

Folk Medicine in the Philippines: A Phenomenological Study of Health-Seeking Individuals

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Abstract

Background: Folk medicine refers to traditional healing practices anchored in cultural beliefs of body physiology and health preservation. Reflective of indigenous heritage, it fosters a better understanding of health and disease, healthcare systems, and biocultural adaptation. In the Philippines, Quiapo is a well-known site for folk medicine services, cultural diversity, religious practices, and economic activities. **Methods:** This study utilized a phenomenological approach to comprehend the lived experiences of health-seeking individuals and the meaning behind their acquisition of folk medicine products. Using convenience sampling, seven participants acquiring folk medicine products in Quiapo on the day of data collection were approached and interviewed on separate instances. The collected data subsequently underwent thematic analysis. **Results:** Analysis revealed three emergent themes: health-seeking behavior, sources of knowledge, and folk medicine utilization. Health-seeking behavior was linked with the participants' purpose of going to Quiapo, reasons for utilizing folk medicine, experiences in using folk medicine, and beliefs associated with the product bought. Sources of knowledge tackled the participants' sources of information about Quiapo and its products. Folk medicine utilization relates to the type of product bought, its perceived medicinal use, and its history of usage. **Conclusion:** Folk medicine is perceived to be effective in alleviating health concerns. The acquisition of such products is attributed to satisfaction from prior experience, distrust in the current healthcare system, family tradition, and intention to supplement existing medical treatment. This study provides health professionals a better understanding of patients who patronize folk medicine, subsequently aiding them in providing a holistic approach to treatment.

Key Words: Traditional medicine; Medical anthropology; Folk medicine; Indigenous medicine; Health care seeking behavior; Philippines (Source: MeSH-NLM).

Introduction

Medical anthropology is hardly tackled in the field of medicine as it deviates from conventional standards. It is a branch of social sciences that draws upon social, cultural, and biological anthropology to better understand factors influencing human health. This includes the science behind the experience and explanation of illness and disease, the prevention and treatment of sickness, and the healing processes. Likewise, it also involves other factors such as the social relations of therapy management, the biocultural and political study of health ecology and its adaptations, the cultural importance and utilization of pluralistic healthcare systems in culturally diverse environments, and even magic and sorcery.¹⁻³

Folk medicine is a field that falls under medical anthropology. It refers to traditional health knowledge and healing practices anchored on indigenous beliefs regarding body physiology and health preservation.⁴ It incorporates herbals or plant-based medicines, animal derivatives, natural minerals, spiritual therapies, manual techniques, and physical exercises, which are either applied singularly or in combination, with the intention to either maintain wellbeing or to diagnose, treat, and prevent illness.⁵ It exists today as a diverse blend of traditional medicine that has been widely practiced in China, India, and Greek Persia since time immemorial, along with western medicine, while retaining its unique socio-cultural characteristics.⁶ These practices foster a people-centered, cross-cultural, transdisciplinary, and critically reflective approach to both the structural and social models of health.⁷

In the Philippines, folk medicine is an organized body of traditional practices and beliefs that mirrors the country's indigenous culture and heritage. It basks in locally accepted concepts of disease causation, utilizes distinct techniques and human instinct as the means to reach a diagnosis, and applies unique methods of treatment, distinct from the conventional practices of western medicine.^{8,9}

Quiapo, located at the heart of the City of Manila, is well-known as a center for religious and economic activities nationwide. It serves as a heritage site for cultural diversity and is a thriving area for businesses as its commercial centers continuously expand annually. It is home to the largest market in the Philippines, known as the Quiapo Market, which is situated right beside the famous and frequented Quiapo Church.^{10,11} Given the diversity of cultures eminent in the Philippines, a wide array of herbal concoctions is openly displayed on kiosks that span the whole area of the market. Despite being famed for its abortive herbal concoctions and love potions, herbal remedies are also readily available for healing physical ailments, such as coughs, colds, headaches, or fevers.¹¹⁻¹³ In addition, Filipinos can also find perhaps the most exotic products and services one could ever be interested in, such as magic candles, pickled snakes, jarred scorpions, amulets, palm and tarot readers, and occult services.^{11,12} With that said, diversity deems to be an appropriate theme to associate with Quiapo. Moreover, it is a religious site for people of different religions but has gained notoriety as it also serves as a hub for criminal activities. It is seen as a thriving marketplace by vendors, yet it also represents various main

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symbols of urban poverty.¹¹ Simply put, Quiapo is a place for a wide array of things and this diversity is probably what enables Filipinos, regardless of existing divisions in our country in terms of identity, social class, religion, culture, education, and politics, to identify with Quiapo, to truly find a place where any type of individual can belong.

Folk Medicine History and Culture

Folk medicine refers to the treatment of illness through traditional medicine – rather than Western or modern medicine – wherein herbs and other natural substances are the primary means for medication.^{14,15} The credibility of folk medicine revolves around the fact that it was established even before the era of modern medicine – dating back to ancient Sumerians 5,000 years ago, rooted in the primary knowledge of our great ancestors regarding the use of plants as medicine.¹⁶ For the longest time, this unconventional approach towards healthcare has been one of the most controversial medical issues that unfortunately still remains barely explored to date, especially in the advent of technological advancements. Thus, it is believed for this very reason, that widespread misconceptions, and thereby lack of understanding, rampantly exist. The fact that the reason for its enduring popularity among its patrons still goes beyond our current knowledge already serves as a strong argument as to why this field ardently needs attention and further studies. These concerns have ignited the genuine desire to bridge the gap, not only for the benefit of its consumers and producers, but for the curious minds as well.

Its global establishment, especially in terms of culture and religion, led to garnering of trust and acceptance among its patrons, enduring the times as it is carried over to our generation today. In any particular place, the strong culture and persistent beliefs influence the usage of herbal medicines and reflect a prevailing culture or economic condition where a healthcare system is absent or lacking.¹⁷ The patronage of herbal therapies continues to grow rapidly across the world with an estimation of four billion people in developing countries now resorting to these products as the primary health interventions to various diseases and illnesses. Most of these communities view the use of herbal medicine as a vital part of their culture.¹⁸

Determinants of Health-Seeking Behavior

In both rural and urban areas in the Philippines, folk medicine and western medicine systems are being utilized simultaneously. It has been a curiosity for many how patrons of folk medicine continue to avail of such. However, they fail to consider that deciding between these two approaches depends on various, but equally valuable, factors that lead to a person's health-seeking behavior. Determinants such as culture, inherited health approaches, familial background, geographical location, level of education, caste or socioeconomic status, environment, lifestyle, healthcare systems in the community, and perspective towards healthcare practitioners can play important roles in their health-seeking behavior.^{9,15,17} It was also found that an individual's religion and profound sense of spiritual consciousness predisposes them into viewing therapeutic value based on faith or intuition rather than scientific reasoning.¹⁸

Having a low economic status has also led to inadequate health awareness and lesser-quality healthcare.^{9,15} Due to financial constraints, poor and low-income Filipinos frequently turn to folk medicine services and products because of its affordability. Modern medical practitioners charge expensive fees for their services, while in contrast, albularyos or folk healers open-heartedly accept anything their patients can give them as a form of gratitude or payment.^{12,15,19} This is the current situation of the Philippine healthcare system due to the fact that the country has a mixed health system of both private and public sectors, the advent of exponentially growing private sectors, and the lack of an effective means to properly standardize private for-profit physicians.²⁰ Despite the government's efforts in implementing substantial health sector reforms, healthcare in the Philippines remains to be inaccessible and inequitable for many Filipinos, especially for the

poor.²¹ Moreover, out-of-pocket medical expenditures, including medicines and hospitalization, continue to be an economic burden.^{22,23} More than 50% of the total health-related expense of the country fall under out-of-pocket expenses, which may potentially worsen the poverty status of many Filipinos.^{20,21}

Other determinants include personal relationships and past performance. An albularyo or faith healer's popularity among patients greatly depends on their skills as healers and their relationship approach towards their patients. Moreover, patients tend to seek treatment from the same healer who provided them with a prior successful treatment or pleasant relationship.¹⁹ This is because most folk healers ask their patients to visit them regularly to follow up on the status of their disease, allowing them to better understand the progress of treatment while maintaining constant communication with their patients.²⁴

Folk Medicine in the Philippines

In the Philippines, folk medicine practices such as *orasyon* or *bulong* (mystical prayers), *himulso* (pulse checking), *pagtatawas* (diagnostic ritual using candle wax dropped in a basin of water), *pasubay* (determining the cause of sickness and possible treatment), *pangalap* (searching of medicinal plants), *tayhop* (gentle blowing), *tutho* (saliva blowing), *hilot* (traditional massage), *tapal* (applying folk medicine on the affected area), *pangontra* or *kontra-usog* (carrying an amulet to prevent diseases), *anting-anting* or *pampaswerte* (lucky charm), and *barang* (sorcery), remain to be rampant.^{9,15,25-27} Studies show that the most evident factor that comes into play is religion, which is heavily influenced by the strong religious beliefs of Filipinos.^{9,25} Prior to the colonization of Spain, Filipinos had already established their religious beliefs and practices.²⁸ Despite disapproval by medical practitioners, some individuals nowadays still seek help from folk medicine healers prior to consulting conventional physicians when it comes to treating their ailments. Some of them believe that diseases were traditionally theorized to come from either natural or supernatural origins. Natural forces that are deemed to influence the well-being of Filipinos include stress due to overworking, sleep deprivation, emotional stresses, unsanitary living or work environment, overeating, insufficient nutrition or malnutrition, overexposure to natural elements, and imbalance of hot and cold elements.¹⁹ Meanwhile, Filipinos believe that diseases brought about by supernatural causes are due to the displeasure or irritancy of spirits found in our natural environment, demonized souls, evils, witches, sorcerers, or punishment from supernatural beings such as deities and gods.^{9,19,29}

Moreover, the persistent presence of *albularyos* (faith healers) and folk medicine establishments in the country is an indication of the continued patronage and reliance of Filipinos on folk medicine. The *albularyos* themselves serve as primary informants due to their popularity in healing.^{9,15,25} An example of the said scenario can be observed in Quiapo, Manila, wherein one can freely acquire folk medicine services and different types of medicinal plants to combat illnesses.^{12,30}

Methods

Research Goal and Design

This study utilized a qualitative research methodology in understanding the lived experiences of health-seeking individuals in acquiring folk medicine in Quiapo, Manila and describing the meaning behind their acquisition of these services. Specifically, it used a phenomenological research design since its primary aim was to encapsulate the full meaning of the lived experiences of the participants.

Participants and Sampling

Only one criterion was applied in selecting the participants to ensure that the data collected was as diverse as possible. The participants should be health-seeking individuals who are availing folk medicine services in Quiapo, situated in Manila. Using a convenience sampling

technique, the authors were able to interview seven participants, based on the premise that they have given their full consent to be the respondents of the study through informed consent forms, which were thoroughly explained to them. After they signed said form, participants answered the interview questions and shared their experiences to the best of their knowledge. The participation of every subject in the research entailed no risk or harm. Likewise, no monetary payment was given to the participants for their participation in the study. With utmost respect towards confidentiality, all gathered information was kept confidential. To protect the identities and privacy of the participants, their statements were written in the transcriptions under aliases, which they chose for themselves, rather than by their real names.

Instrument

The authors developed questions based on related studies on folk medicine,^{11-19,25-27} that aided them to probe deeper and to witness the experiences of the participants first-hand as if they were their own. The questions were carefully formulated to ensure that they were free from any form of prejudice, bias, or influences that may otherwise ruin the essence of such an approach, which is to interpret the phenomena regarding the experiences and meanings that individuals bring to them. In addition, the authors made sure that the questions included in the interview guide would not in any way violate the participants' rights as human beings, nor will it be used to discriminate against health-seeking individuals under any circumstance. The interview guide was also carefully reviewed and approved by the Department of Family and Community Medicine of Centro Escolar University School of Medicine. It was written and executed in the Filipino language to reduce the communication gap between the authors and the participants.

Ethics Approval

A proposal of the study was presented to the Ethics Review Committee of the Centro Escolar University School of Medicine for approval. After a thorough ethical review of the proposal, the study was granted approval on April 10, 2018, valid until June 30, 2018.

Data Collection

On the day of data collection, the authors headed to the folk medicine area of Quiapo and stationed themselves for an entire day while observing ongoing trades between sellers and consumers and taking down personal reflections. Health-seeking individuals were then physically approached on separate instances while they were acquiring folk medicine products. Once entertained by a prospective participant, the purpose and procedure of the interview were then discussed. The authors also made it known that the interview will be conducted at a glass-enclosed section of a nearby fast-food restaurant, which was three minutes away by foot to facilitate a noise-free and conducive environment for the interview. The willing participant then proceeded to the restaurant to be interviewed by the authors, bringing along the folk medicine product they had just bought. Upon arrival at the restaurant, the authors again thoroughly explained the purpose and procedure of the interview, entertaining questions and clarifications from the participant. The participant was then asked to read, sign under their own volition, and keep a copy of their informed consent form. Subsequently, the interview proper commenced and lasted for at least 30 minutes and a maximum of 1 hour. The interview proper was documented through writings, as well as through voice recorders for accurate data transcription purposes. Confidentiality of the participant's identities has been maintained. After the data gathering, transcription of the interview recordings was carried out by the same interviewers of each participant and were subsequently validated by other authors of this study.

Data Analysis

This qualitative study utilized thematic analysis to interpret its findings. It focused on the important questions, topics, time periods, and events of the experiences of each individual. Through the process of horizontalization, all statements that were relevant to the participant's

experience were listed, and each comment was considered to hold equal value. The findings were then interpreted and categorized accordingly into codes, which were all held verbatim. This was done by going through all interview transcriptions and labeling words, phrases, and sections of text that were related to the research questions of interest. Then, the codes were grouped into themes that aided the authors in answering each research question. Finally, the themes were organized into coherent categories that summarized and brought meaning to the text, enabling the authors to formulate the essences of the experiences of the participants, both individually and as a whole. All of these were manually done, without the use of any qualitative software tool.

Results

Sociodemographic Profile of Participants

Out of seven participants, the majority were female (71.43%), below 50 years old (57.14%), married (57.14%), unable to study or finish college education (85.71%), originated from the province (85.71%), unemployed (71.43%), and Catholic (85.71%) (Table 1).

Table 1. Sociodemographic Profile of Participants.

Participant	Age	Sex	Civil Status	Education	Religion
A	26	Male	Single	College Undergraduate	Catholic
B	54	Female	Widow	High School Graduate	Islam
C	47	Female	Married	High School Graduate	Catholic
D	61	Female	Married	College Undergraduate	Catholic
E	65	Female	Widow	High School Graduate	Catholic
F	39	Female	Married	College Undergraduate	Catholic
G	43	Male	Married	College Graduate	Catholic

Experience of Participant A

Participant A, a 26-year-old male from the province of Iloilo who currently lives in Quezon City, has been availing folk medicine products for six years. His purpose of going to Quiapo was to buy *kakawate* leaves and coconut oil for his rashes. He boils the *kakawate* leaves, which he uses for bathing, and applies the coconut oil over the affected skin. This practice began six years ago back in his province and mentioned that it goes way back to his ancestors. The rashes recurred whenever he was back in Manila. Unfortunately, the *kakawate* leaves were not common in Manila. He then recalled that he saw herbal products being sold outside Quiapo church whenever he attended church service, and so he went there to check. He stated that he had prior experience with these folk medicine products which cured the rashes. However, when asked regarding how he approaches his health when faced with other diseases, he said that it depends on the illness, adding that he will take medicine if it is already serious. Upon further probing, he stated that he would take medicine for a fever or flu, but when it comes to rashes, an oil or concoction is fine since it only involves the skin. He also revealed that he tried to remedy his rashes with Cetirizine and Loratadine. Unfortunately, it didn't seem to work, which is why he resorted to *kakawate* leaves, knowing it worked in the past.

Experience of Participant B

Participant B, a 54-year-old female from the province of Lanao del Sur who currently lives in Quezon City, bought *pito-pito* concoction in Quiapo for her diabetes even though she was taking maintenance medications. She revealed that her siblings who also had diabetes passed away because they refrained from seeking medical attention due to distrust of the efficacy of western medicine. She wanted to try taking herbal medicine on top of her maintenance medicine as she thought that it was effective. This was her first time using *pito-pito*, which was recommended to her by a friend. She stated that it is not harmful since it is "herbal." When asked about some of her experiences in herbal medicine, she stated that she stands by it as she has had prior positive experiences. However, she also believes that it might not be the case for everyone else.

Experience of Participant C

Participant C, a 47-year-old female from Manila who went to Quiapo for the first time to buy *sambong* leaves for her hospitalized husband who

is suffering from kidney disease. It was revealed that she overheard another patient in the hospital that *sambong* is an effective herbal medicine for kidney diseases that can be found in Quiapo. She appears to be hopeful that the *sambong* would be able to cure her husband's ailment. Her husband's first encounter with *sambong* was from his boss' mother when he accompanied him to the Bicol province. He was told that *sambong* is useful in treating kidney stones. Her husband bought a pile of *sambong* back home and continued using it until he no longer felt pain. In case the sickness worsens, she would bring him to the community clinic and in the worst cases, to the hospital. She resorted to herbal medicine because she thinks that hospital care alone does not suffice in bringing her husband back to full health. She even added that the doctors were not able to detect her husband's kidney disease despite having the alleged symptoms. Most of her statements from the interview suggested that she, along with her family, considers herbal medicine as effective maintenance for her husband's kidney problems.

Experience of Participant D

Participant D, a 61-year-old female from the province of Marinduque who currently lives in Quezon City, bought guava leaves in Quiapo as a supplementary medicine for her daughter's surgical wound who was recently discharged from the hospital. She shared that she only goes to Quiapo to buy herbal medicine, attend church service, or buy fruits and vegetables. She is planning to supplement the treatment of her daughter by using guava leaves since her daughter's antibiotic treatment is already finished. She stated that she prepares the leaves by boiling and applies the prepared extract topically on the surgical wound. She believes in its efficacy as the use of guava leaves extract over the wound has been practiced in their province for ages and is known to work. She happened to learn the availability of the herbal products on television and from her relatives that also used herbal medicines from Quiapo. She shared that whenever someone is going to give birth for the first time, it has been their practice to boil the leaves for bathing since they believe it will prevent complications and relapse after giving birth. When asked about her personal experience regarding the usage of herbal medicine, she said that the wound healed, explicitly expressing her trust in its effectiveness. In addition, it has been their primary source of medicine when there were no doctors in their province before. Despite already having doctors in their community, she still uses traditional medicine at present. She also said that they use herbal medicine as an adjunct to conventional medicine.

Experience of Participant E

Participant E, a 65-year-old female from the province of Pangasinan who currently lives in Manila. She went to Quiapo to buy guava leaves for her rashes and snakeroot for her diabetes. She added that she no longer trusts hospitals and doctors and explicitly stated that she lost both her husband and son because of medical negligence, expressing it with great disapproval and dismay. In addition, she firmly stated that most patients are neglected in government hospitals, which eventually leads to their deaths regardless of if they could afford its services or not. She has been using folk medicine for years now and owes most of her knowledge regarding folk medicine from a local television show called "*Healing Galing*," as well as from YouTube. On the other hand, she explained that although she still visits the hospital for check-ups, she no longer relies on the medications prescribed to her. Instead, she resorts to buying its herbal counterparts at Quiapo. Instead of Metformin, she uses snakeroot for her diabetes. On top of its superior efficacy over Metformin, she claimed that snakeroot did not give adverse effects such as vomiting episodes, which she experienced with the prior drug. She firmly believes that these remedies are far more effective than conventional medicine. Furthermore, she believes that her long-time practice of folk medicine shows that her experience with it has been positive overall, and it has led to a significantly reduced need for visits to the clinic or hospital.

Experience of Participant F

Participant F, a 39-year-old female from the province of Leyte who currently lives in Calocan City, went to Quiapo to buy *culapol*, a

traditional medicine, which she uses for dysmenorrhea, and an ointment for arthritis. She is a long-time user of *culapol* and would often take it with soft drinks. She added that it could be taken without prior food intake. She claimed that this originated from Leyte, which can now be found in Quiapo. She verbalized that it was effective for her, especially the *culapol*. It was revealed that she is the sole member in her family that relies on traditional medicine as she is not inclined to take western medicine. However, she seemed to rely on over-the-counter drugs when it comes to treating her children's ailments. After the interview, she showed the bottle of *culapol*. It was labelled "*pamparegla*," which is commonly used for stimulating menstrual bleeding. According to the vendors, *culapol* is an abortifacient.

Experience of Participant G

Participant G, a 43-year-old male from the province of Cebu who currently lives in Manila, is a long-term user of folk medicine. He went to Quiapo to buy an ointment for rashes, and white flower oil, which he uses for dizziness. He stated that he would buy these in bulk prior to boarding the ship, and even recommended them to his fellow seafarers, which he started using back in his high school years. Despite his inclination towards folk medicine, he stated that whenever he gets a medical condition that is not related to skin rashes or dizziness, he would seek proper medical attention and followed the medication prescribed by doctors. With this statement of his, it is safe to say that his health-seeking behavior involves western and folk medicine. When asked about the effectiveness of the ointment and white flower oil, the participant quickly responded that they are very effective. Moreover, he also shared that he uses the same ointment for his children whenever they would experience itchiness, especially due to diaper rash. This signifies that the use of herbal medicine is also being practiced in their family.

The table below contains a summary of the products bought by the participants, including their scientific names and their medicinal uses perceived by the participants (Table 2).

Table 2. Folk Medicine Products Bought by the Participants.

ID	Common Name of Product Bought	Product's Scientific Name	Perceived Medicinal Use
A	Kakawate leaves	<i>Gliricidia sepium</i>	Rashes
	Coconut oil	<i>Cocos nucifera</i>	
B	Pito-pito herbal concoction*	<i>Premna odorata blanco</i>	Diabetes
		<i>Pimpinella anisum</i>	
		<i>Lagostroemia speciosa</i>	
		<i>Psidium guajava</i>	
		<i>Mangifera indica</i>	
		<i>Pandanus amaryllifolius</i>	
C	Sambong leaves	<i>Coriandrum sativum</i>	Kidney disease, Kidney stones
		<i>Blumea balsamifera</i>	
D	Guava leaves	<i>Psidium guajava</i>	Wounds
E	Guava leaves	<i>Psidium guajava</i>	Rashes
	Snakeroot	<i>Rauvolfia serpentina</i>	Diabetes
F	Culapol wine	-	Dysmenorrhea
	Herbal ointment	-	Arthritis
	Herbal ointment	-	Rashes
G	White flower oil**	<i>Mentha</i>	Dizziness
		<i>Eucalyptus globulus</i>	
		<i>Gaultheria procumbens</i>	
		<i>Cinnamomum camphora</i>	
		<i>Lavandula angustifolia</i>	
		<i>Mentha piperita</i>	

*Pito-pito, a herbal concoction, is a blend of 6 kinds of leaves and 1 type of seed, namely, the leaves of alagao, anise, banaba, guava, mango, and pandan, and seeds of coriander. **White flower oil refers to a Chinese oil-blend mixture of menthol, eucalyptus, wintergreen, camphor, lavender, and peppermint.

Conceptual Analysis

The authors have developed basic themes from the codes and organized them into primary and secondary organizing themes that eventually led to the global theme. The coding statements gave way to twenty-six basic themes that were grouped into eight secondary organizing themes and further arranged into three primary organizing themes, paving the way to the central idea of the study which is the experiences of health-seeking individuals acquiring folk medicine services from Quiapo (Figure 1, Table 3).

The first primary organizing theme, "health-seeking behavior," has four secondary organizing themes, namely 1) beliefs associated with the product bought, 2) experiences in using folk medicine, 3) purpose of going to Quiapo, and 4) reasons for utilizing folk medicine. For the first secondary organizing theme, different ideas arose from the participants' answers regarding their views on the product that they bought: 1) "many are saying that it is good," 2) "similar practice in the province," and 3) "effective for me." One basic theme was developed under the second secondary organizing theme regarding the participants' experiences in using folk medicine. All the participants' answers were organized with the basic theme, "it cured me." The authors came up with a single basic theme under the third secondary organizing theme regarding the participants' purpose of going to Quiapo, which is "bought medicine." Many basic themes emerged under the fourth secondary organizing theme that discusses the participants' reasons for utilizing folk medicine, namely 1) "supplemental medicine," 2) "does not trust doctors," 3) "I really use it," 4) "in the province," and 5) "because it is herbal."

The second primary organizing theme, "folk medicine utilization," has three secondary organizing themes, namely 1) medicinal use of product, 2) product bought, and 3) history of usage. Under its first secondary organizing theme, five basic themes emerged which include 1) "medicine for diabetes," 2) "for itchininess," 3) "topical for wound care," 4) "for the kidney," and 5) "stomach ache." For the second secondary organizing theme regarding the products that were bought by the participants, three basic themes were developed, namely 1) "medicine for itchininess," 2) "culapol wine," and 3) "herbal medicine." Meanwhile, four basic themes emerged from the third secondary organizing theme regarding the participants' history of usage, which are 1) "1994," 2) "taken last December 2017," 3) "six years," and 4) "will only try now."

The third primary organizing theme, "sources of knowledge", has a single secondary organizing theme that tackled the source of information about Quiapo and its products. Such, in turn, paved the

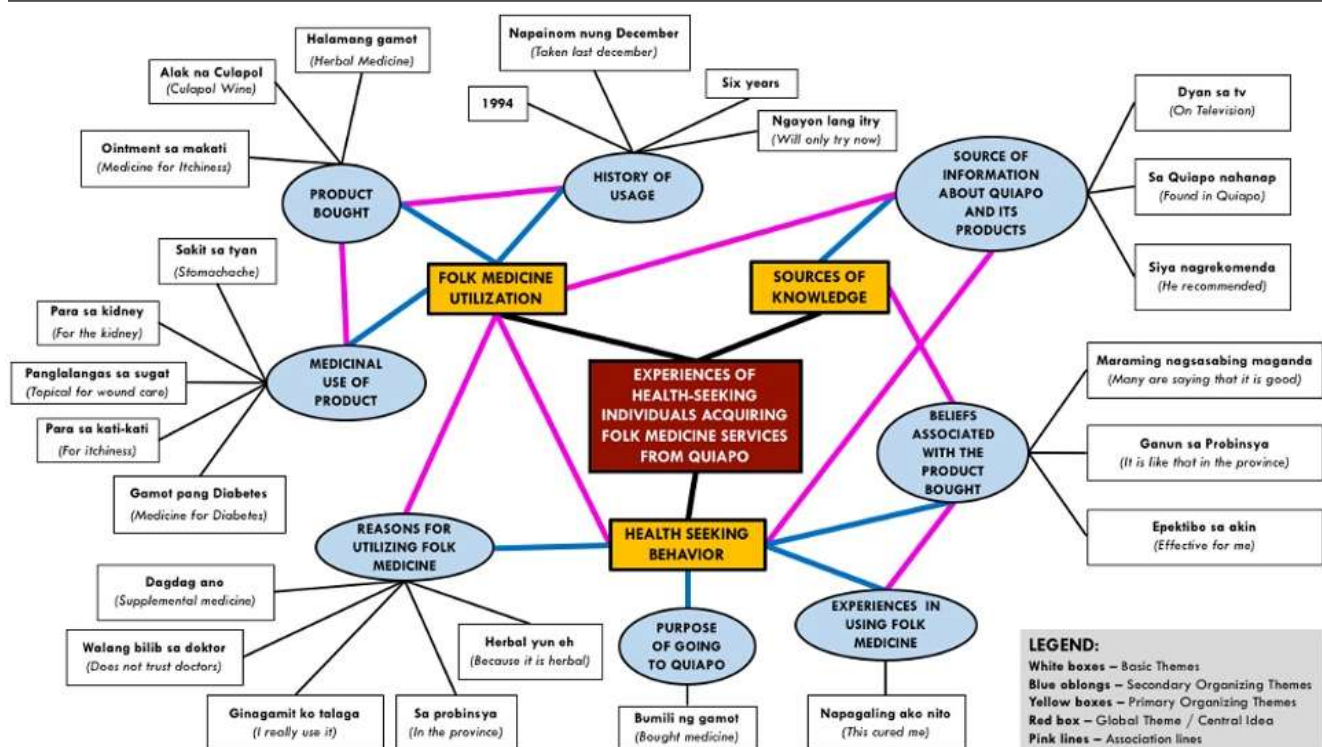
way for 3 basic themes, namely 1) "on television," 2) "found in Quiapo," and 3) "someone recommended it."

The pink lines in the illustration (**Figure 1**) signifies the association of the different themes with each other. The pink lines connecting the history of usage and the medicinal use of the product to the product bought explains that the product bought will eventually be related once the participant already has a history of usage and prior knowledge or experience on its medicinal use. On the other hand, the source of information about Quiapo and its products can be correlated with folk medicine utilization because having the knowledge where to acquire these products may subsequently lead to the acquisition of goods and knowledge on how to utilize the products bought. The source of information about Quiapo and its products can also give way to different health-seeking behaviors because having such knowledge will give the participants a purpose or reason to go to Quiapo. Folk medicine utilization can also be linked to health-seeking behavior, as any individual with a health-seeking behavior may possibly utilize folk medicine, especially if he is equipped with knowledge on such. Furthermore, sources of knowledge can be a factor when it comes to the participants' beliefs associated with the products that they choose to buy, for example, if the participant's beliefs are deeply-rooted in the

Table 3. Primary and Secondary Organizing Themes of the Thematic Analysis of the Study.

Primary Organizing Theme	Secondary Organizing Theme
1) Health-seeking behavior	Beliefs associated with the product bought
	Experiences in using folk medicine
	Purpose of going to Quiapo
	Reasons for utilizing folk medicine
2) Folk medicine utilization	Medicinal use of product
	Product bought
3) Sources of knowledge	History of usage
	Source of information about Quiapo and its products

Figure 1. Illustration of the Thematic Analysis of the Study.



folk medicine culture and beliefs of their provinces, then that can also be a source of their knowledge on where to get the product they need. Lastly, beliefs and the experiences can be associated with each other. For instance, if they had a pleasant experience with the product or if the product indeed cured their illness, then it can be a basis for their beliefs regarding the product's effectiveness.

Discussion

The aims of this study were to understand the lived experiences of health-seeking individuals who acquire folk medicine services in Quiapo and to describe the meaning behind their acquisition of these services. Based on the authors' knowledge, this is the first qualitative study pertaining to the narratives of Filipinos who patronize Quiapo's folk medicine services.

Dubbed as the "Quiapo Medical Center," it is the center of folk medicine in the National Capital Region.²⁷ Although there is no actual Quiapo Medical Center in terms of infrastructure or institution, Filipinos will immediately think of herbal medicine, lucky charms and amulets, and other folk remedies when hearing the word Quiapo,^{12,31,32} aside from the famous church and plaza.¹⁰ Throughout the kiosks and stalls within the area, the immense availability of folk medicine proves to be one of the biggest factors of its popularity.

Local studies revealed that believers of folk medicine practices in the Philippines are mostly married Catholic females with low economic status and low educational attainment,^{9,15} which is similar to the findings of the current study. Similar foreign studies have also found that consumers of traditional and complementary medicine are often females and married whose ages ranged within the average interval of fifty and whose education level is high school diploma.³³⁻³⁵ These sociodemographic profiles were all evident in the findings of the present study. Another study also found that rural people have unique health-seeking behavior and mixed opinions about medical pluralism which explains the behavior of these health-seeking individuals.¹⁷

A local previous study identified species of plants being sold in Quiapo as herbal medicines.¹² The availability of medicinal plants in Quiapo and the way some Filipinos are patronizing them reflects the larger cultural diversity of the country. Some methods of folk remedies in another study also revealed to be similar in the present study which include

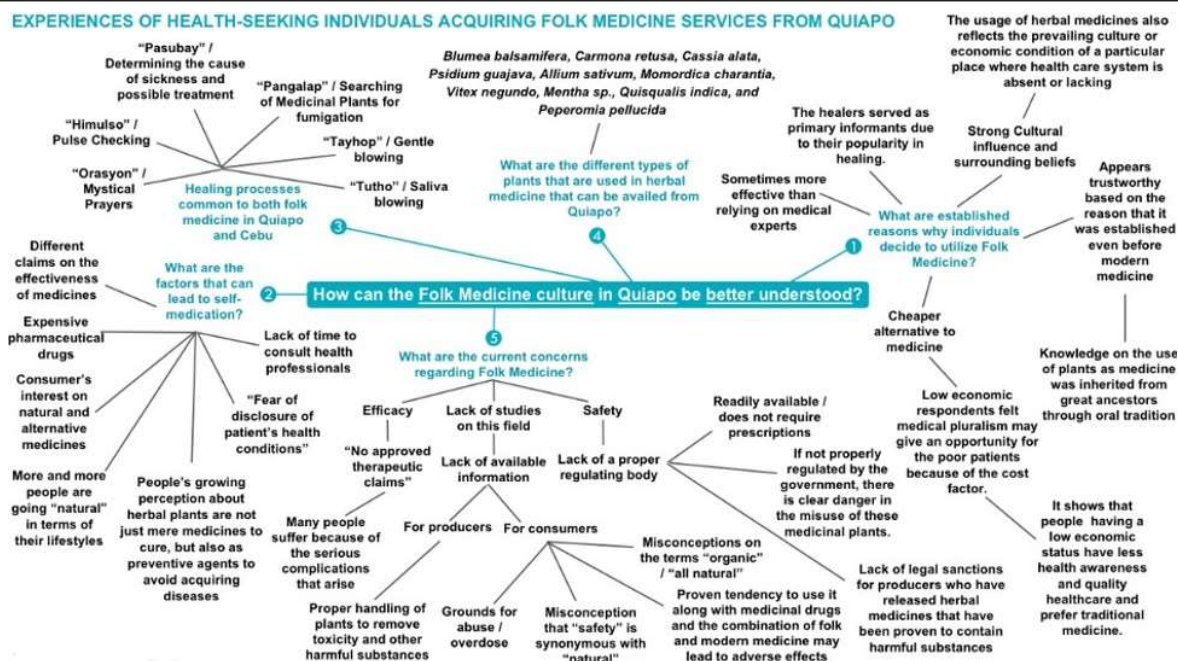
boiling, concoction, and decoction.¹⁵ Furthermore, most cultures have utilized herbal medicine to be effectual therapies for the treatment and even prevention of various diseases and ailments for centuries. With the modern advances of the internet, patrons now enjoy wider access to herbal products all around the globe.³⁶

The influx of consumers acquiring folk medicine services from Quiapo supports the fact that a great part of the population still uses herbal medicine. One of the main reasons as to why individuals utilize folk medicine in previous studies is its use as a supplement to conventional medicine.^{34,36} Its vast popularity and easy accessibility are the greatest factors that lead to self-medication. People who practice self-medication seem to heavily rely on natural and alternative medicine than their pharmaceutical drug counterparts. They assume that since these are considered natural remedies, it automatically equates to safety. It is alarming how alternative medicines are more readily available and can be conveniently purchased without the need for legitimate prescription from a physician. The resurgence of public interest in folk medicine is attributed to various statements regarding the effectiveness of plant or herbal-based medicines.¹⁸ The trend is currently leaning towards going "natural". It is probable that the people's growing perception about herbal plants has led to its use as both curative and preventive.¹²

Given these growing concerns, it is evident that there is indeed a lack of both understanding and scholarly developments in the field of folk medicine. Inspired by all of these challenges and the urgency of how these concerns need to be addressed immediately, the genuine desire to bridge the gap remains steadfast along with the vision of this study to serve as a vital keystone that will pave the way towards understanding folk medicine in a deeper and more meaningful way. Regardless of how famous and vast the culture of folk medicine in Quiapo is, there seems to be a scarcity of related literature depicting its culture and this greatly contributes to the misconceptions of the people towards folk medicine.

The illustration below reveals the main concepts and ideas from previous studies on folk medicine that were deemed useful in relation to the context of the present study. Through this, the authors were able to correlate the present findings with that of the previous literature (Figure 2).

Figure 2. Comprehensive Map of Review of Related Literature of the Study



Contributions of the Study

Folk medicine culture in Quiapo has been considered a taboo by commoners who are usually non-believers of folk medicine practices. The authors believe that misconceptions towards the field are rooted in the lack of knowledge due to the lack of published literature and studies. This was realized by the authors while in the process of researching due to the evident scarcity of literature about folk medicine culture in Quiapo, despite extensive search efforts. This fueled the authors' motivation and ignited in them a new level of curiosity, pushing them to venture into the field with the hopes of shedding light on what truly happens behind the by-lines.

Through the lived experiences of the participants, the authors were able to reveal to the world some answers to the most important questions related to the field of folk medicine. This study was successful in its goal of providing a better understanding of the folk medicine culture in Quiapo by gathering primary data from first-hand interviews.

Strengths of the Study

The study delves into the experiences of each participant, which offers a wide spectrum of new information as the experience of one is unique from the others, regardless of background. Human experiences are powerful and are sometimes even more compelling as compared to quantitative data. In addition to this, the interviews are not limited to only a specific set of questions and can therefore be redirected in real-time to accommodate more information. The research direction and framework can then also be modified along with the new information that was gathered, offering data flexibility and robustness. With each question, a more profound sense of understanding of the participants' lived experience was attained. The approach is able to characterize even the slightest subtlety, and as well as complexities that a positivistic approach would have otherwise missed. More importantly, the study was able to obtain a demographically diverse set of data, wherein various trends and themes emerged, despite only having seven participants.

Limitations of the Study

The research quality is greatly reliant on the authors' individual skills and is more prone to the influence of their personal prejudices and peculiarities. This type of research heavily relies on the capability of the authors to analyze the situation and be able to ask relevant questions that would not confuse or in any way compromise the

information being collected with any form of discrimination or bias. On the other hand, the authors' presence during data gathering, which is frequently inevitable in qualitative studies, can influence their responses. In addition, this study is limited to the mere conveyance and analysis of the lived experiences of its participants with folk medicine, most importantly how it has been an effective form of treatment to them and does not focus on proving whether these products are indeed scientifically proven to be effective.

Conclusion

Folk medicine is perceived by its patrons to be effective in alleviating health concerns. The acquisition of such products is attributed to satisfaction from prior experience, distrust in the current healthcare system, upkeeping of and belief in family tradition, and intention to supplement existing western medicine treatment.

Through the obtained data that tackled the lived experiences of the participants, this study was able to contribute the first qualitative data on the folk medicine culture in Quiapo. Therefore, this study has paved an avenue for a better understanding regarding such while contributing a solution to the scarcity of literature depicting its culture. This problem greatly contributes to the misconceptions of people towards folk medicine.

This study aids health professionals in learning about folk medicine and better understanding patients who patronize such, subsequently aiding them in providing a holistic treatment approach. A physician's effort in guiding a patient's desire of blending folk medicine with western medicine can help bridge communication gaps by providing opportunities for open-minded health education, establishing trust, and improving doctor-patient relationship, eventually leading to better treatment outcomes and overall experience for the patient.

For future research, this study recommends utilizing a larger sample size for data saturation, yielding more responses and newly gathered data about the topic at hand. Furthermore, future studies may shift the focus on *albularyos* and their perspective on human health and health-seeking behaviors.

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