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RESEARCH PAPER

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Health seeking behaviour of indigenous people living in Urban areas in Surigao City, Philippines

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Abstract

This study was conducted to determine and provide documentation on the ethnomedicinal plants and health-seeking behavior of the members of Mamanwa tribe who settled in Surigao City. A combination of purposive sampling and focus group discussion approach to thirty-seven (37) participants was done to gather the data needed. Twenty-seven medicinal plants belonging to 20 families dominated by family *Lamiaceae* and *Asteraceae* were identified. The majority of these plants are cultivated and available at the backyard of the respective houses of the participants. The leaves are the parts of the plant that is commonly used that are taken orally. More than half of the participants declared that the juice of these identified plants is usually used for medicine. There are about 22 identified illnesses that can be treated from these medicinal plants. This study demonstrates that there are different kinds of medicinal plants that can treat common illnesses that are present within Surigao City. The knowledge and practices on how to use them plays a significant role in sustaining their health especially now that they are settling in urban areas. Further, the support from the local government is also crucial for the conservation and sustainability of these medicinal plants.

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Introduction

Health seeking behaviour is an action done by one person who notices himself or herself of having a health issue purposely to find the proper medication. Self-care and health seeking behavior is important especially to elders for their everyday life as it helps to improve personal well-being. Self-care practices are vital especially to those who are having self-managed illnesses such as diabetes, hypertension which they are taking maintenance medicines (Irwan, et al., 2016). However, it has been a battle of the health practitioners to come up approaches to make change on the health seeking behaviours that are more effective and sustainable especially to the least fortunate people (Maneze, et al., 2015). The health seeking behaviours of an individual is greatly affected by culture, sociodemographic profile, economic factors, geographical accessibility (Majaj et al., 2013), and perceived quality of services and trust in the health providers (Lau et al., 2020). Trust in health seeking behaviour is a factor that cannot be ignored. Some nations health care systems became highly patchy specifically the government-provided health care because of political and social instability (Majan et al., 2013) that lose people's trust.

The Mamanwa tribe is known to be the surviving oldest ethnic group and is considered as the second poorest indigenous people group in the Philippines. The tribe inhabited in Caraga Region and is distributed in mainly in the three provinces in the region, Surigao del Norte, Surigao del Sur and Agusan del Norte that relies mostly on hunting, upland agriculture, foraging activities, and all the resources they can get from the forest for livelihood and survival (Balacuit et al., 2018). But, slowly as the time goes by the resources provided by nature can no longer suffice their needs along with their increasing population. Thus, this led to some of the tribe members to go down and migrate to urban areas for better living and job opportunities. Moreover, the mining companies' operation in the province of Surigao del Norte provided livelihood, royalties and even granting scholarships to the deserving indigenous people. While living in the mountainous areas of Surigao del

Norte, the Mamanwa tribe relies on the traditional medicinal plants they can get within their ancestral land for immediate treatment of illnesses (Nuneza *et al.*, 2021). Thus, this study aimed to determine the medicinal plants available in the locality of the members of the Mamanwa Trible who settled in the urban areas.

Materials and methods

Study Area

Surigao City is the capital of the province of Surigao del Norte which has a total land area of 173.91 square kilometers that covered 8.91% to the total land area of the province. The center of the city is located at approximately 9° 47' North, 125° 29' East with an elevation of 29.5 feet above mean sea level. Surigao City was dubbed as the City of Island Adventures probably because of the several panoramic islands with long pristine beaches, mystical caves, vast mangrove forest and underwater sceneries. Suirgao City have 1 government hospital categorized as tertiary hospital and 4 private that categorized as secondary hospitals, and 51 health centers located at different barangays of the city. As of 2013 Census, there are about 230 indigenous inhabited within Surigao City that belongs to Mamanwas tribe (SCSEP, 2013).

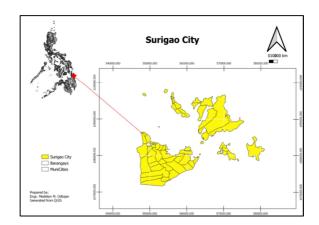


Fig. 1. Map of the study area.

Data Gathering

A total of 37 members of the Mamanwa tribe were interviewed using a semi-structured questionnaire and a group conversation with the traditional healer and tribal leader. The demographic profile to the respondents such as gender, marital status, education

level, economic status, and social support were gathered. Data such as medicinal plants available at their backyard, method of preparation, mode of treatment, and part of the plants used for treatment illnesses were also gathered.

Result and discussion

Herbal plants that are present in the locality used for immediate treatment

These herbal/medicinal plants are dominated by family Lamiaceae and Asteraceae. The Sambong (Blumea balsamifera) and Tawa-tawa (Euphorbia hirta) are the

topmost available in the backyard of the participants which consist of 97%. This is followed by Luya (Zingiber officinale) consisting 95%, Tanglad (Cymbopogon citratus) which is 92% and Karabo (Coleus amboinicus) and Tuba-tuba (Jatropha curcas) that both consists 81%. While, the medicinal plant that is least available right at their respective areas is Hilbas (Artemisia vulgaris) because accordingly this plant is mostly in the wild. This finding is similar to the study of Saro et al. (2022) wherein Asteraceae has the highest species for the herbal plants used by locals of a barangay in Bayugan City, Agusan del Sur.

Table 1. The list of herbal/medicinal plants those are present in the locality.

No.	Family	Scientific name	Local name	Count (n=37)	Percentage
1	Asteraceae	Blumea balsamifera	Sambong	36	97%
2	Lamiaceae	Coleus amboinicus	Karabo	26	81%
3	Euphorbiaceae	Euphorbia hirta	Tawa-tawa	36	97%
1	Poaceae	Eleusine indica	Bila-bila	13	35%
5	Lamiaceae	Mentha spicata	Herbabuena	25	68%
)	Euphorbiaceae	Jatropha curcas	Tuba-tuba	30	81%
,	Amaryllidaceae	Allium Schoenoprasum	Kutsay (Gandah)	10	27%
3	Poaceae	Cymbopogon citratus	Tanglad	34	92%
)	Zingiberaceae	Zingiber officinale	Luy-a	35	95%
0	Lamiaceae	Vitex negundo	Lagundi	29	78%
1	Asphodelaceae	Aloe vera	Aloevera	7	19%
2	Annonaceae	Annona muricata	Guyabano	22	59%
3	Rubiaceae	Morinda citrifolia	Nino	9	24%
4	Asteraceae	Cosmos bipinnatus	Cosmos	5	14%
5	Amaranthaceae	Alternanthera sessilis	Lupo-lupo	7	19%
6	Musaceae	Musa acuminata × balbisiana	Saba (saging)	31	84%
7	Piperaceae	Peperomia pellucida	Sinaw-sinaw	32	86%
8	Lamiaceae	Coleus scutellarioides	Mayana	23	62%
9	Menispermaceae	Tinospora crispa	Panyawan	31	84%
0	Fabaceae	Senna Alata Linn.	Asunting	32	86%
1	Verbenaceae	Stachytarpheta jamaicensis	Kandila-kandilaan	18	49%
2	Myrtaceae	Psidium guajava	Bayabas	2	5%
3	Urticaceae	Dendrocnide meyeniana	Alingatong	4	11%
4	Asteraceae	Artemisia vulgaris	Hilbas	1	3%
5	Portulacaceae	Portulaca oleracea	Moti-moti	3	8%
6	Moringaceae	Moringa Oleifera	Malunggay	2	5%
27	Zingiberaceae	Curcuma zedoaria	Padla	16	43%

The method of preparation/formulation of each medicinal plant

The majority of these herbal/medicinal plants are served through its juice as declared by the 52% of the participants (Fig. 1). This is followed by decoction (30%) in which the plant will be boiled to extract the medicinal

substances and the water will be used for drinking. Roasting wherein the plant is heat over the fire prior to the application is 14%, while powdering the part of the plant is 2%. The mode of application varies broadly depending on the type of illness being treated. The juice dominated in this study because the cough and fever are

the 2 major illness the Mamanwa tribe treating at home which uses Blumea balsamifera (Sambong) as medicine taken orally. Similar findings reported in the study of Gruyal *et al.* (2014) for the ethnomedicinal plants used by residents in Surigao del Sur.

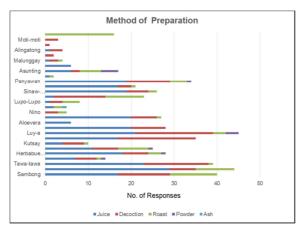


Fig. 1. The method of preparation of each of the herbal/medicinal plant.

The mode of application of the herbal/medicinal plant

The identified herbal/medicinal plants are being taken orally or treat certain or particular illness (Fig. 2). Though the administration varies depending on the kind of plant and type of the illness to be treated, however majority are administered orally except for Asunting, Kandi-kandilaan, and Tuba-tuba, which is more of topical application.

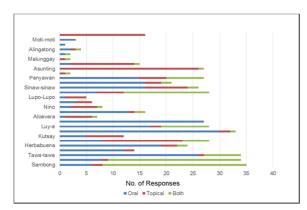


Fig. 2. The mode of administration of each of the herbal/medicinal plant.

For Sambong, Karabo and Saba can be administered through both oral and topical. When combined, oral application has the highest percentage consisting 51%, while topical and both are almost of the same percentage. Dapar at al. (2020) conferred in their study in Agusan del Sur with the Manobo tribe that internal (oral) was the most common means of administration. It was further elucidated that the majority of these medicinal plants is taken orally since most of their health conditions were associated internally.

The part of the plant being used for medicine

As can be gleaned in Fig. 3 below, the most used part of the plant for medicine is the leaves (67%) as it dominated in the plants that were identified. Among the 27 plant species that are used for medicinal plants, there are three (3) that leaves did not dominate, these are the Panyawan in which the branch part is the most useful, the Luya which used rhizome (roots) as medicine, and the Tawa-tawa that recognized the roots as the most useful part for medicine.

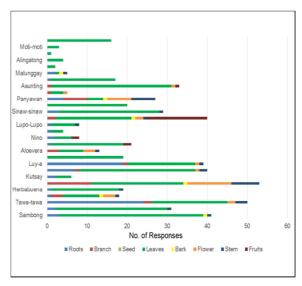


Fig. 3. The parts of the plants being used for medicine.

The study of Paraguison *et al.* (2020) and Dapar *et al.* (2020) which both conducted in Agusan del Sur likewise found out that the leaves part of the plant is commonly used for medicine. As cited in Saro *et al.* (2020) it is in the leaf part of the plant where most of the chemical compounds are stored through the process of photosynthesis that includes alkaloids, tannins, coumarins, flavonoids, essential oil, and inulin's which are effective element of the majority of the preparation that has the highest concentration.

The common illnesses these herbal/medicinal plants can treat

When the participants were asked about the common illnesses that these herbal/medicinal plants can treat, fever (97%) and cough (97%) are the topmost on the list (Table 2). Whilst, cancer and convulsions are the least illness that can be treated by a medicinal plant. As stated in the study findings of Gruyal *et al.* (2014) and Saro *et al.* (2020), cough is the most common illness treated at home using the medical plants available right at their backyard.

Table 2. The common illnesses can be treated by medicinal plants.

medicinal plants.				
Types of				
Illnesses/	Medicinal plants used			
Sickness				
Diabetes	Aloevera, Luy-a, Tawa-tawa, Panyawan			
Inflammati on	Bayabas, Guyabano, Luy-a, Malunggya			
Headache/	Karabo, Luy-a, Malunggay, Sambong,			
Fever	Herbabuena, Tuba-tuba Tawa-Tawa, Saba, Guyabano, Lagundi			
Infection	Bayabas, Hilbas			
Diarrhea	Bayabas, Tawa-tawa, Mayana, Saba, Guyabano, Sinaw-sinaw, Lagundi, Tanglad, Luy-a, Sambong, Hilbas, Tuba-tuba, Herbabuena, Panyawan			
Relapse (Bughat)	Panyawan, Sambong, Malunggay, Bila-bila, Herbabuena, Saba, Luy-a, Tuba-tuba			
Cough	Karbo, Luy-a, Malunggay			
Colds	Luy-a, Hilbas, Malunggay			
Malaria	Tawa-tawa			
Ulcer	Aloevera, Bayabas			
High blood	Luy-a, Hilbas			
Stomach pain	Bayabas, Tawa-tawa, Mayana, Saba, Guyabano, Sinaw-sinaw, Lagundi, Tanglad, Luy-a, Sambong, Hilbas, Tuba-tuba, Herbabuena, Panyawan			
UTI	Karabo, Bayabas, Guyabano			
Toothache	Panyawan,, Saba, Bayabas, Luy-a, Herbabuena, Sambong, Hilbas			
Wounds	Mayana, Malunggay, Kandi- kandilaan, Sinaw-sinaw, Tawa-tawa, Aloevera, Bayabas, Moti-moti, Karabo, Sambong, Bayabas, Saba, Tuba-tuba			
Troubled by relative's soul (Gikalag)	Kandi-kandilaan			
Bewitched (Warlock)	Panywan, Luy-a			
Bewitched (Black	Padla, Tuba-tuba			
magic)				

Treating cough have 2 different modes of application, to treat dry cough, the leaf could be used as massage media on the chest part, while the juice extracted from the leaves will be taken orally to treat the same ailment for fast recovery. Blasco *et al.* (2014) further conferred that pulmonary disease category had reported to have the highest number of uses of medicinal plants.

The commonly used plants for treatment are Tubatuba, Luy-a, Saba and Malunggay in which all the 4 can sure about 4 common illnesses. Balberone *et al.* (2018)'s study on the medicinal plants used by the Ilongot-Engongit in Aurora Province found out that respiratory disease has 19 number of use reports which is similar to the findings of this study wherein 1 species can treat several ailments and

Availability of these plants in the area

When it comes to the availability of these medicinal plants in their respective areas, as can be seen in Fig. 4, 89% of the participants cultivates it in the backyard. According to the Mamanwa tribe, they have to make sure these plants are available immediately in times of need. Alduhisa and Demayo (2019) study in the Indigenous People (Subanen tribe) in Ozamiz City conveyed that the medicinal plants are usually planted in their backyard to protect from timber poaching and for it to be readily available when they needed to treat an ailment. Further, the study of Balinado and Chan (2017) likewise reported that 76.6% of their respondents cultivated medicinal plants for their immediate use.

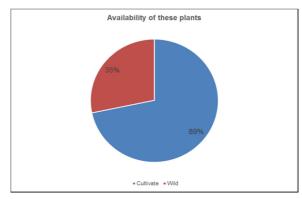


Fig. 4. Availability of the medicinal plants.

Alternative medicine and support from the government The participants were further asked of their alternative in cases that medicinal plant is not available right at their backyard and in the wild during the occurrence of an illness (Fig. 5). The majority of them responded over the counter medicine or medicine available in the pharmacy (58%), while the 35% will go to the nearest health center for free medicine. During the group discussion with the tribal leader and the traditional healers, they mentioned that they are not into any alternative medicine because it is against their belief. Thus, they will do the best they could to treat a particular ailment.

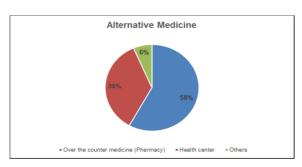


Fig. 5. Alternative medicine in case plant is not available.

It was divulged that this IP community are not receiving any support from the government in terms of making these medicinal plants sustainable. There are few who agreed to received support from some of the government officials, however when asked the form of support it is through using their medicinal plant or available services from the traditional healers. Thus, the support they are getting is from an individual not from the government as a whole.

Conclusion and recommendation

Findings show that ethnomedicinal plant is widely utilized especially by indigenous communities. The members of the Mamawa tribe as part of the study are doing the best they could to protect the source of these medicinal plants. The majority of these medicinal plants are available at the backyard for immediate use. According to the traditional healers, during the peak of CoViD-19, there were no reported members of the tribe being infected with the virus because they are constantly consuming medicinal plants for their protection.

Thus, it is recommended to include the promotion and support of these medical plants in the government programs for its conservation and sustainability.

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