



Indigenous Worldview on Health and Its Implications to Modern Medical Practices, Innovation, and Education

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Abstract

This study explores the indigenous perspective on health and how it affects innovation, education, and contemporary medical practices. Indigenous health frameworks provide an alternative to modern Western medicine's reductionist perspective by highlighting the interdependence of the mind, body, spirit, and the environment. Concepts of balance, communal well-being, and the incorporation of generation-old herbal remedies and traditional healing techniques are fundamental to indigenous health viewpoints. These viewpoints offer a more comprehensive picture of well-being than modern medicine frequently does by emphasizing not only physical health but also spiritual, emotional, and social wholeness. The study emphasizes how indigenous knowledge and traditional healing techniques might impact contemporary medical innovation and promote a more culturally competent and integrative approach to healthcare. The study also explores how these worldviews could influence medical education, promoting courses that emphasize community-based care, Indigenous approaches, and cultural awareness. This study emphasizes how important it is to promote diversity in healthcare models, acknowledge indigenous perspectives in medical education, and promote innovation.

Keywords: Medical education, innovation, holistic well-being, Indigenous worldview, health, contemporary medical procedures, traditional healing, cultural competency, and healthcare integration

Introduction

Health is more than the absence of disease. It is a dynamic interplay of physical, emotional, spiritual, and social well-being deeply rooted in cultural and philosophical worldviews. Health, in its truest sense, transcends the biological realm to encompass spiritual, emotional, and communal dimensions. Indigenous worldviews on health exemplify this holistic understanding, emphasizing balance and harmony within oneself, the community, and the environment. These perspectives, which have sustained communities for centuries, challenge the reductionist and mechanistic models prevalent in modern medical practices, which often prioritize treating symptoms over addressing root causes or fostering long-term well-being.¹ In an era marked by global health crises—ranging from mental health epidemics to the impacts of climate change—there is an urgent need to reimagine health systems by integrating diverse epistemologies.

The resurgence of interest in Indigenous health paradigms reflects a growing recognition of their value not only for addressing inequities in healthcare but also for inspiring and promoting innovation in healthcare practices and paradigm shifts in health education.

Scientific innovation in general is a major force behind economic growth and progress in all fields including the promotion of the health and wellness of the people. Science and technology, or Science and Technology Innovation (STI), are the driving forces behind the majority of breakthroughs in major economies.² All innovation

¹ Smith, James, "Healthy Bodies and Thick Wallets: The Dual Relation between Health and Economic Status," in *Journal of Economic Perspectives*, Vol. 13, No. 2. (1999).

² Lauri Johannes Hooli and Jussi Sakari Jauhianen, "Development aid 2.0- Towards Innovation Centric Development Cooperation: The Case of Finland in South Africa," in *IST-Africa Week Conference (IST-Africa)*, Windhoek, Namibia, (2017), 1-9, DOI: 10.23919/ISTAFRICA.2017.8102375.

programs and measures have been thought to be built on STI-based innovation. Science and technology are essential for the creation, spread, and adoption of innovation.³ But when we speak about the health and wellness of people, innovation based on science and technology may not be enough since it involves changes in lifestyles, attitudes, and values. Hence, cultural innovation is also important when we want to ensure the holistic health of the citizens.

While innovations based on science and technology give higher-income economies a significant competitive edge, developing nations like the Philippines have comparatively low innovation metrics due to a lack of scientific knowledge and technological infrastructure and a weak scientific workforce. According to the 2022 Global Competitiveness Index, the nation was placed 80th out of 133 economies in terms of infrastructure and technology.⁴

Jensen and colleagues presented a taxonomy of innovations that separates ideas that leverage local knowledge and practices from those that are STI-based.⁵ This paradigm of innovation can be linked to Polanyi's ideas of explicit and tacit knowledge⁶, which Lundvall and Johnson expanded into four categories of knowledge: know-how, know-what, know-why, and know-who.⁷ In contrast to DUI innovations, which are mostly based on people's experiences (tacit), STI innovations depend on the creation and use of codified scientific and technical information (explicit).⁸

Discussions about whether the two innovation models are superior arose in light of this binary taxonomy.⁹ Although some

³ Fitjar, Rune Dahl and Andres Rodriguez-Pose, "Firm Collaboration and Modes of Innovation in Norway, in *Research Policy*, Volume 42, February 2013.

⁴ See November 15, 2022. Business World Report.

⁵ Jensen, Morten Berg, Björn Johnson, Edward Lorenz, Bengt-Åke Lundvall, and Bengt A. Lundvall. "Forms of knowledge and modes of innovation." *The Learning Economy and the Economics of Hope*, 155, (2007).

⁶ Michael Polanyi, *Knowledge: Critical Concept*. New York: Routledge, Taylor and Francis, 2005.

⁷ Lundvall, Bengt-ake and Bjorn Jhonson, "The Learning Economy", in *Journal of Industry Studies*, Volume 1, Issue 2, (1994).

⁸ Jensen, Morten Berg, Björn Johnson, Edward Lorenz, Bengt-Åke Lundvall, and Bengt A. Lundvall. "Forms of knowledge and modes of innovation." *The Learning Economy and the Economics of Hope*, 155, (2007).

⁹ Jose Gonzales-Pernia. *Global Entrepreneurship Monitor*, 2015.

researchers support STI-based innovations¹⁰, the majority of research indicates that successful innovations are the result of combining the STI and DUI modes of learning and innovation.¹¹ Additionally, firms in various nations that combine the STI and DUI forms of learning are more likely to innovate.¹²

The foundation of knowledge and knowing research can be found in Polanyi's groundbreaking work. According to Polanyi's Tacit Knowing Theory (TKT), knowledge is inextricably linked to its production, dissemination, and use—and, if I may add, to its cultural context.¹³ According to Muralidhar, "what people carry around them, what they observe and learn from experience, and what they internalize" are all considered forms of implicit knowledge.¹⁴ Tacit knowledge tends to "stick" to the knower's cognitive system and is formed by their behavior and interactions with the social environment.¹⁵ The tacit knowledge that has been created and used by the group of people for a long time includes indigenous knowledge and customs.

This paper's primary objective was to examine the Ovu-Manobo tribe's worldviews, which form the basis of their indigenous knowledge and practices (tacit knowledge) regarding caring for ailing family members. These worldviews may serve as a source of indigenous healing practices or an experience-based approach to healing.

In this study, I accompanied the North Valley College team on a community health nursing mission to the Ovu-Manobo community in one of the barangays in Kidapawan City, North Cotabato to witness their traditional healing methods and discuss with the locals their indigenous perspective on health. I also took part in a school-

¹⁰ Rune Dahl Fitjar and Andres Rodriguez-Pose, "Firm Collaboration and Modes of Innovation in Norway," in *Research Policy*, Volume 42, (February 2013).

¹¹ Morten Berg Jensen, Björn Johnson, Edward Lorenz, Bengt-Åke Lundvall, and Bengt A. Lundvall. "Forms of knowledge and modes of innovation." *The Learning Economy and the Economics of Hope*, 155, 2007.

¹² Apanasovich, Natalja, "Modes of Innovation: A Grounded Meta-Analysis, in *Journal of Knowledge Economy*, 7, 720–737, (2016).

¹³ Michael Polanyi, *Knowledge: Critical Concept*, Routledge, Taylor and Francis, New York, 2005.

¹⁴ Muralidhar, Arun. "Risk-Adjusted Performance: The Correlation Correction," in *Financial Analysts Journal*, Vol. 56, Issue 5, 222, (2019).

¹⁵ De Long, David, and Liam Fahey. "Diagnosing Cultural Barriers to Knowledge Management", in *Academy of Management Perspective*, Vol. 14, Issue 4, (2000).

sponsored community outreach program for Kidapawan City's Ovu-Manobo community. I spoke with some of their elders as the nursing students and clinical instructors conducted community health nursing activities and other outreach initiatives. I asked them about the roots of their indigenous healing practices, their historical context, their cultural significance, and their influence on maintaining the community's health and well-being.

Indigenous Perspectives on Healing Practices

The study of the philosophical underpinnings of indigenous healing practices and their important contributions to the discourse on healing and modern medical procedures are gaining attention due to the significance of ancient knowledge systems for understanding health, illness, and healing. Since indigenous healing practices are grounded in their spirituality and community-focused perspectives, they frequently diverge significantly from the biology paradigm that underpins modern healthcare.

The next sections and pages of this paper highlight the key topics that emerged from my interviews with the elders and my observations of their indigenous healing techniques.

Holistic Approach to Healing

Indigenous healing methods are often predicated on a holistic view of health, which recognizes the interdependence and connectivity of the mind, body, spirit, and community.¹⁶ Indigenous healing approaches place a strong emphasis on harmony and balance within the person and their surroundings. This means when a person is not living in harmony with his surroundings, he will experience imbalance, and this imbalance will result in some disease. Dis-ease (disease) means you are not at ease not only with yourself but also with others. Hence, for the Ovu-Manobo is important to live in harmony with your surroundings. Just like a singer, it is important to live in harmony with the song that you sing so that you can bring not only good feelings to your audience or listener but to yourself as well

¹⁶ Bayod, Rogelio. "Communing with Mother Earth: Indigenous Way to Care and Manage the Ecosystem" in *Social Ethics Society Journal of Applied Philosophy*, Volume 6, Issue 1, April 2020.

as an artist. For me, *SONG* signifies our harmonious relationship with Self, Others, Nature and God. Hence, to be healthy, we need to sing our songs well. When I say "sing our song" I mean, we need to experience how to live in harmony with our *self, others, nature, and God*. We cannot live in harmony with others if we do not reach out to them and be with them in their joys, pains, and everyday experiences. We need to experience living with them.

Merleau-Ponty's concept of the embodied experience emphasizes that healing cannot be separated from the lived experience of the body. His phenomenology underscores the importance of integrating sensory and spiritual elements in understanding health and well-being.¹⁷ The Ovu-Manobo healing practices, which involve physical rituals, touch, chanting, and nature-based remedies, align with Merleau-Ponty's view that the body is not just a biological entity but an integral part of the lived world. Health, according to Ovu-Manobo healers, sometimes referred to as *tambalan* or *balyan*, is a condition of equilibrium between a person's physical state and their surroundings, community, and spiritual world. Ovu-Manobo's healing techniques are based on a worldview that holds that life's social, spiritual, and physical aspects are intertwined. Heidegger's concept of "*being-in-the-world*" and his emphasis on "dwelling" in harmony with the environment illuminates the Ovu-Manobo's focus on balance between the individual, community, and nature.¹⁸

This is in contrast to the biological approach that is often used in contemporary healthcare, which frequently distinguishes between mental and spiritual health and bodily health. Echoing ancient holistic techniques, the Philippines' contemporary medical practices are increasingly emphasizing the value of psychological health and patient-centered treatment. The study of Kirmayer and Valaskakis¹⁹ demonstrates how these methods provide a more comprehensive approach to patient treatment while challenging the reductionist and mechanistic viewpoints that predominate in Western medicine. These viewpoints are becoming more widely acknowledged in contemporary

¹⁷ Merleau-Ponty, M. "*Phenomenology of Perception*." Routledge, 1969.

¹⁸ Heidegger, Martin. "*The Question Concerning Technology*." Harper & Row, 1977.

¹⁹ Kirmayer, Laurence and Gail Guthrie Valaskakis, "*Healing Traditions: The Mental Health of Aboriginal People in Canada*, UBC Press, 2009.

methods, such as integrative medicine and mind-body techniques like yoga and meditation, which are now often used in medical settings.

A holistic approach to healing, which considers physical, emotional, mental, social, and spiritual well-being, has become increasingly important in modern medical practices. By addressing the interconnected aspects of health, holistic methods enhance patient care, foster innovative medical solutions, and shape the education of future healthcare providers.

In terms of modern-day medical practices, a holistic approach to healing being practiced and promoted by the indigenous peoples, particularly, the Ovu-Manobo ensures comprehensive care, addressing not just physical symptoms but also emotional and psychological aspects of health. Holistic healing aligns with the principles of patient-centered care, which emphasize understanding the patient's personal, cultural, and spiritual needs. By focusing on overall well-being, holistic healing practices emphasize prevention rather than merely treating illnesses.

Focusing on prevention rather than cure entails personal advocacies as well as institutional or governmental support. Lifestyle changes, stress management approaches, nutritional advice, and psychological counseling are integral components of personal advocacies, reducing the burden on healthcare systems.

However, the government should also look into policy reforms as regards to promotion of healthy lifestyles of people, the work-life balance of employees, and the availability and affordability of healthy and nutritious foods for the citizens.

Spiritual Healing and Rituals

Spiritual rites and cultural rituals are a key part of the Ovu-Manobo healing traditions since they represent their perspective on illness and recovery. Hence, prayers, offerings, chants, and spirit connection may all be a part of healing rituals. Like other Indigenous peoples, Ovu-Manobo people believe that spiritual imbalances or disturbances, which are often ascribed to ancestral spirits or supernatural entities, may cause disease.²⁰ These practices provide an

²⁰ Cababan, Mc. Arthur and Joh David Eslawan, "Ethno-Botanical Survey of Medicinal Plants used by the Talaandig of Lourdes, Valencia City Bukidon, Philippines" in *Journal of Advancement in Medical and Life Sciences*. January 2019.

epistemology of healing that incorporates aspects usually *omitted* from contemporary biological frameworks, such as spiritual knowledge, intuition, and ritual. Rituals play significant roles among the Ovu-Manobo and some other indigenous peoples in the Philippines. Rituals are their means of communicating with the spirits and deities to ask for something. According to the Ovu-Manobo elders “rituals are often performed to restore harmony between the individual, community, and spiritual forces because for them, illness is viewed as a disruption in this balance, and rituals act as a means to realign these relationships.”²¹ In addition, an Ovu-Manobo *Baylan* said that “during rituals, the people, especially the sick people are engaged emotionally as well as spiritually.”²² Indigenous rituals address the psychosocial and spiritual dimensions of illness. Rituals create a space for catharsis, transformation, and the reaffirmation of cultural identity.²³

Spirituality is an important component of indigenous healing practices. The purely scientific underpinnings of Western medicine are challenged by Ovu-Manobo’s focus on spiritual aspects of health, which implies that spiritual care may be an essential component of patient therapy, especially for neglected and marginalized indigenous peoples. Chanting and storytelling which are often incorporated during healing rituals allow participants to connect with ancestral wisdom and release emotional burdens.

Spiritual healing and rituals, traditionally associated with indigenous and religious practices, have gained recognition in modern medical practices. These approaches complement conventional treatments by addressing the psychological, emotional, and spiritual dimensions of health. Spiritual healing practices, such as prayer, meditation, and rituals, help reduce stress, anxiety, and depression. These methods are often used alongside conventional treatments for chronic illnesses, palliative care, and mental health therapies.²⁴ Spiritual healing emphasizes the interconnectedness of mind, body,

²¹ Personal communication with the elders during interview

²² Ibid.

²³ Eliade, Mercea, *The Sacred and the Profane: The Nature of Religion*. Harcourt, Inc. New York. 1987.

²⁴ Koenig, Harold, “Religion, Spirituality, and Health: The Research and Clinical Implications,” in *International Scholarly Research Notices*, 2012. <https://doi.org/10.5402/2012/278730>

and spirit. By incorporating spiritual care into medical treatment, healthcare providers address not only physical symptoms but also emotional and existential concerns, resulting in a more holistic approach to healing.²⁵ For patients dealing with chronic or terminal illnesses, prayer, meditation, and spiritual practices provide comfort, meaning, and hope. These methods help individuals cope with the challenges of their condition and improve their quality of life.²⁶

Government officials and hospital administrators have recognized the need to incorporate spirituality in treating sick patients, they allow prayer sessions and rituals in some hospital rooms. Some hospitals have built chapels for the patients and their family members to pray and find solace in communing with the divine and the ultimate source of healing. However, it needs to be institutionalized through policy formulations to require hospitals to have chapels and prayer rooms, hire chaplains and prayer warriors in every hospital in the country, and provide an enabling atmosphere for prayer warriors to visit and pray for the sick.

Healing as a Communal Activity

Another important theme that emerges from this study is the communal aspect of healing. Indigenous healing practices which are often done through rituals are communal activities. During healing rituals the presence of family members and sometimes, the whole community, highlights the communal and social aspects of healing. Healing rituals often involve collective participation, fostering social cohesion and community spirit. Communal rituals emphasize shared responsibility for the well-being of individuals. As noted above, the Ovu-Manobo believe that disease occurs because there is an imbalance in their relationship with *SONG*. Hence, communal rituals reinforce the idea that healing is not an isolated process but one that is deeply

²⁵ Puchalski, Christina, Robert Vitillo, Sharon Kull and Nancy Reller, "Improving the Spiritual Dimension of Whole Person Care: Reaching National and International Consensus," in *Journal of Palliative Medicine*, Vol. 7, No. 6., 2014.

²⁶ Michael Balboni, Adam Sullivan, Adaugo Amobi, Andrea Phelps, Daniel Gorman, Angelika Zollfrank, John Peteet, Holly Prigerson, Tyler VanderWeele, and Tracy Balboni, "Why Is Spiritual Care Infrequent at the End of Life? Spiritual Care Perceptions Among Patients, Nurses, and Physicians and the Role of Training," in *Journal of Clinical Oncology*, Vol. 31, No. 4, 2012.

embedded in social relationships. Social relationships are central to indigenous healing practices because they reflect a holistic understanding of health that includes the individual, the community, and the environment. Healing is not viewed as an isolated process but as an interconnected one, deeply rooted in collective well-being and social harmony.

The presence of family, community, and the whole village provides emotional and spiritual support during healing, creating a space for individuals to feel cared for, loved, and understood. The presence of loved ones and community members during rituals fosters a sense of belonging, which can enhance psychological well-being. This explains why sick people need to be supported by family members not only financially but also emotionally and spiritually. Some families call a priest to perform a sacrament of anointing. While in most cases, this has not been properly explained, the purpose is not only to spiritually prepare the sick person to face the inevitability of death but to also emotionally and spiritually strengthen him to work for and hope for his eventual healing.

The concept of healing as a communal activity has gained renewed significance in modern healthcare, emphasizing the role of social connections, collective support, and shared experiences in promoting well-being. This approach resonates with traditional healing practices that consider health as an interconnected experience, involving families, communities, and cultural practices. Healing as a communal activity fosters emotional resilience by providing patients with social support. Group therapy, family involvement in care, and community-based health initiatives enhance coping mechanisms and improve the mental and emotional well-being of the people.²⁷ Family involvement and culturally inclusive community health programs, improve treatment adherence and patient outcomes.

Modern medical procedures are beginning to acknowledge the communal component of Ovu-Manobo healing, especially in community health initiatives in the Philippines' rural communities and rural health units. The strategy used by the Ovu-Manobo is in line with

²⁷ Holt-Lunstad, Julliane, Wendy Birmingham, and Kathleen Light, "Relationship quality and oxytocin: Influence of stable and modifiable aspects of relationships" in *Journal of Social and Personal Relationships*, Vol. 32, Issue No. 4., 2014.

the *bayanihan* spirit, a Filipino cultural notion of group harmony that has been used in a number of health treatments, including community health nursing and health services, and even barangay-level healthcare programs.

Ethnobotany and Herbal Medicines

The Ovu-Manobo and other indigenous tribes are renowned for their extensive understanding of ethnobotany, or the utilization of natural resources and plants for medicinal reasons. Herbal medicines are important for Ovu-Manobo healing practices. For the Ovu-Manobo, herbal medicines are more than physical remedies; they are imbued with spiritual significance. Certain plants are believed to possess life energy or are considered gifts from ancestral spirits, making their use part of a holistic healing process. Herbal medicines have cultural significance for indigenous peoples such as the Ovu-Manobo. The use of herbal medicines is a way for them to preserve their cultural heritage and resist external influences that threaten to erode their traditional practices. By continuing to use and teach about herbal medicines, the Ovu-Manobo maintain their autonomy and cultural distinctiveness.

The use of herbal medicines is deeply aligned with Ovu-Manobo's holistic view of health, which encompasses physical, emotional, and spiritual well-being. The preparation and application of herbal medicines are deeply tied to their identity, tradition, and worldview. Herbal plants are carefully chosen not just for their medicinal value but also for their ability to address spiritual imbalances. According to an Ovu-Manobo *Baylan*, "herbal plants are considered sacred, and they are carefully chosen to address illnesses which are caused by bad spirits."²⁸ The Ovu-Manobo's use of herbal medicines reinforces their spiritual and ecological relationship with the land. Plants are often harvested from sacred sites, and their use strengthens their reciprocal relationships and connection to their ancestral territories.

Since Ovu-Manobo and the rest of the indigenous tribes in the Philippines lived in mountainous places where access to modern health care facilities and medical doctors are their day-to-day realities,

²⁸ Personal Communication during interview

herbal medicines have become their first aiders to support their sick members of the family. Herbal medicines are a primary source of healthcare for the Ovu-Manobo due to their accessibility and affordability. In remote areas in the Philippines where modern healthcare services may be limited or unavailable, traditional herbal remedies provide an essential alternative for treating illnesses.²⁹

The use of herbal medicines also requires enough knowledge of the available plants in the immediate surroundings. Ovu-Manobo has traditional healers called *baylans* who are knowledgeable about identifying appropriate medicinal plants and their usage. The *baylans*, are central to Ovu-Manobo healing practices. Aside from their extensive knowledge of herbal medicines, they also act as mediators between the physical and spiritual worlds, conducting rituals to seek guidance from ancestral spirits and deities. Their role reinforces the community's reliance on spirituality as a critical component of health and healing.³⁰ The *baylans* also teach their community members about herbal medicines and their usage. Thus, the Ovu-Manobo have an extensive knowledge of local flora, enabling them to sustainably harvest medicinal plants from their environment.

Herbal medicines are also being popularized even in modern-day medical practices. A lot of medical doctors have been advocating and promoting herbal medicines as complementary and alternative medicines. Modern healthcare systems often integrate herbal remedies to address chronic conditions, stress, and minor ailments, especially in cases where patients prefer natural approaches.³¹ Herbal plants have been used as ingredients for modern-day drugs. Modern healthcare increasingly incorporates herbal compounds into drug formulations. Scientific research has validated the efficacy of various herbal remedies. For example, curcumin (from turmeric) is recognized

²⁹ Panganiban, Christopher, "Performance and Risk Management Practices in Supply Chains", in *International Journal of Advanced Multidisciplinary Studies*, Vol. 3, Issue No. 1, 2023.

³⁰ Ibid.

³¹ Ekor, Martins, "The Growing Use of Herbal Medicines: Issues Relating to Adverse Reactions and Challenges in Monitoring Safety" in *Frontiers in Pharmacology*, Vol. 4. 2013

for its anti-inflammatory and antioxidant properties, while ginger has proven effective in managing nausea and digestive issues.³²

Herbal medicines are also more affordable compared to synthetic drugs, making them accessible to low-income populations. This affordability is particularly critical in developing countries, where a significant portion of the population relies on traditional medicine for primary healthcare.³³ Compared to synthetic drugs, many herbal medicines are associated with fewer side effects when used with proper guidance. Herbal medicines are also being promoted by some health experts for long-term management of conditions such as arthritis, diabetes, and hypertension.

Indigenous Perspectives on Healing: Implications to Modern Medical Practices

Indigenous healing traditions are becoming more valued, yet there are still a number of obstacles standing in the way of connecting Indigenous epistemologies with contemporary medical systems. A significant obstacle is the deficiency in mutual comprehension and attitude between modern medical professionals and native healers. Another obstacle can be found in the over-emphasis on Eurocentric and Western concepts of health that marginalizes non-Western knowledge systems. Furthermore, scientific validation and evidence-based procedures are often given priority in contemporary healthcare systems, which may not always be compatible with the spiritual and qualitative aspects of Ovu-Manobo healing traditions.

However, the integration of indigenous healing practices into modern medical practices, innovation, and education offers a unique opportunity for a more holistic approach to healthcare. These practices, deeply rooted in cultural traditions and knowledge passed through generations, can offer valuable insights into patient care, wellness, and healing.

Indigenous healing practices emphasize a holistic approach to health, focusing not only on physical well-being but also mental, emotional, and spiritual aspects of health. This contrasts with the

³² Singh, Narendra, Yuanyuan Tang, Zuotai Zhang and Chunmao Zheng, "COVID-19 waste management: Effective and successful measures in Wuhan, China", in *National Library of Medicine*, July 2020

³³ World Organization Report, 2019.

Western medical model, which often separates the mind and body. Incorporating this holistic view into modern medical practices can enhance patient care by addressing the full spectrum of human health.³⁴ For example, the use of plant-based medicines and spiritual ceremonies, like smudging or talking circles, can promote healing by addressing emotional and spiritual distress alongside physical ailments.³⁵

Cultural competence is also very important not only in health practices but also in health education and innovation. Medical education has begun to recognize the importance of cultural competence as part of training. Integrating indigenous healing knowledge can help healthcare professionals better understand and respect the cultural beliefs and values of Indigenous patients. This understanding can lead to improved trust and communication, which is essential for effective healthcare delivery.³⁶ Incorporating indigenous healing practices in the curriculum can also foster a more inclusive healthcare system that is responsive to diverse needs.

The use of Indigenous healing methods, particularly herbal medicine, has the potential to contribute to innovation in modern pharmaceutical development. Indigenous knowledge of plant-based remedies and their healing properties can lead to the discovery and development of new drugs. For instance, compounds from plants used by Indigenous groups have been found to have antimicrobial, anti-inflammatory, and anticancer properties.³⁷ Modern scientific research can build on this traditional knowledge, leading to innovations in drug discovery.

³⁴ Kirmayer, Laurence and Gail Guthrie Valaskakis, *“Healing Traditions: The Mental Health of Aboriginal People in Canada*, UBC Press, 2009.

³⁵ Gone, Joseph, “Redressing First Nations historical trauma: Theorizing mechanisms for indigenous culture as mental health treatment”, in *Transcultural Psychiatry*, 2013.

³⁶ Williams, Tom, Gergely Szollosi, and Marttin Embley, “Integrative modeling of gene and genome evolution roots the archaeal tree of life”, in *PNAS*, Vol. 14, No. 23, 2017

³⁷ Radha, Pallavi Chauhan, Puri Sunil, Thakur Mamta, Sonia Rathour, Abhishek Kumar Sharma, and Ashok Pundir, “A Study of Wild Medicinal Plants Used in Nargu Wildlife Sanctuary of District Mandi in Himachal Pradesh, India” in *Journal of Applied Pharmaceutical Science*, Vol. 11, Issue No. 4, April 2021.

Decolonialism, Ethics and Ontology in Healing

In his work, *The Wretched of the Earth*, Frantz Fanon examined the significance of regaining cultural and epistemic sovereignty from colonial oppression.³⁸ Western medicine has frequently participated in colonial endeavors, serving as an instrument of biopolitical regulation.³⁹ Colonial authorities implemented Western medical procedures to manage indigenous populations, undermining traditional healing traditions. According to Walter Mignolo, decolonial philosophy entails a process of disengagement from colonial narratives that elevate Eurocentric modernity and diminish non-Western epistemologies.⁴⁰

Decolonialism promotes the recognition of indigenous knowledge systems as valid forms of knowledge and practice. It advocates for various measures to oppose colonial oppression. It also contests the colonial and Eurocentric paradigms that have influenced global epistemologies, particularly in health and medicine. Linda Tuhiwai Smith emphasizes that the restoration and affirmation of indigenous healing traditions signify a wider initiative aimed at decolonizing knowledge and regaining cultural identity. Indigenous healing techniques, by prioritizing social and spiritual aspects of healing and employing ecologically sustainable methods such as herbal medicine, contest the extractive and individualistic nature of Western medicine.⁴¹

Western medicine's ethical foundations emphasize individual autonomy, clinical objectivity, and standardized laboratory-based therapy. Although these concepts have propelled medical science forward, they frequently neglect the relational and spiritual aspects of

³⁸ Fanon, Franz *"The Wretched of the Earth"* Library of Congress Cataloguing and Publishing Data, New York, 1963.

³⁹ Foucault, Michel, *"Discipline and Punish: The Birth of Prison"*, Vintage Books, New York, 1977.

⁴⁰ Mignolo, Walter, "The rhetoric of modernity, the logic of coloniality and the grammar of de-coloniality" in *Cultural Studies*, Vol. 21, Issue no. 2-3, 2007. <https://doi.org/10.1080/09502380601162647>

⁴¹ Cajete, Gregory, "Indigenous Knowledge: The Pueblo Metaphor of Indigenous Education", in "University of British Columbia Press, 2000.

health.⁴² Indigenous healing practices, in contrast, are characterized by principles of care, relationship accountability, spirituality, and harmony with nature. These activities correspond with non-dualistic ontologies that perceive health as the equilibrium of forces inside a living, interconnected being.⁴³

Decolonial theorists advocate for an ontological transformation that acknowledges the coexistence of diverse epistemologies. This entails opposing the universal application of Western medical paradigms and fostering environments where indigenous healing techniques might flourish autonomously.⁴⁴ The decolonial dimension of liberation for healing necessitates the following: epistemic justice, wherein Indigenous healing practices are acknowledged and validated as legitimate knowledge systems,⁴⁵ resistance to neocolonial exploitation, exemplified by biopiracy, in which pharmaceutical companies exploit Indigenous flora for laboratory experimentation, subsequently developing and marketing costly medicines,⁴⁶ integration without assimilation, promoting dialogue between Indigenous and Western medical systems while safeguarding the autonomy and integrity of Indigenous practices; and community empowerment, wherein Indigenous communities are bolstered in their efforts to reclaim control and preserve their health practices, which are essential to their pursuit of self-determination.

Conclusion

The indigenous healing traditions of Ovu-Manobo provide significant epistemological contributions that offer useful insights into holistic health, the therapeutic function of spirituality, and the rich

⁴² Kleinman, Arthur, *Patients and Healers in the Context of Culture: An Exploration of the Borderland Between Anthropology, Medicine and Psychiatry*, University of California Press, 1980.

⁴³ Smith, James, "Healthy Bodies and Thick Wallets: The Dual Relation between Health and Economic Status", in *Journal of Economic Perspectives*, Vol. 13, No. 2. 1999.

⁴⁴ Quijano, Anibal, "Coloniality of Power and Eurocentrism in Latin America", in *International Sociology*, Vol. 15, Issue Number 2. 2000

⁴⁵ See, Smith, James, "Healthy Bodies and Thick Wallets: The Dual Relation between Health and Economic Status", in *Journal of Economic Perspectives*, Vol. 13, No. 2. 1999.

⁴⁶ Shiva, Vandana, "Bioprospecting as Sophisticated Biopiracy", in *Journal of Women in Culture and Society*, Vol. 32, Issue Number 2. 2007.

ethnobotanical knowledge that may supplement contemporary medical treatments in the Philippines.

There are still obstacles in the way of completely incorporating these methods into the modern healthcare system, but their importance is becoming more widely acknowledged, especially in relation to community-based health programs and the use of herbal medicine. In order to ensure that indigenous knowledge systems are honored, traditional healers must be given a valid place in the Philippines' healthcare system. However, any attempts to incorporate indigenous healing practices and the giving of valid place for indigenous healers need to have strong moral and ethical foundations and be culturally sensitive.⁴⁷ The integration of indigenous healing practices into modern healthcare has the potential to improve patient care, foster innovation, and enhance medical education. However, this integration must be done with respect, cultural competence, and ethical considerations to ensure the benefits are fully realized without exploiting indigenous knowledge. By embracing both traditional and modern approaches, healthcare can become more inclusive, diverse, and effective. A more inclusive healthcare system in the Philippines, this paper suggests, includes programs that teach medical personnel to be culturally aware and mechanisms to include traditional healers in community health planning.

References

- Anito, J. & Morales, MP. *The Pedagogical Model of Philippine STEAM*, 2019.
- Apanasovich, N. Modes of Innovation: A Grounded Meta-Analysis. *Journal of Knowledge Economy*, **7**, 720-737, 2016. <https://doi.org/10.1007/s13132-014-0237-0>
- Balboni, M., Sullivan, A., Amobi, A., Phelps, A., Gorman, D., Zollfrank, A., Peteet, J., Prigerson, H., VanderWeele, T., & Balboni, T. "Why Is Spiritual Care Infrequent at the End of Life? Spiritual Care Perceptions Among Patients, Nurses, and Physicians and the Role of Training," *Journal of Clinical Oncology*, Vol. 31, No. 4, 2012.

⁴⁷ To develop a strong sense of cultural sensitivity in recognizing traditional healers and the treatment of such persons (ed.).

- Bayod, R. Communing with Mother Earth: Indigenous Way to Care and Manage the Ecosystem, *Social Ethics Society Journal of Applied Philosophy*, Volume 6, Issue 1, April 2020.
- Business World Report, 2022.
- Cababan, M.A. & Eslawan, J.D. Ethno-Botanical Survey of Medicinal Plants used by the Talaandig of Lourdes, Valencia City Bukidon, Philippines, *Journal of Advancement in Medical and Life Sciences*. January 2019. <http://scienceq.org/Journals/IALS.php>
- Cajete, G. *Indigenous Knowledge: The Pueblo Metaphor of Indigenous Education*, University of British Columbia Press, 2000.
- De Long, D. & Fahey, L. "Diagnosing Cultural Barriers to Knowledge Management", in *Academy of Management Perspective*, Vol. 14, Issue 4, 2000.
- Education: Drawing Implications for the Reengineering of Philippine STEAM Learning Ecosystem, *Universal Journal of Educational Research*, 7 (12): 2662-2669, DOI: 10.13189/ujer.2019.071213
- Ekor, M. The Growing Use of Herbal Medicines: Issues Relating to Adverse Reactions and Challenges in Monitoring Safety, *Frontiers in Pharmacology*, Vol. 4., 2013. <https://doi.org/10.3389/fphar.2013.00177>
- Eliade, M. *The Sacred and the Profane: The Nature of Religion*. Harcourt, Inc. New York, 1987.
- Fanon, F. *The Wretched of the Earth*, Library of Congress Cataloguing and Publishing Data, New York, 1963.
- Fitjar, R. & Rodríguez-Pose, A. Firm collaboration and modes of innovation in Norway, *Research Policy*, Elsevier, Vol. 42 (1), 128-138, 2013. DOI: 10.1016/j.respol.2012.05.009
- Foucault, M. *Discipline and Punish: The Birth of Prison*, Vintage Books, New York, 1977.
- Gone, J. "Redressing First Nations historical trauma: Theorizing mechanisms for Indigenous culture as mental health treatment," *Transcultural Psychiatry*, 2013. <https://doi.org/10.1177/1363461513487669>
- Gonzales-Pernia, J. *Global Entrepreneurship Monitor*, 2015.
- Gonzalez-Pernia, J., Kuechle, G., & Penia, I. "An Assessment of the Determinants of University Technology Transfer," *Economic Development Quarterly*, 27(1):6-17, 2013. DOI: 10.1177/0891242412471847

- Heidegger, M. *The Question Concerning Technology*. Harper & Row, 1977.
- Hooli, L.J and Jauhianen, J.K. "Development aid 2.0- Towards Innovation Centric Development Cooperation: The Case of Finland in South Africa", in *IST-Africa Week Conference (IST-Africa)*, Windhoek, Namibia, 2017, pp. 1-9, DOI: 10.23919/ISTAFRICA.2017.8102375.
- Jauhianen, J. & Hooli, L.J. "Indigenous Knowledge and Developing Countries' Innovation Systems: The Case of Namibia," *International Journal of Innovation Studies*, 1(1):89-106, 2017. DOI: 10.3724/SP.J.1440.101007
- Jensen, MB., Johnson, B., Lorenz, E., & Lundvall, B.A. "Forms of Knowledge and Modes of Innovation," *Research Policy*, 36 (5): 680-693, 2007. DOI: 10.1016/j.respol.2007.01.006
- Julliane, H.T., Birmingham, W., & Light, K. Relationship quality and oxytocin: Influence of stable and modifiable aspects of relationships, *Journal of Social and Personal Relationships*, Vol. 32, Issue No. 4, 2014.
- Kirmayer, L. & Valaskakis, G.G. *Healing Traditions: The Mental Health of Aboriginal People in Canada*, UBC Press, 2009.
- Kleinman, A. *Patients and Healers in the Context of Culture: An Exploration of the Borderland Between Anthropology, Medicine and Psychiatry*, University of California Press, 1980.
- Koenig, H. "Religion, Spirituality, and Health: The Research and Clinical Implications," *International Scholarly Research Notices*, 2012. <https://doi.org/10.5402/2012/278730>
- Lundvall, B., & Johnson, B. The Learning Economy, *Journal of Industry Studies*, Issue 2, Vol. 1, 1994. <https://doi.org/10.1080/136627194000000002>
- Merleau-Ponty, M. *Phenomenology of Perception*. Routledge, 1969.
- Mignolo, W. "The rhetoric of modernity, the logic of coloniality and the grammar of de-coloniality", *Cultural Studies*, Vol. 21, Issue no. 2-3, 2007. <https://doi.org/10.1080/09502380601162647>
- Muralidhar, A. "Risk Adjusted Performance: The Correlation Correction," *Financial Analysts Journal*, Vol. 56, Issue 5, 222, 2019.
- Panganiban, C. Performance and Risk Management Practices in Supply Chains, *International Journal of Advanced Multidisciplinary Studies*, Vol. 3, Issue No. 1, 2023.

- Polanyi, M. *Knowledge: Critical Concept*, Routledge, Taylor and Francis, New York, 2005.
- Puchalski, C., Vitillo, R., Kull, S., & Reller, N. Improving the Spiritual Dimension of Whole Person Care: Reaching National and International Consensus, *Journal of Palliative Medicine*, Vol. 7, No. 6., 2014.
- Quijano, A. Coloniality of Power and Eurocentrism in Latin America, *International Sociology*, Vo. 15, Issue No. 2, 2000. <https://doi.org/10.1177/0268580900015002005>
- Radha, P.C., Sunil, P., Mamta, T., Rathour, S., Kumar Sharma, A., & Pundir, A. A Study of Wild Medicinal Plants Used in. Nargu Wildlife Sanctuary of District Mandi in Himachal Pradesh, India, *Journal of Applied Pharmaceutical Science*, Vol. 11, Issue No. 4, 2021.
- Shiva, V. "Bioprospecting as Sophisticated Biopiracy," *Journal of Women in Culture and Society*, Vol. 32, Issue No. 2, 2007.
- Singh, N., Tang, Y., Zhang, Z., & Zheng, C. "COVID-19 waste management: Effective and successful measures in Wuhan, China," *National Library of Medicine*, July 2020. doi: [10.1016/j.resconrec.2020.105071](https://doi.org/10.1016/j.resconrec.2020.105071)
- Smith, J. Healthy Bodies and Thick Wallets: The Dual Relation between Health and Economic Status, *Journal of Economic Perspectives*, Vol. 13, No. 2. 1999.
- Smith, L.T. On Tricky Ground: Researching the Native in the Age of Uncertainty, *The Sage Handbook of Qualitative Research*, 3rd Edition. SAGE Publications, 1999.
- Williams, T., Szollosi, G., & Embley, M. Integrative modeling of gene and genome evolution roots the archaeal tree of life, *PNAS*, Vol. 14, No. 23, 2017. <https://doi.org/10.1073/pnas.1618463114>