



PREGNANT MOTHER ITS PHENOMENOLOGICAL LIVED EXPERIENCED WITH THE TRADITIONAL FILIPINO 'QUACK' PRACTITIONERS

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Abstract

The phenomenological experience on the pregnant mother practicing the Filipino tradition on 'Pagpahilot' [rubbing for body healing] into maternal healthcare services in Malitbog, Bukidnon, Mindanao Philippines. The quack doctor and its practices; economic disadvantage; distance to travel; culturally embedded tradition and practices; and the interfaith and belief system practiced by the people were studied during the pregnancy period then course thru the birthing of the child. Scientific validation was made by lying Inn birthing in-charge of the Malitbog, Bukidnon, Mindanao Philippines. The qualitative purposive methods were utilized to understand the safety, efficacy, and the culturally practiced imbedded in the medical herbal remedies of sambong, guyabano, and guava leaves used during pregnancy period. Aided with the ethnographic anecdotal recording revealed a highly traditionally practiced faith healer magis, highlighted the consistency, safety and efficacy on the medically herb treatment made by the 'quack' doctor practitioners. It is seen that the quack doctor has an extraordinary power possessed and acquired using the herbs as "instrumentalis causa" [instrument of the cause] to medicate and heal the pregnant mother.

Keywords: Pregnant Mother_ Filipino 'Quack doctor

Introduction

Pregnant mother in this study is a woman who conceived a child in her womb while in her family way submitting herself for a traditional Filipino quack practitioner for patient care (Gomez, 2023). As understood further, that a woman who is a mother get pregnant when she intimates with a man and the man's sperm fertilized the egg (Nasim et al, 2024). This however, conception happens the rearing and caring practiced by the woman as a mother on the child in her womb under the care of the Filipino quack doctor for traditional patient care using the mother maternal herbal medicine. Introducing the traditional therapeutics medication in avoidance on pregnancy complications the challenges is very high (Barrowclough, Kool, & Crowther, 2022).

Addressing pregnant mother medical healthcare issue involving complex medical interventions as alternative practices made by the Filipino tradition of '*Pagpahilot*' (Traditional Therapeutic Medication using Herbs by the Quack doctor) in Malitbog, Bukidnon, Mindanao Philippines offer the culturally embedded approach worth exploring (Richmond et al, 2023). The safety, efficacy, scientific validation and integration to the biomedically medicated healthcare services to the countryside of Malitbog, Bukidnon Mindanao Philippines remain limited for reason and circumstances.

Holistic approach from science to the traditionally integrated socio-culturally diverse engaged evidence-based healthcare practices must be assessed and evaluated (Richmond & Ashworth, 2023). The geographic and economic challenges of Malitbog Bukidnon Mindanao Philippines and their local practices like '*Pagpahilot*' must be understood as crucial and critical in living the quality of life. Thus, living life to the fullest the maternal healthcare services must be accessible to the inhabitants without cost (Maramba-Lazarte, 2020). Malitbog, Bukidnon, Mindanao Philippines as characterized by its biodiversity and indigenous population reflects an ideal setting for exploring traditional healing methods (Canceran et al, 2021).

Pagpahilot (healing touch) conducted by skilled '*hilot*' (*body healer*) practitioners as quack doctor, incorporates massage, herbal remedies, and spiritual rituals, addressing medication to maternal pregnant mother healthcare services (Caunca and Balinado, 2021; Balick and Cox, 2020; Gomez, 2023). However, empirical researches revealed on fetal malpositioning on their way to pregnant mother pregnancy remain as immediate concern in the geographic area (Belgica et al., 2021; Gomez, 2023).

However, this was remedied by the traditionally medicated practices to the pregnant mother in resolving complexities and abnormality in birthing (Gomez, 2023). The geographic area dictates the presence of these healthcare concern due to the landscape of the place, the location, the distance, the events and interaction of the indigenous peoples making the community culturally constructed. The survival instinct of a rational man finds means and ways to live life to the fullest and making the environment as a perfect tool for survival. The trial and error concepts in the making and using this environment, allows to explore, innovate and reinvent the available materials needed for survival. That is one of the reason on the making of having the "hilot."

Scientific methodologies were adopted to assess and evaluate '*Pagpahilot*' by using the research principles on cultural competence frameworks through evidence-based on safety, efficacy, and broader implications to maternal healthcare strategies in Malitbog, Bukidnon, Mindanao Philippines (Salmerón-Manzano et al, 2020). However, it is understood that "*hospital*" or "*maternal lying Inn*" is also impossible to access in the area understudied. Understanding the mechanisms and outcomes associated with '*Pagpahilot*,' *maternal lying Inn* must be mechanized for maternal healthcare services without geographic impediments.

Lastly, inform future healthcare pregnant mother *maternal lying Inn* practices as respecting and integrating cultural traditions into evidence-based on medical services which is "hilot," need to blend culturally engaged diverse community. Pregnant mother as a woman deserves maternal healthcare services on their safety, efficacy and integration on the traditionally practiced herbs medicine used by the hilot during the '*Pagpahilot*' in addressing maternal healthcare services in Malitbog, Bukidnon, Mindanao Philippines.

Finally, these maternal pregnant mother medicinal herbs are available in their backyard as scientifically proven available in their local environment. As these be harness in order to be made accessible to those underprivilege for maternal medical alternative this can be also a good start for entrepreneurialship.

Methods

The purposive sampling of the ten (10) pregnant mother participants who undergo treatment from the quack of Malitbog, Bukidnon, Mindanao, Philippines who have used specific herbal medicine and remedies while on their pregnancy period. The traditionally prepared herbs such as *balsamifera* or *sambong* (Pahid/gabon/bukadkad), *Annona muricate* leaf (guyabano/banaba/karnaba), and *guava* (bayabas) leaves during the pregnancy period. Purposive sampling also was utilized to ensures targeted ten (10) pregnant mother participants'. The phenomenological lived experiences with traditionally imbedded treatments, facilitating an in-depth exploration of their safety, efficacy and cultural integration in the pregnant mother maternal healthcare services. Ethnographic and anecdotal recording were made to the participants' responses and experiences with these herbal remedies, aiming to uncover nuanced insights into the hilot that was traditionally practiced within the community.

Qualitative data gathering method was done to the ten (10) pregnant mother participants' who experienced with the traditionally practiced herbal treatments during their pregnancy period. Informed consent, and data gathering procedure through semi-structured interviews were also employed. Thematic analysis was used to analyze the phenomenologically extracted data from the conversation made during the interview and FGD (Focus Group Discussion). The identified recurring themes, sub-themes and patterns related to the safety, effectiveness, and culturally imbedded perspectives on the use of the medically practiced herbal remedies to hilot pregnant mother maternal healthcare practices and services were phenomenologically observed within the whole period of their family way.

Results and Discussions

The uncovered phenomenologically established information from the pregnant mothers who were practicing 'hilot' with a Filipino Quack practitioner using the medically practiced herbal remedies such as *sambong*, *guyabano leaf*, and *guava leaves* in Malitbog, Bukidnon, Mindanao Philippines and "applying on hilot" (Magtalas et al, 2023; Gomez, 2023) were observed during their pregnancy period. And, the following themes and sub-themes were disclosed.

Presence of Quack doctor & its practices. The Quack doctor in the study is a person practicing the medical practices not allowed by the Philippine law. Although in lieu or in the absence of the professional, the locals have their own practices. Saving life is at risk. The quack performed to the pregnant mother medical healthcare services in Malitbog, Bukidnon Mindanao Philippines using the alternative medicine available in the local backyard. Although the feasibility and the viability of these medical alternative has been proven generation to generation but it needs a scientific thorough investigation putting life safety and secured.

The 70s or 80s years old quack doctor performing the medically treated health services in the geographic regions has been popular in the area. Their presence, potentiality, ability and skills has been proven generation to generation. And, their peculiar holistic understand about the herbs as alternative medicine were made unspeakable. Thus, this phenomenological experienced made by the researchers with the ten pregnant mother participant revealed that, *these practitioners often serve as*

primary healthcare providers due to limited access to formal medical services in the countryside and this finding corroborate to the findings of Maramba & Lazarte (2020).

It is said that the quack doctor is called as “mananambal” (hilot). This quack doctor does not claimed authority as claimed by a license doctor. In fact, according to the ten pregnant mother participants they said and to wit:

Niadtu kami sa balay sa mananambal nga walay nag pugus kanamo usahay gani amo lang pasugoan nga mo bisita sa amoa aron mag pahilot. Among kabubut-on ug kagustuhanan nga mag patambal kay sa tanan namong mga anak kalooy sa Diyos siya (nanambal) ang nag atiman kanako sa akong pag mapdus. Ug wala gyu’y lain nga among madaganan nga adunay abilidad nga na huptan sa mapdus.

[we go to the house of the quack doctor without hesitation and no body force us to go and sometimes we’ve send the messenger to their house to come in our house for “hilot.” It is our volition to allow the quack doctor to medicate us because all of our children and children of their children the birthing were made in here. And, besides we cannot go away and seek help except only those who’ve the ability or ‘hilot’]

Reflecting the phenomenological experienced of the ten pregnant mother participants on the tradition and practices that the geographic area was harnessed in the name of need. The submission of oneself for the attainment of goal was very high. They are contented and accepted what tomorrow shall come. And, with the taciturn of their body it tells one for the contentment what they had.

Economic and financially disadvantage. The limited resources and the access of the opportunity of the pregnant mother is very high. The area is agriculturally favorable where the proceeds from the farm are favorable. Listening the ten (10) pregnant mother during the conversation and FGD they said and to wit:

Kami gyud dinhi ang mga babaye o buntis nga inahan mo lihuk gyud aron mi maka kaon. Bisan burus ka mo lihuk gyud ka kay kun dili wala kay makaon ug imong mga anak looy kaayo. Ang among mga bana atua nag trabaho man usab pero gamay ra pud ang ilang inadlawan o suholan. Naay makaon namo pero gikan sa umahan sama sa kamote, kamutingkahuy, saging ug lutya. Kong amo kining pa bayloan sa isda pwidi pero gamay ra pud kay mahal man dinhi ang isda barato and ang among abut sa umahan. Wa gyud kami matigum nga kwarta kay wala man kami gyud dinhi kwarta. Kung ang taga ubus mo anhi dinhi barter ra gyud ang ilang buhaton.

[here in our place women or pregnant mother will work in the farm in order we can eat. Even if one is in her family way one need to work because if not you don’t have to be eaten and you’ll pity on your children. Our husband has their own work but having only below daily minimum charter pay. We’ve food to be eaten but coming from our farm such as sweet potato, cassava, banana and we’ve also the taro and this will us our table food. If there are coming from the lowland brought the fish for barter that’s the time we can have the viand but the barter to our fruits from the farm is too small as compared to the goods coming from the lowland. We cannot save money because there is no money here if we want to convert the goods into money the lowlander will say for barter.

Reading the phenomenological outcomes to the main-themes and sub-themes of the ethnographic noting the disadvantage countryside settlers particularly the pregnant mother is the victim of circumstances and downtrodden economically. This is where the maxim from the sidewalks talks said, “*bahala kung mo kaon ta bisan saging basta labing*” [even we eat banana for as long as we love one another] we live together. And this statement was not truly true because seven of ten were single mother.

Distance to travel. The place under study is really in a distant countryside of Malitbog, Bukidnon, Mindanao Philippines. Truly difficult to reach by the services dole-out by the Philippines government. The *travel going to the maternal lying Inn* is unspeakable. The *no transportation available, rivers to cross and other geographic factors such as mountains, hills and valley offers treatments to the maternal lying Inn impossible*. Alleviating mother pregnancy-related discomforts becomes a pregnant mother immediate concern submitting themselves to hilot. A positive outcomes and culturally comforted practiced with the hilot (Belgica et al, 2021). Waking-up this pregnant mother phenomenological lived experience safety and efficacy of treatments provided by quack practitioners are tolerable (Magtalas et al, 2023). For economic reason and distance to travel, life at this practice becomes uncertain and indispensable. The phenomenologically observed lived experienced by the ten (10) pregnant mother participant they said and opined:

Lisud kayo ang kinabuhi dinhi sa bukid tungud kay wala gyud ospital ug sinter nga maka tabang kanamo kung magka sakit. Ang mga doctor atua ra didto sa sintro ug kami nga ania dinhi sa bukid mag ayum-ayum nalang sa amoa aron mabuhi. Tinuod lisud man gyud kaayo dinhi kay taliwala nga bukid layu man gyud pud kaayo sa kadaghanan nga kasinatian.

(very difficult to live in the mountain (countryside) that there is no hospital and healthcare lying Inn that can help us during when we got sick. The doctor is only in the lowland (Poblacion – Center) and us we are in the mountain so we will only do what we can do for our survival in life for a living. It is true that very difficult to live in the mountain countryside even very far from the usual experience)

Reflecting the phenomenologically lived experienced by the ten pregnant mother participants' life would become easy for them and difficult for us to live quality of life. They don't have the choice instead to live life to the fullest and accept the reality. Although during the FGD their body movement speaks that they don't have to choose this life but as they were born, alive, live and have life is the only given place for them to live life to the fullest. So, they will enjoy life at to the expense of having this predicament in life. Although there is an opportunity to come down to the lowland and leave life to the place where they were born. But, their indigenosity culturally embedded life dictates to be truly in the land where their umbilical cord was buried (Gomez, 2023).

Culturally embedded tradition and practices. Pregnant mother is very strong for them to survived and live life as they feel as it is. The contentment of living to the place where they were born is a strong determination despite of knowing that the medical healthcare services is unknown. As mentioned during the FGD the ten (10) participants pregnant mother said:

“Kalooy sa Diyos wala pa man hinoon namatay nga pasinti kang (mentioning the name of the hilot) nga maoy among hilot dinhi sa among dapit gani makuha pa man niya kadtung mga problema (lisud) sa mga babayeng mapdus nga dili na ma tabang sa Ospital. Pananglit kadtong suli nga pagmanganak”

[In Gods' mercy nobody died in the hands of the hilot as patient. And, he (hilot) even get the difficult situation in laboring/delivery or birthing a child that cannot be even medically treated by the Hospital]

Mentioned above are issues highlighted in their too much confidence to the hilot having quality treatment made as “faith healer” of the pregnant mother in maternal healthcare, lack of standardized practices, and potential health risks to mothers and the child in the womb. The complex interplay of cultural beliefs, socioeconomic factors, and healthcare accessibility influencing pregnant mothers' decisions to seek alternative healthcare options (Belgian et al, 2021; Gomez, 2023). However, cautious approach in integrating traditional practices into formal maternal healthcare services to the pregnant

mother ensuring maternal and fetal safety, while advocating for education initiatives to enhance community awareness about the benefits and risks of herbal remedies.

Interfaith and belief system of the people. The role of the belief system to the pregnant mother is the established geographic region of Siloo, Malitbog, Bukidnon Mindanao Philippines that influenced the interaction and reaction of the inhabitants towards their environment which greatly interplay to the pregnant mother healthcare services. The valleys, ridges, plateau, slopes and the mountains system created by nature contributed practices and belief system conform to their cultural living. And these created traditions embedded within the landscape of Malitbog environment. Take note that Malitbog has a peculiar topography and unexplainable geographic factors.

Thus, the summative statement made by the ten (10) pregnant mother during the FGD they said and to wit:

Sa pito/lima/nuevi/onsi/unon namo nga anak silang tanan pulos gi panganak sa mananabang tayhop-tayhop ra gyud ang gi himo ug gamit lamang ang udlut sa bayabas, dahon sa pahid ug dahon sa karnaba o banaba o abana gi la ga kini ug ang uban gi asinan ug gi putus sa dahon sa tuba-tuba ug gi lambunan sa baga sulud sa kinsi ka minutus ug mao kini ang gi gamit sa paghilut kanako. Ug human niana mao usab kini gigamit sa pag tu-ub kanako bukat lang sa habul uban sa pag sinlok-sinlok.

[to the seven / five / nine / eleven / six of our children all of them are labored / delivered by the quack midwife they bellow the air from their mouth with the chewed suits of an herbs on the leaves of guava, sambong and karnaba leaves boiled within fifteen minutes and that's what the quack do to me. After doing, that's also made to be steamed as one covered by the blanket to inhale and exhale.

Noticed the statement above, it is said that pregnant mother is so much dependent on the “hilot” for the reason of economic disadvantage, distance to travel, no available pregnant mother lying inn in the geographic area of Siloo, Malitbog. So, the available pregnant mother healthcare services being rendered in the area was given by the “hilot.” Since, this quack was already known to the area from generation to generation of their genealogy that can perform extraordinary medical assistance, everybody in Siloo, Malitbog looks-up this quack as a person performing healing beyond the herbal manifestation. As if, they possessed a superpower or extraordinary energy that can cure and heal the pain.

Wherein the ritual from Tuesday for absolution of “pugmangayaw” [family conflict]; Wednesday for the ritual on the invitation of love and mercy [family, friends and visitors]; for Thursday, ritual for the healing of the sick and Friday, ritual for the reconciliation “padugu” [offering of the first born blood of the animals] and these rituals are being done either on the “balete” [tropical tree] tree; rocks or in an open field [cord/rice field] with the intersession of the spirits through the incense or frankincense (kamanyang).

The stage of power [portrayal] made by the quack to the people of Siloo, Malitbog, they really feel safety and secured during the birthing of the child because they have someone whom they can confide and rely on as a pregnant mother. During the phenomenological observation on the lived experienced of the ten pregnant mother and the quack, the people are the living witness that they have someone that could fight for their lives to the death. This is the reason that ecumenism in the area was strong and very high because of the corroboration on the multi-sociocultural stand-off and the geographic landscape that power of living in the area really beyond the desired status in the lowland.

EXHAUSTIVE DISCUSSIONS

Pregnant mother its phenomenological lived experienced with the traditional Filipino Quack practitioner is a generation practiced by the inhabitants in Siloo, Malitbog Bukidnon Mindanao Philippines due to many reasons and circumstances. The thematically recorded *presence of quack doctor and practices, economic disadvantage, distance to travel, culturally embedded tradition and practices, interfaith and beliefs system of the people are identified*. Although the practiced and tradition that the pregnant mother who are in their family way are scientifically supported by the recognized herbs by science that are available within their own locals as alternative medicine that are utilized by the “hilot” for medical purposes made by the quack.

Extraordinary and shamanic ability that the quack trained and acquired, it helps very much in harnessing the available alternative medicine. Due to the lack of knowledge and information about the maternal healthcare services to pregnant mother consider that the quack practitioner [doctor] performing the “hilot” has an extraordinary power to medicate and heal the medically complicated pregnancy.

Conclusions

The traditional Filipino 'quack' practitioners [doctor] in Siloo, Malitbog, Bukidnon, Mindanao Philippines play a crucial role in providing accessible healthcare services, yet concerns persist regarding safety and effectiveness. The lack of standardized practices and scientific validation poses risks, especially in managing complex pregnancy-related conditions and emergencies. Integrating these traditional practices into formal healthcare systems through regulation, education, and collaboration with trained healthcare providers is imperative to mitigate these risks.

Furthermore, as findings underscores the importance of integrating cultural diversity and community preferences into healthcare practices and services while promoting evidence-based standards. Initiatives such as community outreach programs or adopt the community, cultural sensitivity training for healthcare professionals, and establishing effective referral systems between traditional healers and medical practitioners could improve safety and efficacy outcomes. Addressing these challenges requires a balanced approach that respects cultural traditions while ensuring the protection, safety of life during the pregnancy of the mother informed and regulated healthcare practices must be observed in promoting the quality of life.

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