Trust

Regulation matters here not just as a legal backdrop but as a trust mechanism. The Food Safety and Standards Authority of India (FSSAI) is the primary body overseeing the manufacture, labelling, and sale of nutraceutical products, and it has steadily tightened certification requirements over recent years (Ken Research, 2025). For consumers, visible regulatory compliance, an FSSAI license number, a clear ingredient list, permitted health claims rather than disease-cure claims, functions as a shortcut for judging safety without needing technical expertise.

However, several reviewers have pointed out that India's current framework was designed primarily around food safety rather than around the specific risks of bioactive, concentrated supplements, and that this mismatch leaves room for inconsistent enforcement (Ramdasi et al., 2023). A product can be classified as a food supplement and avoid the clinical evidence standards expected of a drug, even while implying therapeutic benefits close to those of a drug. This has led to calls for harmonised, tiered regulation that treats higher-risk nutraceutical categories with the scrutiny they arguably deserve, while keeping simpler categories, such as fortified staple foods, under a lighter regulatory touch.

From a consumer-awareness standpoint, the practical implication is that regulatory literacy, knowing what an FSSAI license actually guarantees and what it does not, is itself an underdeveloped part of public understanding. Building this literacy could do more to protect consumers than adding further rules that most buyers will never read.

## 7. Demographic and Regional Variation

Adoption patterns are not evenly spread across India's population, and treating "the Indian consumer" as a single entity would misrepresent the picture. Age is one clear axis: younger, working professionals report the highest usage of protein supplements, sports nutrition, and immunity products, while older consumers are more likely to use nutraceuticals for chronic, lifestyle-related conditions such as joint health or cholesterol management (Menon et al., 2021).

Gender differences also appear consistently, with categories such as skin and hair nutricosmetics skewing toward women and sports nutrition skewing toward men, although this gap appears to be narrowing as protein and general wellness products are marketed to broader audiences. Education and occupation matter too: consumers with more exposure to health information through their work or study are more likely to seek out ingredient-level detail rather than relying purely on brand reputation (Jadhav et al., 2023).

Geography remains perhaps the most persistent divide. Metro consumption is driven by disposable income, denser retail and pharmacy networks, and greater comfort with online shopping, while smaller towns and rural areas depend more heavily on trusted local retailers, and on legacy Ayurvedic and herbal brands that have decades of local goodwill (Ken Research, 2025). Any national strategy for expanding nutraceutical adoption, whether from a business or public-health perspective, needs to account for this rather than assuming that urban awareness campaigns will automatically translate to rural uptake.

## 8. Discussion

Bringing these threads together, a fairly consistent pattern emerges. Awareness of nutraceuticals in India has grown substantially, but it is awareness of benefit rather than awareness of substance: consumers know these products are supposed to help with immunity, energy, or specific health conditions, without necessarily being equipped to evaluate whether a given product delivers on that promise. Adoption, in turn, is driven less by scientific persuasion and more by social proof, cultural familiarity, and channel trust, whether that channel is a pharmacy counter, a gym trainer, or a family elder's home remedy repackaged as a modern supplement.

This has two practical implications. For manufacturers and marketers, the evidence suggests that investment in transparent labelling, clear ingredient communication, and credible third-party or regulatory certification is likely to build more durable brand loyalty than short-term promotional pricing, particularly as consumers become more conscious of authenticity risks. For regulators and public health communicators, the gap between category awareness and claim literacy suggests that consumer education, teaching people what an FSSAI license does and does not guarantee, for instance, may be as important as tightening the rules themselves.

It is also worth flagging a limitation that runs through most of the available research: much of the underlying consumer data comes from urban, English-literate, and digitally active samples, simply because these are the easiest populations to survey. This likely means that national awareness and adoption figures are skewed upward relative to the country as a whole, and that rural and lower-income consumer behaviour toward nutraceuticals remains comparatively under-studied.

## 9. Conclusion

India's nutraceutical market is expanding on the back of a genuine shift toward preventive health, a large young population that has normalised supplementation, and a distribution ecosystem that increasingly reaches beyond metro cities. Consumer awareness of the category is real and growing, but it remains uneven, both in depth (recognition versus genuine understanding) and in spread (urban versus rural, younger versus older, higher-income versus lower-income). Adoption is driven substantially by trust signals such as word-of-mouth, professional endorsement, and cultural familiarity with herbal traditions, rather than by independent evaluation of clinical evidence. Regulatory ambiguity, authenticity concerns, and uneven price sensitivity remain the clearest brakes on faster adoption. Closing the gap between knowing a product category exists and knowing how to judge it responsibly will likely do more

for the long-term health of this industry, and for the consumers it serves, than continued growth in advertising spend alone.

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