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Folk healing practices and folkloric modalities of traditional healers in Northwestern Cagayan, Philippines

Allan O. De La Cruz*, Rodel Francisco T. Alegado, Rey D. Vilorio

Cagayan State University, Sanchez Mira, Cagayan, Philippines

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Abstract

Despite the modernization in health care, advancement in technology, and the internet of things, there are still individuals who resort to traditional healers or 'mangngagas' in local dialect. Hence, this study was conducted to describe the dynamics of traditional healing in Northwestern Cagayan, Philippines. The study used descriptive survey design and data were collected through survey questionnaire and interview to 79 folk healers in the communities surveyed and were analyzed through descriptive statistics. The study found that it was through self-discovery and experience from parents that they became folk healers. Of the 10 types of folk healing practices that these folk healers treat 10 distinct folk illnesses, it was found out that most are physiotherapist using mostly coconut oil, glass/plate and leaves as paraphernalia and through a variety of cultural, spiritual, and ritual procedures. These folk healers were patronized since they are near in the locality, the practice is common in the place, and the people believed that traditional medicines cure folk diseases. The study suggests that the study area has rich intangible resources on healthcare management that necessitates positive reception, documentation, preservation and inclusion.

*Corresponding Author: Allan O. De La Cruz ✉ aodlc2010@hotmail.com

Introduction

Traditional and complementary medicine (TC&M) according to Haque *et al.* (2018) which is found in almost all countries of the world is an important yet often underestimated issue of healthcare and the demand for such services is increasing. According to the World Health Organization (WHO, 2013) it is estimated that 80% of the ailing population in developing countries depends on traditional healing for their primary health care needs. It is surprising to note however, that even industrialized countries, almost half of their population now regularly uses some form of traditional, complementary and alternative medicines like United States 42%; Australia 48%; France 49%; Canada 70% (WHO, 2002).

Also known as folk medicine, it is one of the three main categories of traditional medicine aside from codified medical systems and allied forms of health knowledge (Telles, Pathak, Singh, & Balkrishna, 2014). The World Health Organization (WHO) acknowledges the role of traditional medicine and defined it as “the knowledge, skills and practices based on the theories, beliefs and experiences indigenous to different cultures, used in the maintenance of health and in the prevention, diagnosis, improvement or treatment of physical and mental illness” (World Health Organization [WHO], 2020).

Complementary, folk medicine is those traditional knowledge systems, which have been transmitted orally from past centuries and use components of the ecosystem that are indigenous to the community (Payyappallimana, 2010). In most cases, the custodian and dispenser of folk medicine are the folk healers, themselves. From the old name babaylan, the traditional healers now operate under various names, such as albularyo, manghihilot, mangluluop, mangtatawas, and faith healers (Rebuya, Lasarte and Amador, 2020).

In the northwestern part of Cagayan province, particularly among the Ilokanos, folk healers are generally known as ‘mangngagas’. They are instrumental in ascertaining that their fellows receive the health care they need. Folk healers come in varied

types depending on folk illness specialization, and modalities in diagnosis and therapeutics. The origin of folk healers can be traced back to the pre-colonial era when shamanic leader babaylan served as the main person in charge of healthcare (Almario, 2015). However, the concept of babaylan disappeared from the consciousness of the Filipinos because of the brutal repression of the Spanish colonist, and the introduction of the Western medical system and education during American occupation. Generally, the nature of healthcare in the Philippines has turned towards Western medicine due to economic development, urbanization (Abe & Ohtani, 2013), and modernization (Mahmood, Mahmood & Tabassum, 2011).

The rapid disappearance of traditional culture suggests that unrecorded folk knowledge and information may be lost forever (Abe & Ohtani, 2013). It is a good thing to note, however, that there are a few systematic studies conducted in the Philippines that can be accessed online which records these important intangible national resources. Conversely, there is no published paper accessible online that documents the folk healing practices of the ‘mangngagas’ or traditional healers in Northwestern, Cagayan province. Therefore, there is an urgent need to record the origin of the existing ‘mangngagas’ in the place. Also, the study provides a profile and dynamics of folk healing in the study area. Hence, this study may provide appreciation to culture on traditional medicine, which can be used in developing instructional materials on local cultures and traditions; and policy and development inputs for folk healing practices. The result of the study provides and a baseline data on the folk healers in Northwestern Cagayan, Philippines; also, it adds to the emergence of scientific readings on traditional medicine in the country.

Materials and methods

The study utilized a descriptive method of research, judgmental snowball sampling technique who met the inclusion criteria of at least a year practicing folkhealing and a resident in the towns of Sta. Praxedes, Claveria, Sanchez, Pamplona, Abulug and Ballesteros, Cagayan was adopted to traditional folk

healers in the local communities in Northwestern Cagayan, Philippines with survey questionnaire and structured interview as the main instrument used in gathering the data needed. Descriptive statistics was used to analyze the data.

Results and discussion

Demographic Profile of the Traditional Healers

The traditional healers in Northwestern Cagayan are mostly female. For every four traditional healers, three of whom are females and only one is male. The mean age which is 63.94 years old means that the respondents are in their late adulthood stage. Most of the respondents are widowed with a mean number of children 5 children. The traditional healers are predominantly Ilocanos, born and raised in Cagayan province, and self- confessed catholics.

Socio-economic Profile of the Traditional healers

Most of the traditional healers are into farming/fishing as their main source of income. Half of the total population reached only grade school. Most of them dwell in a bungalow semi-concrete house which they call it their own and acquired this property from their earnings. Majority of the population are living with their husband/wife together with their children. A great majority of the traditional healers of Northwestern Cagayan have no facebook account, but they have a mobile phone.

Work Profile of the Traditional Healers

The traditional healers have been practicing folk healing for 28 years now. A great majority of the population have only one traditional healer in the family. As to the folk healing methods adopted by these traditional healers, a great majority of the respondents do the therapeutic massage or hilot. As to the time when they do the healing, majority of the respondents reported that they do the traditional healing anytime of the day in a week with 30 or less clients per month, and they charge voluntary amount from the clients, mostly 500 pesos or less. These traditional healers cater to all ages. Majority of the clients who would patronize them are females.

Paraphernalia used for folk healing

The top five paraphernalia used by the traditional healers in folk healing include the following: 1.) lana/coconut oil/sacred oil in folk healing; 2) glass/plate; 3) medicinal leaves; 4) rosary or prayer book; and 5) water/holy water. The other paraphernalias used include candle and match; rice grains; towel/handkerchief/cloth; chicken; bondpaper; egg; old key; thread; coins/bills; cotton; alcohol; and efficascent oil. The finding found similarities with the paraphernalia used by the Partido albularyos in the study of Rebuya, Lasarte and Amador (2020) as they claimed that lana and kandila were the common paraphernalia used by their informants. Also, in the study of Haque *et al.* (2018) among the rural folks in Bangladesh, they found out that they use verses from religious books, wishes of good health written on paper, and others recite these verses and blown on the face or on water and food items either to drink, to eat or to sacrifice as offerings in the name of God, gods, etc.

Origin of folk healing

Most of the traditional healers surveyed admitted that they practice folk healing as a result of experience of through self- discovery. It is closely followed by the respondents who said that they practice folk healing because they inherited it from their parents or relatives. There are also those who agreed that it was due to prophetic claims and dreams why they do such folk healing. Also, some said that they practice folk healing as a result of their learnings from other traditional health practitioners. A few admitted that they practice folk healing due to their attendance to formal trainings. There is a lone respondent who divulged that he/she practices folk healing because of a possession from the Holy Spirit or a biblical character.

From the gathered data, one third of the total respondents have inherited or learned folk healing from their parents or relatives who are also folk healers. This shows that the origin of folk healing has progressed from knowledge transmission. According to Wood, Kendal, and Flynn (2012), people do not copy information randomly but tend to select certain

people as models to copy cultural information. This strategy according to Mesoundi *et al.* (2013) is called context-dependent model biases.

The data reflect the influence of strong kinship system in the transmission and keeping of family traditions and rituals. The transmission through relatives is called kin-based model (Rendell *et al.*, 2011) or vertical knowledge transmission as explained by Cavalli-Sforza & Feldman (1981).

The findings of the current study is similar to the result of the study conducted by Rebuya, Lasarte and Amador (2020) who found that the healing powers of the informants are inherited from their forefathers and parents. Also, in the study of Bibon (2021), he cited Cerio (2015) who discovered that self-discovery and experiences, dream and prophetic claims, and possessions were the origin of folk healing practices.

Type of Folk healing Practices

Table 1. Type of folk healing practices.

Practice	Frequency	Percentage	Rank
Treating disease, injury, or weakness in the joints or muscles by exercise, massage, and the use of heat and light (Massage therapist}	43	54.43	1
Treating bone fractures, sprain or dislocations (Bone settlers)	37	46.84	2
Assisting a woman to get pregnant or assisting in child delivery (Traditional pregnant/birth attendants)	25	31.65	3
Treating simple and mild illness such as cough, diarrhea, headache etc.	24	30.38	4
Using herbs and roots to treat illness (Herbalist)	16	20.25	5
Treating skin disease such as itching, fungus, wounds on the skin etc. (Skin disease healer)	13	16.46	6
Using water, steam and smoke bathes to treat illness (Hydrologist)	12	15.19	7
Using animal or plant product and mineral resource to treat illness (Druggist)	11	13.92	8
Treating illness through religious inspirations (Faith Healer)	10	12.66	9
Treating animal bites such as snake, dog and cats (Animal bite Healer)	7	8.86	10

Table 1 shows the different types of folk healing practices of the mangngagas or traditional healers in Northwestern Cagayan. It was found out that majority of the traditional healers surveyed are massage therapist or ‘manghihilot’. They treat disease, injury, or weakness in the joints or muscles by exercise, massage, and the use of heat and light. Rank 2 based from the computed frequency are the bone settlers. They treat bone fractures, sprain of dislocations among young and old alike. Rank 3 composed the traditional birth attendants. They are the traditional healers who assist a woman to get pregnant or they

This research shows similarity to the findings of Pocs (2005) who noted that folk healers have come in contact with supernatural forces and dreams in the course of their initial lives

Interestingly, most of the folk healer-participants acquired their knowledge through self-discovery and experiences. The others were through prophetic claims, dreams, and possession from a holy spirit. The finding was also recorded in the babaylan literature. According to records, a person became babaylan through a sacred call which would come in a dream or the person would go through a life-threatening illness, be healed by prayers and then experience a change of consciousness (Villariba, 2006). From these findings, we could say that family is the center of origin of passed knowledge in folk healing where acquired practices were primarily rooted through apprenticeship.

assist in child delivery. Rank 4 are those healers who treat mild and simple illness like cough, diarrhea and headache. Rank 5 are herbalist. They treat using herbs, leaves, and roots of plants to treat illness. The next in rank are the skin disease healers who treat conditions that irritate, clog or damage the skin that cause itchiness, dry skin or rashes. They also treat wounds on the skin, and other skin diseases caused by fungus and other possible causes. Rank seven are those who treat illnesses using water, steam and smoke bathes. They are classified as Hydrologist. Then, we have the druggist, the faith healers and the

animal bite healers. The druggists are the traditional healers who use animal or plant product and mineral resource to treat illness. The faith healers, on the other

hand, treat illness through religious inspirations. Finally, the animal bite healers treat patients bitten by animal such as snake, dog and cat bites.

Reasons for Patronizing Folk healing

Table 2. Perceived reasons for patronizing folk healing

Reasons	Mean	Descriptive value
Patients are poor and do not have adequate money to pay medical help	2.59	Agree
It is customary or it is very common in the place of the patient.	2.71	Agree
The folk healer is accessible or very near to them	3	Agree
The illness is not severe that it requires professional help. The albularyo can do it anyway.	2.56	Agree
When the illness is believed to be caused by supernatural bodies	2.35	Disagree
Strong belief for the traditional healers over medical experts or professionals	2.62	Agree
Most illnesses can be cured by traditional medicine	2.71	Agree
Afraid of opportunistic medical professionals	1.96	Disagree
Afraid of wrong medical prescriptions and its side-effects	2.01	Disagree
The illness cannot be cured by medical professionals	1.87	Disagree

The table 2 presents the perceived reasons of the clients for patronizing folk healing. The result of the study would tell us that from the 10 perceived reasons presented, in the 4-point Likert scale, six indicators were agreed upon and four indicators were disagreed upon by the respondents.

Of the agreed responses, the top reason why they were patronized is that they are near to these individuals with illnesses. It was also agreed that they were patronized because it is customary or it is very common in the place of the patients; most illnesses can be cured by traditional medicine; strong belief for the traditional healers over medical experts or professionals; patients are poor and do not have adequate money to pay medical help; and the illness is not severe that it requires professional help. The albularyo or ‘mangngagas’ can do it anyway.

On the other hand, the perceived reasons which were disagreed upon by the traditional healers are the following: When the illness is believed to be caused by supernatural bodies; afraid of wrong medical prescriptions and its side-effects; the illness cannot be cured by medical professionals; and afraid of opportunistic medical professionals. The reasons found in the study were the same reasons found in the study of Cerio (2020) why the upland household of Camarines Sur preferred traditional healers over the health professionals.

Conclusions and recommendations

The traditional healthcare system of rural communities in North-western Cagayan through its folk healers provides a picture of the rich cultural beliefs on folk healing origin, folk illness, and folk healing practices. In spite of the modernization and the presence of modern health care professionals, traditional healers are still important dispenser of rural healthcare system and patronized by the community folks. This study deduced three major reasons from the responses of the informants as to the publics patronizing these folk healers: a.) patients economic status; perception of illness and healing; and c.) the belief on the ability of the folk healers. Moreover, these folk healers perform several types of folk healing practices treating different types of illnesses with the use of several paraphernalia through a variety of cultural, spiritual, and ritual procedures. With these, it is recommended that the other features of traditional healing of the ‘mangngagas’ or arbularyo of North-western Cagayan area should be conducted and be preserved as part of the locals’ culture and tradition. Also, these traditional healers could establish an organization among themselves, so they won’t be exploited by the contemporary and highly- technologically advanced society and will thrive until the next generations.

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