KASIYANA

A GLIMPSE OF INDIGENOUS HEALING IN THE CORDILLERA



Kasiyana: A Glimpse of Indigenous Healing in the Cordillera

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PIKP works with partners for the recognition and revitalization of indigenous knowledge systems and communication of the necessity, diversity, and contemporary relevance of indigenous knowledge.

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PARTNERS FOR INDIGENOUS KNOWLEDGE PHILIPPINES

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Table of Contents

Preface 1
Introduction 3
Health and Well-being embedded in the
Cordillera Indigenous Peoples' Worldview 5
Scoping Review of Laws, Policies, and Initiatives
on Indigenous Health and Wellness (IHW) 11
Photos of Medicinal Plants 39

A. Nature's Healing Resources

Chapter 1 Nature's Medicines in Abra 51
Chapter 2 Medicinal Plants in Loakan 53
Chapter 3 The Jungle Garden in the City 58
Chapter 4 Paggamit ng Halaman at Langis sa Pag-gagamot 64
Chapter 5 Medicinal Plants in Barlig and Baguio City 67
Chapter 6 Healing Plants from All Around 76
Chapter 7 Medicinal Plants in Dandanac 80
Chapter 8 Stories of Healing in the
Lubos-Tumpao-Tiotioen-Dulnuan family 85
Chapter 9 Some Indigenous Healing Practices of
the Bagbago People of Tubo, Abra 91
Chapter 10 Tinitin, Luchis, Tokag 97

B. Ilot / Hilot / Theraputic Massage

Chapter 11 Family's Healing Partner 100
Chapter 12 A Healer's Journey from the Village to the City 103
Chapter 13 Sibling Lessons: A Brother's Guiding Hand 105
Chapter 14 Blending Indigenous Wisdom and Modern
Healing Massage 108
Chapter 15 Paggamot sa Pamamagitan ng Hilot at Hawak 116
Chapter 16 Natural Healing Massage 122
Chapter 17 Man-uyad (Bone Setter).....128
Chapter 18 Passing Down the Trade: A Father's
Legacy to his Daughter 131

Table of Contents

C. Indigenous Healing Rituals

Chapter 19 Baki (Healing Ritual of Ifugao) 134
Chapter 20 Iyap (Healing Ritual of Lias, Barlig, Mountain Province) 137
Chapter 21 Paggamot sa Pamamagitan ng Pangitain at Ritwal 139
Chapter 22 Clairvoyance and Healing 146
Chapter 23 Calling Back the Kachidwa (Soul) 153
Chapter 24 A Visit From a Grandfather 157
Chapter 25 Daw-ës (A Cleansing Ritual) 160
Chapter 26 Amma (Hexing and counter hexing) 162

D. Other Wellness and Healing Modalities

Chapter 27 Manmadmad (Ibaloy Indigenous Prayer Leader) 165
Chapter 28 Aggasang (Life force*) 167
Chapter 29 Peltek, Pitik, Funi 170
Chapter 30 Sab-ong (Traditional Signage to Prevent Bad Luck, Accidents, and Sickness) 174
Chapter 31 Taan sin Afat 176
Chapter 32 Tugnu (Ritual for good weather) 180

E. Community Initiatives

Chapter 33 Guisad Central Barangay and their Dap-ay 182
Chapter 34 Liwanag-Loakan Barangay and their Baeng 186
Chapter 35 Empowering Communities for Holistic Health 188

F. Discussion of Research Findings

Framing The Narratives: Key Findings from the Scoping Review 191
The Narratives 194
Threats And Challenges to Indigenous Health and Wellness.....206
Conclusion 208
Diagram on Indigenous Health and Wellness 210
Ways Forward: Key Advocacy Messages on Indigenous Health and Wellness (IHW) 213

PREFACE
A GLIMPSE OF INDIGENOUS HEALTH AND HEALING IN THE CORDILLERA

Health and wellness are fundamental in any society. They are essential conditions for the survival and development of any race or tribe. Since the beginning of time, societies worldwide have developed their own wellness and healing practices to ensure strength for work, happiness, pain relief and longevity. These are their indigenous practices. These practices emerged from indigenous wisdom and native science, addressing not only physical health challenges but any condition that disturbs wholeness. Indigenous wisdom recognizes that people are interconnected with one another and their environment, including the unseen. Naturally, people harnessed what was available in their surroundings as remedies to maintain and restore wholeness. Over time, these practices evolved into traditions because they were effective. These indigenous traditions have sustained societies across the globe, contributing to the burgeoning world we live in today.

However, these indigenous traditions of health, wellness, and healing have been marginalized with the introduction and widespread adoption of modern biomedical medicine. Further, there is limited documentation on indigenous health and healing. This book, therefore, aims to document these practices and traditions to help promote indigenous health and healing. It contains stories of healing using indigenous methods, either alone or integrated with modern modalities, as well as accounts of various indigenous healers.

This book is based on a study done in Baguio City and its nearby municipalities, all located in the Cordillera Administrative Region (CAR). This region is predominantly populated by indigenous people, commonly referred to as Igorots, from a Spanish word “Ygorotes” meaning “people of the mountains.” Many people from the provinces of CAR have moved to Baguio City for education and livelihood opportunities. All the authors of this book are indigenous persons,

identified according to their ethno-linguistic group lineage.

In reading this book, you may need to adopt a different lens. We divided the book into different sections based on healing modalities, but you may notice an overlap of the modalities in the individual stories. As mentioned earlier, indigenous healing is holistic, taking into consideration the body, mind and spirit. Thus, indigenous healers often use more than one treatment modality to address a person's condition. Terms are also used interchangeably, like "indigenous healing massage" and "traditional healing massage," "traditional health practitioner" or "indigenous health practitioner."

As you read this book, you will see that indigenous wellness and healing takes time and effort, two resources that are precious in modern society, but that is precisely why they are effective and long-lasting.

Careful listening and conscious effort have been made to capture the stories as told. However, there still might be errors in the documentation and translation for which we apologize to the author.

To provide a comprehensive understanding of the current landscape of indigenous health and wellness, this book also includes a scoping review of policies and initiatives related to indigenous health. This review offers an overview of existing frameworks, identifying key government policies, programs and gaps that impact indigenous health practices today. This scoping review bridges the gap between academic research and the lived experiences of indigenous healers, offering a holistic exploration of the subject.

As you read, we ask you to reflect on the importance of preserving these practices, not only as a matter of cultural heritage but as a crucial component of global health diversity. In an era where the limitations of conventional medicine are increasingly apparent, the holistic and and integrative approaches of indigenous healing offer pathways to health that the modern world can ill afford to ignore.

Dr. Penelope Aquino - Domogo
Editor

INTRODUCTION

Prior to the introduction of Western modern medicine in the Philippines, Filipinos relied on traditional healing practices. For indigenous peoples, in particular, healing was based on a fundamental belief in the Creator and the Unseen. Such beliefs persisted in varying degrees despite the influences of education and religion on indigenous communities.

Gifted healers understood the dynamics between physical and spiritual realms. Healing an individual involved viewing a sick person in relation to their interactions with family, community, nature, and the Unseen. Rituals, prayers, use of medicinal plants and healing touches were all part of various healing approaches by the healer.

According to a study by Yang-ed et. al (2009) on *health practices and beliefs among some ethnic groups in the province of Benguet* which covered a number of ethnolinguistic groups, the traditional beliefs of indigenous communities in the Cordilleras "include an idea of the existence of supernatural beings and spirits that influence their day-to-day life. They believe that there are spirits as well as an ultimate being that guide them in every aspect of their lives. Good health, good harvest, success in work and business undertakings are recognized and attributed to the good relationship to *Kabunyan."*

As modern medicine became a dominant feature in the Philippine health system over the past decades, indigenous healing practices and indigenous healers have diminished. According to Manda Cados, an Ibaloy mambunong, "there are just a few mambunong left" (Indigenous Wisdom at Work, 2022). In the Yang-ed et.al study, respondents rarely consulted folk healers and ritual practitioners. They would rather go to a doctor or hospital, and more often to a barangay health worker, although they would still use herbal remedies. However, in other communities of the Cordilleras, such as in Besao, Mountain Province, "in spite of the external knowledge as an influence of modernization or state-of-the-art technologies, rituals are still being practiced by majority of the Besao

people including the highly educated and the regular churchgoers. Parts of the rituals are the indigenous prayers based on their spiritual belief." (Fiar-od, 1999 as stated in Yang-ed study, 2009)

In Baguio City, a hub of many ethnolinguistic groups from the Cordillera, people have immediate access to doctors and hospitals. Nevertheless, some still rely on indigenous healers and ritualists living in the city or nearby neighboring municipalities. A book on indigenous communities in Baguio City describes that "for many, there is no perceived clash between indigenous spirituality and the Christian faith… it is common practice to have a church wedding and also a traditional wedding, with the ritual prayers and offerings, the butchering of animals, and the community and the spirits of the ancestors in attendance" (Indigenous Wisdom at Work, 2022).

Healers are called by different names, depending on their gift and place of origin. For example, a *mambunong* is an Ibaloy traditional ritualist in Benguet, while a similar traditional ritualist in Ifugao is called *mumbaki*. Some healers use a mixed mode of healing, combining traditional Cordillera practices with other non-Cordillera practices such as acupuncture and different types of massages.

The direction of indigenous health and wellness seems uncertain with modern influences. Yet, through these stories, this book hopes to provide a glimpse of the practices of indigenous healers in Baguio City and some provinces of the Cordillera, and show the perspectives of some patients healed by these healers. In this way, we hope that indigenous health and wellness practices be better understood, recognized, and transmitted.

Mabel Grace P. Batong
Transformative Pathways Project Manager (2022-2025)

HEALTH AND WELL-BEING EMBEDDED IN CORDILLERA INDIGENOUS PEOPLES' WORLDVIEW

Indigenous health and well-being knowledge and practices are interwoven in the peoples' worldview. This worldview has been passed on through example and orally from elders to the young from generation to generation.

However, because of its colonial history, Cordillera indigenous worldview is discriminated against and seen as an inferior set of knowledge to western-based knowledge and allopathic medicine. Presently, indigenous health and well-being practices are still being done alongside western allopathic medicine.

These practices persist despite being eroded by external and internal threats to indigenous peoples such as the expansion of business interests in the Cordillera including large mines, dams, logging operations, and high input chemical agri-business. These big businesses threaten indigenous communities and their land and territories. Moreover, migration, modernization, urbanization, and fundamentalist religions also play a role in the continued erosion of indigenous worldview. Because of these, values and choices that promote healthy lifestyles are changing within indigenous communities, and many young people are not interested in learning from their elders.

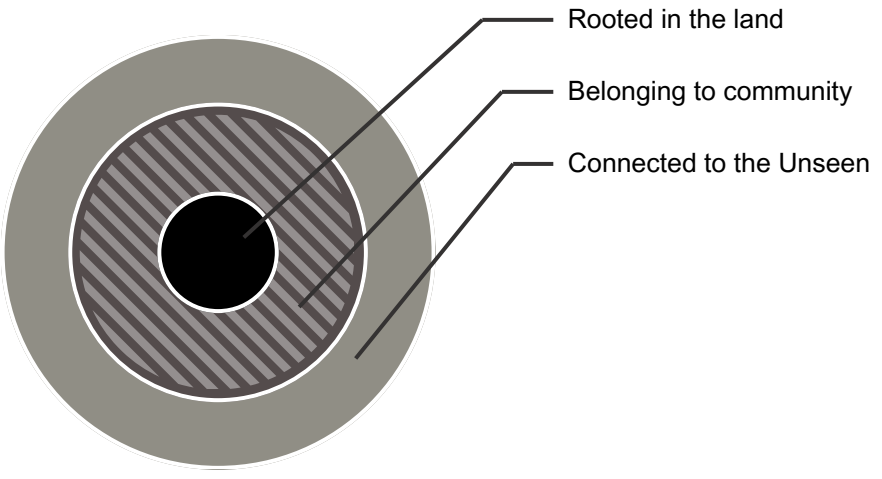
However, the present crises of climate change, biodiversity loss, poverty, and peace and security issues among others is creating a renewed interest and appreciation of indigenous knowledge and worldviews around the world, including that of the Cordillera peoples. To help solve these global crises that the world is facing today, initiatives from the local, national and international level are being pursued to revitalize and revive indigenous practices, knowledge, and lifeways.

In the Philippines, indigenous health and well-being practices are recognized under Republic Act No. 8423, the Traditional and Alternative

Medicine Act (TAMA) of 1997. The Act aims to strengthen the health care system in the country by providing the people with a wider range of health products and services, including traditional and alternative health care, that are proven safe, efficient, effective, and of quality at affordable prices. During the COVID-19 pandemic, there were many accounts of indigenous peoples who resorted to indigenous healing practices like use of medicinal plants and steam inhalation to manage symptoms of Covid-19. During this time also, many indigenous communities had tengao or te-er or ubaya, the traditional lockdown when nobody can enter or go out of the community and the elders perform rituals to ward off the disease.

To understand indigenous peoples' health and well-being practices, it is important to look at these from their worldview or from how they interpret and understand the world around them expressed in beliefs, attitudes, values, stories and expectations, informing people's thought and action. (Google, Accessed April 22, 2023)

The Cordillera indigenous peoples' worldview is the result of thousands of years of experimentation, practice, and innovation adapted to the mountainous environment of the Cordillera Region. This worldview is characterized by wholeness, interconnectedness, and harmony with the land and environment, the unseen, and the community. Below is an illustration of this wholeness and interconnectedness.



The indigenous people are rooted in the land that includes mountains, rivers, streams, springs, natural resources, plants and animals, and the environment.

Just like all other indigenous peoples, indigenous peoples of the Cordillera are dependent on the land for their subsistence and survival - food, shelter, clothing, medicines, and other needs. In return, they have developed an attitude of caring, deep respect, gratitude and responsibility for the land and its resources. They live a simple life, practicing restraint in gathering the fruits of the land to get only what is needed and leave the rest for others (Carino-Fangloy et al 2015:2). They place great value on frugality, industry, and hard work, and look at honest labor as a blessing and a way of showing gratitude and giving back to the earth which nurtures them.

Indigenous people of the Cordillera are connected to and respect the Unseen Beings that include an Unseen Supreme Being, ancestor spirits, nature spirits, and a person's soul or spirit. Carino-Fangloy et al explain that the Cordillera indigenous people are sensitive to the loving presence of the divine in the world around them. Their ancestral lands and territories are considered sacred ground where the unseen spirits live among the humans. (Carino-Fangloy et al 2015:1-2)

Indigenous peoples belong to a community that includes family, clan or kinship group, and extends to inter-community relations. The community and the values that the people hold provide physical, psychological, and spiritual support. The community values individual and community cooperation and contribution to the common good. Outsiders are welcomed and treated with respect by indigenous communities but are also expected to cooperate. (Carino-Fangloy et al 2015:2)

Cordillera indigenous worldview is evident in the values that they practice in their everyday life. The following are three examples:

- The practice of *binnadang* or mutual help, especially in vital events like birth, weddings, and death ensure physical, emotional, and spiritual support in these critical times. *Binnadang* is also practiced in occasions that require heavy manual labor like building a house

planting, and harvesting rice. There is also sharing of one's harvest like the saga-ok, the sharing of gold ore production with women.

- The value and practice of *inayan* or *paniyew* or *paniyo* among the indigenous peoples of the Cordillera is a form of social control to ensure harmony, peace, and order. *Inayan* is Kankanaey, *paniyew* is Kalinga and *paniyo* is Ifugao – these are terms meaning "taboo" – meant to prevent a person from doing something bad to others, the Unseen, and the environment, otherwise something bad will also happen to the doer. It is *inayan*/*paniyew*/*paniyo* to be disrespectful, to steal, to kill. It is "inayan" to pollute drinking water sources (Kankanaey). It is *paniyew* to intrude into abodes of unseen spirits (Kalinga). It is also an expression uttered to warn someone not to execute an evil plan, or break an existing custom and beliefs. According to one elder of Sagada, Mt. Province, there would be no problems in the world if *inayan* is followed.

- *Kasiyana* is another indigenous value that means assurance of a better future amidst a negative situation. It is being positive borne out of a trust in the Unseen. The word "kasiyana" is to wish someone well, or to express one's sympathy to someone in mourning. And when you feel unlucky or fighting a battle no one knows about, you can whisper to yourself "Kasiyana, it's alright." "Kasiyana" means "things will be better." (Accessed from Igorotage.com, April 27, 2023; Bag-Iw Lg, December 2020).

Common also among various indigenous peoples of the Cordillera is the value of rest or slowing down as practiced in *ngilin or tuor or tengao*. These are a rest day or days which are observed after intense physical or emotional activities such as after planting and harvesting rice, during wakes, and after a burial. During the rest day, no one is allowed to enter or go out of the village.

Bain or shame is also a common value that controls behavior. "Don't kill or hurt others, these will cause shame to you and your family."

In this indigenous peoples' worldview, therefore, there is good health and well-being when there is harmony, good relationships, or

connectedness of 1) the individual with his/her body, feelings, emotions, thoughts, and spirit or soul; 2) the individual with other people, family, extended family or household, kinship group or clan, community or *ili,* (Kal., Kan.) *boble* (If), and inter-community; 3) the individual and community with the land and its resources; and 4) the individual and community with the Unseen God, ancestor spirits, and nature spirits.

The Kalinga people's concept of wellness is *lin-awa*, referring to a holistic sense of well-being including refreshing, light or good feelings and thoughts. The Ibaloy people have the concept of *diteng***,** pertaining to the absence of sickness, no deaths, no trouble (as when all is well with a person and community); to become well, healthy; to come to normalcy. (Ibaloy Dictionary and Grammar 2011)

Wholeness or connectedness of a person to his/her body, feelings, emotions, thought, and soul means a person takes care of his/her physical body, feelings and emotions and thoughts by being contented and being positive. Taking care of the physical body includes eating nutritious food, doing productive work, regular exercise, and good relations with others. Doing productive work includes, but is not limited to tending the farm, home gardens and rice terraces and clan woodlots and watershed.

The separation of the spirit from the body will also cause illness or dis-ease therefore rituals have to be performed to reconnect the spirit to the living person and restore wellness and wholeness.

Harmony and peace or connectedness among individuals, families, and communities is promoted by the various practices mentioned earlier: *binnadang, inayan*/*paniyew*/*paniyo, kasiyana, ngilin, bain*. Aside from this, the people of Kalinga and Sadanga and Bontoc have the *bodong, vochong (Kal)* or peace pact, a complex institution of ensuring peace, safety, and harmony between villages.

Connectedness of the individual and community with the land is characterized as taking care and nurturing the land. When this is done, the land takes care of the people's sustenance and gives life. Nature is healing and a source of healing materials. Examples are 1) the use of

medicinal plants, both wild plants and weeds, from the forest and fields and domesticated plants from the fields and gardens for healing, 2) use of *lana***,** coconut oil for healing, 3) use of water, stones/mineral stones, hot springs for healing such as the Mainit Hot Springs, Mt. Province, and Asin Hot Springs in Asin, Baguio, and 4) the use of *sapuy* (Kal.) breathe or energy and saliva for healing.

Harmony and good relationship or connectedness of the individual, community with the Unseen God, ancestor spirits, and nature spirits is closely related with the land because indigenous peoples believe that springs, rivers, forests, mountains, trees and even agricultural lands, and home gardens are abodes of unseen spirit beings. Recognition and respect for the unseen in nature is shown by asking permission and performance of ritual offerings and prayers to ensure safe use of resources from the earth: gold and silver, water, plants and animals from the forest. Aside from this, it is also *inayan to* pollute or dirty springs, streams, and rivers; and to be rowdy or noisy in springs, streams, rivers, and forests.

Spirits and ancestor spirits are also guides in healing through signs, dreams, and visions. Through these, causes of illnesses are identified and rituals are prescribed for healing a sick person.

Rituals, all involving prayers and offerings, are integral to the life of the indigenous person and community. Various rituals are performed mostly as thanksgiving to mark the milestones in life and ensure connectedness, health, and well-being- at birth, when the cord falls off, during wedding, at death, and even after-life. Rituals such as the *begnas* are also performed as thanksgiving for bountiful harvest and to ensure bountiful harvest.

In summary, in the Cordillera indigenous peoples' worldview, health and wellness is a product of the wholeness and harmonious relationships within and among individuals, the community, the environment including the land, unseen spirits, and the Unseen Supreme Being.

Maria Elena Regpala
Centers of Distinction on Indigenous and Local Knowledge

SCOPING REVIEW OF LAWS, POLICIES, AND INITIATIVES ON INDIGENOUS HEALTH AND WELLNESS (IHW)

A. Legal Basis for Indigenous and Traditional Health Care in the Philippines

1. 1987 Constitution of the Philippines

The Constitution has the following provisions that underscore the duty of the State to promote the health and well-being of its citizens through an integrated and comprehensive approach, which serve as the foundation for the promotion of both modern and indigenous health and wellness practices:

a. Article II, Section 15** of the 1987 Constitution states:
"The State shall protect and promote the right to health of the people and instill health consciousness among them."

b. Article XII, Section 11 of the Constitution states:
"The State shall adopt an integrated and comprehensive approach to health development which shall make essential goods, health, and other social services available to all the people at affordable cost. There shall be priority for the needs of the underprivileged, sick, elderly, disabled, women, and children. The State shall endeavor to provide free medical care to paupers."

c. Article XIV, Section 17:
"The State shall recognize, respect, and protect the rights of indigenous cultural communities to preserve and develop their cultures, traditions, and institutions."

2. Indigenous Peoples' Rights Act (IPRA) of 1997

Known as Republic Act No. 8371, IPRA is the primary law in the Philippines that promotes and protects the rights of indigenous peoples, including their right to health and their right to preserve

and continue indigenous healing, health, and wellness, as stipulated in the following provisions:

1. Section 21. Equal Protection and Non-discrimination of ICCs/IPs
"… the State shall, with due recognition of their distinct characteristics and identity, accord to the members of the ICCs/IPs the rights, protections and privileges enjoyed by the rest of the citizenry. It shall extend to them the same employment rights, opportunities, basic services, educational and other rights and privileges available to every member of the society.

2. Section 25. Basic Services
"The ICCs/IPs have the right to special measures for the immediate, effective and continuing improvement of their economic and social conditions, including in the areas of…. sanitation, health and social security…."

3. Section 29. Protection of Indigenous Culture, Traditions and Institutions.
"The State shall respect, recognize and protect the right of ICCs/IPs to preserve and protect their culture, traditions, and institutions. It shall consider these rights in the formulation and application of national plans and policies.

4. Section 32. Community Intellectual Rights
ICCs/IPs have the right to practice and revitalize their own cultural traditions and customs. The State shall preserve, protect and develop the past, present, and future manifestations of their cultures….

5. Section 33. Rights to Religious, Cultural Sites and Ceremonies
ICCs/IPs shall have the right to manifest, practice, develop, and teach their spiritual and religious traditions, customs and ceremonies, the right to maintain, protect and have access to their religious and cultural sites, the right to use and control of

ceremonial objects….."

6. Section 34. Right to Indigenous Knowledge Systems and Practices and to Develop own Sciences and Technologies.
ICCs/IPs are entitled to the recognition of the full ownership and control and protection of their cultural and intellectual rights. They shall have the right to special measures to control, develop and protect their sciences, technologies and cultural manifestations, including human and genetic resources, seeds….. traditional medicines and health practices, vital medicinal plants, animals and minerals, indigenous knowledge systems and practices, knowledge of the properties of fauna and flora…."

3. **Traditional and Alternative Medicine Act (TAMA) of 1997 (Republic Act 8423)**

This is a corollary to the IPRA which defines specific measures like research and formulation of guidelines for the practice of traditional and alternative health care.

Section 2 states "It is hereby declared a policy of the State to improve the quality and delivery of health care services to the Filipino people through the development of traditional and alternative health care and its integration into the national health system."

B. Policies

As an offshoot of the laws mentioned above to promote indigenous health and wellness, the national government formulated the following policies:

1. **Joint Memorandum Circular (JMC) 2013-01 / Indigenous Peoples Health Policy**

In 2013, the Department of Health (DOH), the National Commission on Indigenous Peoples (NCIP) and the Department of Interior and Local Government (DILG) came up with JMC 2013-01 or **Indigenous Peoples Health Policy**

which established guidelines for the delivery of basic health services for ICCs/IPs.

Its **objectives** are to address issues of **access, utilization, coverage, and equity** for better health outcomes. To provide directions for making basic health services available and culture – sensitive, providing equitable distribution of needed health resources, ensuring non-discrimination of ICCs/IPs in the delivery of health services, managing geographical, financial and socio-cultural barriers, and strengthening recognition, promotion, and respect of safe and beneficial traditional health practices.

Its guidelines include bringing basic health services to geographically isolated and disadvantaged areas. It also provides for acknowledgement and encouragement of indigenous health and wellness practices of ICCs/IPs that are safe and beneficial. It especially encourages use of medicinal plants. It provides for more research on indigenous health and wellness practices. It also provides for more culture – sensitive trainings for health workers and production of culture-sensitive information, communications, and education materials. It provides for the formulation of health care programs and policies that are culturally sensitive and adapted to local conditions.

Dr. Ryan Guinaran conducted a study to assess the implementation of the JMC 2013-01 in the regional level and published in December 14, 2020. Entitled "**The Practice of Power by the Regional Managers** in the implementation of the Indigenous Peoples Health Policy in the Philippines", it showed the different levels of implementation by the regional managers and the factors affecting the implementation.

Factors supporting its implementation are: 1) The manager is an IP, 2) Manager believes in the efficacy of indigenous healing thus it is a welcome development to integrate some indigenous healing beliefs and practices into the mainstream health system.

Factors constraining its implementation are: 1) The manager is non-IP 2) Lack of understanding of indigenous health, 3) Lack of cultural competence, knowledge and skills on indigenous health and culture 4) Some managers are loaded with work and they treat the JMC as an added burden, 5) The policy came from the top and it lacked consultation from the lower levels, resulting in a lack of some cultural nuances.

Quoting from Dr. Guinaran's study, "The links of indigeneity to policy implementation have also been shown more widely. For example, evidence suggests that policies meant for Indigenous communities strengthen Indigenous identity. In addition, it has also been recognized that employing Indigenous staff and leader – managers in organizations serving Indigenous populations helps to embed community's cultural value in service delivery, increase Indigenous health care engagement, and facilitate cultural mentoring to non – Indigenous staff. However, this study noted that some Indigenous managers were not aware of their Indigenous culture and were less supportive of policy implementation. The mere presence of Indigenous managers in an organization does not, therefore, necessarily facilitate Indigenous policy implementation. Health managers, including those who are Indigenous, should be trained on cultural competence."

Further, Dr. Guinaran concludes that "The practice of power by actors at key administrative interfaces are important influences over the implementation and uptake of the Philippines' Indigenous Health Policy by the health system. This in-depth analysis of these practices reveals the power sources and triggers that provide the personal and organizational context for the manifestation of power. Subnational health managers are strategic actors in translating central policies and directions to operational action down to frontline. As such, probing into the use of their discretionary power is essential in health policy implementation analysis. Indigenous program managers are most likely to support an Indigenous health policy, but personal

and organizational factors can also override this inclination."

2. Administrative Order No. 2021 - 0034

Administrative Order No. 2021 – 0034 on the **National Policy on Essential Intrapartum Care at Primary Level Non – Specialist Birthing Centers** allows some traditional cultural practices in the process of birthing for maternal and newborn care providers / skilled health professionals in primary care facilities and non – specialist birthing centers in Rural Health Units, Urban Health Centers, LGU Hospitals, and similar health care providers in the private sector. In the first stage of birthing where the mother is in labor, the mother is given an option to choose a traditional cultural practice of pain relief. This policy also gives an option to the mother to choose the birthing position that she is most comfortable with and to make her labor easier. Such positions are practiced in the Cordillera like the ones practiced in Sagpat, Kibungan, Benguet (RS Batani 2020).

C. Initiatives on Indigenous Health and Wellness

This section dwells into the plans, programs, and activities related to indigenous health and wellness by the government and private sector, based on the information we were able to gather. Many of these initiatives are researches mostly on medicinal plants and some on indigenous health beliefs and practices.

1. **GOVERNMENT**

a. Philippine Institute on Traditional and Alternative Health Care (PITAHC)

PITAHC, a government owned and controlled corporation attached to the Department of Health, was created under Republic Act # 8423 or the Traditional and Alternative Medicine Law (TAMA) of 1997. "PITAHC advocates the development and use of traditional and alternative health care in the Philippines. It was created

with the objective of improving the quality and delivery of health care services to Filipinos by integrating traditional and alternative health care into the national health care delivery system. Our goal is also to position traditional and complementary medicine as a legitimate field of medicine." (pitahc.gov.ph)

Among other things PITAHC is tasked to 1) handle all research and development matters related to traditional and alternative health care, 2) develop training programs, formulate standards, code of ethics, guidelines, and policies regarding the practice, development, and promotion of traditional and alternative health care. 3) coordinate different activities related to traditional and alternative health care. 4) handle accreditation and recognition of TAHC practitioners, clinics, training centers, and organizations. They also provide funding to outside research proposals that pass their criteria.

Their website publishes research output from 1997 up to 2022 . There are about 103 researches completed, majority of which are on identifying the medicinal and nutrient content of medicinal plants and some research include other aspects such as preparation, processing, dosage, and indications. There are a few ones dealing on other healing modalities like hilot and rituals, but they are not necessarily indigenous. Out of the 103 total research, 26 are related to health beliefs and practices by indigenous cultural communities, 10 of which were done in the Cordillera. Out of the 26, there are 21 researches on the general traditional beliefs and practices on health, 4 on medicinal plants, and 1 on indigenous food. These 21 researches are listed below:

From their 2022 year-end report:

1. Delving into the Meanings of Traditional Medicine among Filipino Healers and Medical Doctors (additional project)
2. Printing and Publication of the Philippine Herbal Pharmacopoeia 2022
3. Encyclopedia of Medicinal Plants, Volume 4
4. Nationwide Profiling Survey of Traditional and Alternative Health Care (TAHC) Practitioners in the Philippines, Phase 2
5. Sacred Healing Places in Mindanao
6. Validating and Screening of Indigenous Food Plants for use as Complementary Nutrient Sources in Support for Maternal-Neonatal Wellness
7. Evidence-based Study for Murine Models
8. Profiling Survey of Traditional and Alternative Health Care Practitioners, Phase 1
9. Encyclopedia of Medicinal Pharmacopeia, volume 4
10. Philippine Herbal Pharmacopoeia (Printing and Publication)
11. Nationwide Profiling Survey of Traditional and Alternative Health Care Practitioners (TAHC) in the Philippines, Phase 1

Hundreds of TAHC practitioners have been profiled, mostly acupuncturists, followed by practitioners of naturopathy, then homeopathy, homotoxicology, chiropractors, and only 20 hilot practitioners. There is no classification of the hilot practitioners if they practice indigenous hilot massage or otherwise. Health are practitioners using medicinal plants and rituals or prayers are not on the list.

Researches from 1997 to 2019 reports that are related to Cordillera Indigenous Health and Wellness:

2000

1. Ethnomedical Documentation of the Kalinga People of Tinglayan, Kalinga (Technical Report)
2. Ethnomedical Documentation of the Northern Kankana-ey People of Besao, Mountain Province (Technical Report)

3. Ethnomedical Documentation of the Ifugao People of Poitan, Banaue, Ifugao (Technical Report)
4. Ethnomedical Documentation of and Community Health Education of Selected Ethnolinguistic Groups: The Isnag People of Laco, Kabugao, Apayao, Philippines (Technical Report)
5. Ethnomedical Documentation of the Southern Kankana-ey People of Buguias, Benguet (Technical Report)

2014

7. Documentation of Philippines Traditional Knowledge and Practice on Health and Development of Traditional Knowledge Digital Library on Health: The Gaddang, Isinai, and Bugkalot of Nueva Vizcaya

2016

8. Documentation of Philippine Traditional Knowledge and Practice on Health and Development of Traditional Knowledge Digital Library on Health: The Iwak and Kalanguya – Ikalahan of Nueva Vizcaya

2018

9. Documentation of Existing Practices on Medical Cannabis in the Cordillera
10. Association Between Consumption of Fermented Rice Wine (Tapuy) and Lees with Alzheimer Disease and Early Signs of Dementia
11. Determination of Natural Profile, Bioactivity, and Potential of Rice Wine and the Fermented Rice Leftover (Lees) from the Cordillera Administrative Region Using in vivo model.

PITAHC operates three Herbal Processing Plants (HPPs), located in Tuguegarao City, Tacloban City, and Davao City. These produce herbal soaps and herbal

supplements that are being sold online and in some communities.

Other activities of PITAHC include yearly events like Hilot Congress, TAHC Congress, Health and Wellness Fair, and Hospital Congress, and other gatherings like forums and lectures.

b. DOH, NCIP and DILG - Indigenous People's Strategic Plan for Health 2018 – 2022

To implement JMC 2013-01, the three agencies- DOH, NCIP and DILG – came up with the Indigenous People's Strategic Plan for Health for 2018 to 2022. They first came up with an initial short-term plan in 2015 to 2016 and then they revised it and updated it to a medium-term plan for 2018 to 2022. There is no new plan posted online.

The overall goals are 1) to establish information system of ICCs / IPs to support culturally sensitive health policy development and service delivery, 2) for the IP health agenda to be integrated and mainstreamed into all levels of health governance, and 3) for access to quality, safe, and culturally sensitive package of essential health services.

Highlights of the plan:

On Health Governance and Management

- Organize inter-agency committees at the national (NIAC), regional (RIAC), and provincial (PIAC) levels and eventually cascaded down to the municipal level.
- Institutionalize the JMC via a local resolution.
- Incentivize LGUs implementing IP Health programs. Development of an IP – friendly Local Health System Award system.
- Integrate and mainstream IP health agenda into health governance.

On the Information System

- Develop a database that includes IP demography, health services, and practices.
- Develop a digital database and system registry on IP health in every barangay inhabited by IPs.

On Health Facilities

1. Promote and develop culture – sensitive facilities.

On Health Services

1. Review service delivery guidelines and standards and develop recommendations that will incorporate the principle of culture sensitivity.
2. Document effective, safe, and beneficial IKSPs on health for the IP health database.

On Funding

1. For ICCs / IPs to develop Ancestral Domain Investment Plan for Health (ADIPH) to be integrated into the Local Investment Plan for Health (LIPH) of the LGUs.

In the Cordillera, the NCIP–CAR temporarily suspended the implementation of ADIPH. According to Mike Umaming, the Chief of the Technical Management Services Division, they suspended its implementation due to the duplication of work and resources with the Local Investment plant on Health (LIPH) of the municipal local government units.

c. Department of Health- Center for Health Development- Cordillera Administrative Region

To implement the JMC 2013–01, the DOH-Center of Health Development- Cordillera Administrative Region (CHD-CAR) conducted the following trainings:

1 Culture Sensitivity and Orientation on the Guidelines on the Delivery of Basic Health Services for ICCs/IPs for Primary Health Care Workers.

This is a three-day training-workshop done in all provinces and city in the Cordillera from 2016 to 2018 with Dr. Ryan Guinaran as the facilitator. Participants were the Municipal IP Mandatory Representatives, Provincial Health Office staff, and Municipal Health Officers.

2. Trainer's Training on Cultural Sensitivity and Orientation on the Guidelines on the Delivery of Basic Health Services for the ICCs/IPs (JMC 2013-01)

Conducted on August 15-16, 2023, and facilitated by Dr. Guinaran, this was attended by health workers representing all the provinces of CAR. Discussed here were the provisions of JMC 2013-01, IP health at the national and regional level, and culture sensitivity. Workshops were conducted and indigenous health practices were shared by the participants. At the end, they came up with culturally appropriate strategies and culture–sensitive action plan, including a roll out training on Culture Sensitive Health Services on the first quarter of 2024.

d. Philippine Council for Health Research and Development (DOST – PCHRD)

Created on March 17, 1982 through EO No. 784, the PCHRD is the research center for health of the Department of Science and Technology (DOST). It is mandated to formulate policies, plans, programs, and strategies for health science and technology and to program and allocate funds for health

research and development, and lead and be the focal point in health research and development in the country.

PCHRD has a program called Tuklas Lunas where it partnered with different institutions in the regions to set up Tuklas Lunas Centers and study the region's biodiversity potential for drug research. To date, it has supported and partnered with 29 institutions nationwide including Benguet State University (BSU), Saint Louis University (SLU) and University of the Philippines (UP) Baguio for implementation of projects on drug discovery and development.

PCHRD has funded some researches related to indigenous health and wellness in partnership with various entities in the Cordillera.

e. Cordillera Regional Health Research and Development Consortium (CRHRDC)

Established by the Philippine Council on Health Research and Development (PCHRD – DOST), CRHRDC is a consortium of different groups involved in different kinds of health research and development in the Cordillera. There are other consortiums in other regions in the country where there is a University of the Philippines campus. The consortium is tasked with providing research funding, training, ethics review, research utilization, and other health research capability building activities. Currently, it has 22 members namely DOST - CAR, DOH – CAR, CHED – CAR, NEDA – CAR, Saint Louis University, BGH-MC, UP - Baguio, UC, BSU, UB, CCDC, IFSU, KSU, Pines City Colleges, MPSPC, International School of Asia and the Pacific – Tabuk, Luke Foundation Inc., Benguet Provincial Health Office, Baguio City HSO, Saint Tonis College - Tabuk, Easter College, and Luis Hora Memorial Regional Hospital. It is open for membership to interested organizations involved in health research in the Cordillera. There is a 10,000 peso annual membership fee and only members can access research funds as long as it passes the review.

Every regional research consortium has their own Regional Unified Health Research Agenda which defines the research priorities of a region, taking into consideration the region's peculiarities and local context.

According to EC Palaganas, the Regional Coordinator of CRHRDC, one challenge they face is that many proposals are still detached from the issues that indigenous communities are facing and that many proposals are submitted only for the sake of having a project. Palaganas mentioned that it is important in researches on indigenous peoples to draw on the context of the health situation of a community and consider underlying issues like ancestral domain, environment, and resources.

Another challenge she mentioned along with Demetrio Anduyan, the regional director of CHED–CAR, is how to maximize the research outputs; how to translate the outputs into policies, programs, and information that the people can understand; and how these outputs can reach the people and improve their lives like how the medicinal plant products and knowledge can go back to the community for their use.

f. Philippine Traditional Knowledge Digital Library on Health (TKDL)

TKDL is an electronic database of documentation of our traditional knowledge in health that include ethnopharmacological data, traditional healing practices, plant compendium, library of traditional healers, and traditional healing terminologies. It is a collaboration of the Philippine Council for Health Research and Development (PCHRD), Philippine Institute of Traditional and Alternative Health Care (PITAHC), and the University of the Philippines Manila (UPM).

A search of indigenous local researches in the digital library revealed 33 researches in the whole country covering the years 1988 to 2014. Nine (9) of these researches were conducted in the Cordillera Administrative Region, itemized as follows: 2 in

Ifugao, 2 in Apayao, 2 in Kalinga, 1 in Mountain Province, 1 in Benguet, and 1 in Abra between 2000 and 2012.

List of 9 researches in the Cordillera:

1 Ethnomedical Knowledge of plants and healthcare practices among the Kalanguya tribe in Tinoc, Ifugao, Luzon, Philippines.

- It is written by Balangcod TD and Balangoc AKD. 150 informants ranging from 16 to 90 yo and features 125 plants.

2. Phase II Documentation of Philippine Traditional Knowledge and Practices on Health and Development of Traditional Knowledge Library on Health for Selected Ethnolinguistic Groups: the Isnag tribe of Katablangan, Conner, Apayao, CAR.

- It is written by Palaganas EC, Sinumlag AB, Suyam RR, Galang RM, and Sia IC. It covered the life in the community of Katablangan including their traditional health beliefs and practices. 6 healer informants who shared 8 medicinal plants and 1 concoction of selected herbs immersed in coconut oil.

3. Phase II Documentation of Philippine Traditional Knowledge and Practices on Health and Development of Traditional Knowledge Library on Health for Selected Ethnolinguistic Groups: the Uma tribe of Western Uma, Lubuagan, Kalinga, CAR.

- It is written by Palaganas EC, Sinumlag AB, Suyam RR, Galang RM, and Sia IC. It covered the life in the community of Western Uma including their traditional health beliefs and practices. 3 healer informants who shared 4 medicinal plants.

4. Phase II Documentation of Philippine Traditional Knowledge and Practices on Health and Development of Traditional Knowledge Library on Health for Selected Ethnolinguistic Groups: the Maeng – Tingguian of Amtuagan, Tubo, Abra, CAR.

- It is written by Palaganas EC, Sinumlag AB, Suyam RR, Galang RM, and Sia IC. It covered the life in the community of the Amtuagan, Tubo, Abra including their traditional health beliefs and practices. It featured the Community Health Workers who shared 10 medicinal plants.

5. Ethnomedical documentation of and community health education of selected Philippine ethnolinguistic groups: the Sumadel – Kalinga tribe of Tinglayan, Kalinga, Philippines.
    - It is written by the Sumadel – Kalinga people of Tinglayan, Kalinga. It featured the life including the traditional health beliefs and practices in the 2 barangays out of the 7 barangays of the Sumadel people. It included 24 medicinal plants and 6 natural products.

6. Ethnomedical documentation of selected Philippine ethnolinguistic groups: the Busaos – Kankanaey people of Barangay Catengan, Besao, Mountain Province.
    - It is written by the Busao–Kankanaey people of Barangay Catengan, Besao, Mountain Province. It gathered 63 informants that included 7 healers, the municipal mayor, Municipal Health Officials of Besao and Bontoc, BHWs, Barangay officials, and community members with age ranging from children to seniors. They shared 17 medicinal plants and other traditional health beliefs and practices.

7. Ethnomedical documentation of selected Philippine ethnolinguistic groups: the Kankanaey people of Buguias Central, Buguias, Benguet.
    - It is written by the Kankanaey people of Buguias Central, Buguias, Benguet. It documented 34 medicinal plants used for 17 indications. 27 informants including 3 healers shared their knowledge.

8. Ethnomedical documentation of and community health education for selected Philippine ethnolinguistic groups: the Isnag people of Laco, Kabugao, Apayao.
    - It is written by the Isnag people of Laco, Kabugao, Apayao. 46 informants that include healers, family health care givers who shared 138 medicinal plants and 30 natural products.

9. Ethnomedical documentation of and community health education for selected Philippine ethnolinguistic groups: the Ifugao people of Poitan, Banaue, Ifugao.
    - It is written by the Ifugao people of Poitan, Banaue, Ifugao. Caregivers, or mothers and fathers who attend to the primary health care needs of the family, shared many traditional health beliefs and practices by the people and by the healers. They also shared 112 medicinal plants and 27 non–herbal medicinal products.

The digital library has a section called 'Local Ailments,' where different kinds of ailments from the different parts of the country are listed together with their description and province where they are documented. Information is also available on the medicines used, procedures, dosages, and indications. There are 180 listed ailments and 32 of these are from two indigenous cultural communities in the Cordillera Administrative Region, namely Uma of Kalinga and Maeng–Tingguian.

In the 'Materia Medica' section, there is a list of medicinal plants and other natural products documented from all over the country. Examples of natural products or simply products include rice wine and apog or lime powder. More than 380 medicinal plants and natural products in this list come from the Cordillera, specifically from Kalinga, Ifugao, Benguet, and Mountain Province. There are no entries from Abra and Apayao. Each entry includes the name of plant or product,

indication, plant part used, and province/area where it is found.

All the papers cited the importance of doing additional research like more research on the healing content of medicinal plants, on more plants and more places, on other indigenous non-herbal healing practices like hilot and ritual healing. They also called for the preservation of all these indigenous health and healing practices.

g. National Commission on Indigenous Peoples (NCIP)

The NCIP is an implementer of JMC 2013 or the Indigenous Peoples Health Policy, together with DOH and DILG. However, there is no ongoing monitoring on their part as to its implementation.

According to Mike Umaming, the Chief of the Technical Management Services Division (TMSD) of NCIP-CAR, they have no specific program on IHW right now, but they used to have an Ancestral Domain Investment Plan for Health (ADIPH). ADIPH is a comprehensive plan for health by the ICCs/IPs which recognizes their traditional health beliefs and practices. As mentioned earlier, NCIP-CAR suspended the ADIPH temporarily due to duplication of work and resources with the Local Investment Plan for Health (LIPH) of the Municipal Local Government Unit. Only NCIP–CAR suspended its ADIPH while other regions are implementing it.

Sometimes, the NCIP conducts community–based research on medicinal plants when resources permit. The research is their contribution to the JMC 2013. They published a book in 2021 entitled Medicinal Plants in Sacred Mount Pulag which was researched and written by Dr. Ryan Guinaran of DITENG (Doctors for Indigenous Health, Training, Education, Networking, and Governance). It features 55 medicinal plants used by the Kalanguya and Ibaloy in the area.

Sometimes they conduct medical missions in communities

wherein they encourage use of local medicinal plants.

h. Baguio City Health Services Office (BCHSO)

According to Teodora B. Catolos, HEPO III (Health Education and Promotions Officer), the Baguio City Health Services Office (BCHSO) has no specific program on Indigenous Health and Wellness. The task of promoting medicinal plants or home gardening is with the City Veterinary and Agricultural Office (CVAO). They said that they are bound by law to promote only the 10 medicinal plants approved by the Department of Health. They acknowledged that PITAHC is the authority with regards to traditional and alternative health care but there is no current coordination between them especially involving medicinal plants.

According to Catolos, the Universal Health Care Law requires inclusive and culture-sensitive health care programs and services which requires them to have a partner from all sectors of the city. In compliance to this, the BCHSO created a multi-sectoral and inter-agency committee in 2023 called the Health Promotions Committee (HPC). This committee aims to come up with better health policies for the people of Baguio for recommendation to the Health Promotions Board (HPB) of the City Government for possible legislation and implementation. It is still in the organization phase.

Currently, PIKP is the official representative of the IP sector to the HPC.

2. ACADEME

Two academic institutions and one academic association were scoped in this section and their major contribution to IHW is in the form of educational materials for their students.

a. Cordillera Administrative Region Association of State Universities and Colleges (CARASUC)

Cordillera Administrative Region Association of State Universities and Colleges (CARASUC) is the association of state universities and colleges in CAR namely BSU, KSU, IFSU, ASIST, MPSPC, and ASC. They have a consortium on research named SUCCARRDEC or State Universities and Colleges of Cordillera Administrative Region, Research, Development, and Extension Consortium. Through SUCCARRDEC, they had a research on indigenous forest management entitled 'Voices from the Cordilleras, Guardians of the Forest, Stewards of the Land, Environmental Conservation Practices of the Cordilleras.' Published in 2015 in partnership with the Office of Senator Loren B. Legarda, it featured six ICCs/IPs representing the six provinces of CAR and their IKSPs on forest management that included relationships of the forest with the health and wellness of the people.

b. Benguet State University (BSU)

Benguet State University is part of the Philippine Council on Health Research and Development (DOST-PCHRD) program called Tuklas Lunas discussed earlier. Under this Tuklas Lunas program, they are currently working on a research project called 'Discovery and Development of Health Products (DDHP): Disease-specific Bioactive Hits from Terrestrial Organisms: Project 8. Anti-diabetic hits from Priority Bioactive Extracts from Plants Indigenous to Benguet.'

According to Dr. R. Batani, the former director of the Institute on Social Research and Development (BSU-ISRD), during the pandemic, health research in BSU has increased significantly due to growing health consciousness.

BSU researches related to Indigenous Health and Wellness that can be found in their online platform **Mountain Journal of Science and Interdisciplinary Research** include the following:

1. Nutritional Value of Selected Indigenous Vegetables of Cordillera. (2007) By Lorenza G. Lirio, Luisa P. Pladio,

Joyce N. Paing. It featured different nutrients gathered from 49 vegetables.

2. **Documentation of the Indigenous Edible Mushroom Varieties in Sabangan, Mountain Province** (2020) by Emely W. Tingcawa and Cunegunda D. Nine. Edible mushrooms that are being consumed by the community are identified here.

3. **Collection, Identification, and Characterization of Indigenous Fruits in Benguet and Mountain Province** (2014) by Araceli G. Ladilad, Franklin G. Bawang, Fernando R. Gonzales, Silvestre L. Kudan, and Alma C. Antonio-Amado. Seventeen fruits, mostly tree fruits growing in the wild, are identified and shown to be good sources of vitamins.

4. **Species Profile and Associated Indigenous Knowledge of Trees and Shrubs Used as Tea in Benguet.** (2015) by John G. Tacloy from the College of Forestry. It featured 18 trees and shrubs found in Atok and Tuba in Benguet used as tea.

5. **Cultivation and Conservation of Traditional Food Crops and Perceptions of Farmers on Biodiversity Loss in the Cordillera Administrative Region** (2015) by Belinda A. Tad-awan and Esther Josephine D. Sagalla. It showed that traditional food crops in the Cordillera are still widely used and utilized and believed by farmers to contain many vitamins and minerals. It also showed that there are many varieties of each of the traditional crops.

6. **Loss of Traditional Root crops Knowledge (TRK) Among Some Indigenous People in Northern Philippines** (2016) by Betty T. Gayao, Delen T. Meldoz, and Grace S. Backian. It showed that many of the younger generations, those born after the 80s, of the Ibaloy, Bago, Tingguian, and

Iyattuka indigenous peoples have lost conceptual and practical knowledge on the cultivation of root crops and tubers. However, increase in knowledge on the nutrition and health value of eating organic root crops and tubers was shown by the middle-aged Ibaloys.

7. Traditional Food Crops and their Role in the Nutrition Well-being of a Semi-subsistent Community in Kibungan, Benguet, Philippines (2019), by Sherilyn B. Balauro from the College of Home Economics and Technology (CHET), and Matyline Camfili-Talastas from the Institute of Social Research and Development (ISRD). These traditional food crops add flavor to diet, improve palatability, and help balance nutrient and mineral intakes. They also supply micronutrients like pro-vitamin A, vitamin C, iron, and calcium, helping prevent acute and chronic diseases.

Ruth Batani, the former director of Institute of Social Research and Development (BSU-ISRD), shared the results of two researches she did while under the ISRD, as follows:

1. 'Agas ay Nabe-as ken Pholus: Medicinal Plants of Palina, Kibungan, Benguet and Kadaclan, Barlig, Mountain Province (2022). Funded by PCHRD, this book lists hundreds of medicinal plants still in use and local herbalists in two areas in the Cordillera: in Palina, Kibungan, Benguet, and in Kadaclan, Barlig, Mountain Province.

During this research, Dr. Batani and her team observed that knowledge and practices of indigenous medicinal plants is common in the community, especially with women, not only with the healers. Why women are more knowledgeable about these is linked to their natural role as caregiver in the family. It is usually the mother who cares for the sick in the family and in areas where there are no health staff, she will look for natural remedies to cure the sickness.

Further, the researchers also discovered that some medicinal plants are also being used by wild pigs as observed by a young hunter in his hunting trips in the forest. This information was shared by the hunter

during one of their field visits, but they did not include it in the book.

2. **'Knowledge and Practices of Sagpat Women on Indigenous Healing and Reproductive Health.'** Funded by PCHRD, this research showed that traditional birthing is still being practiced in Sagpat, Palina, Kibungan, Benguet, with various birthing positions depending on what is comfortable to the mother to make her labor easier. However, Dr. Batani said in an interview that some health workers discourage home births in response to a policy of the Department of Health that promotes facility-based delivery,

3. **University of the Philippines- Baguio**

The Cordillera Studies Center (CSC-UPB) is the research arm of the University of the Philippines–Baguio. It started out as a College Research Center in 1998, first focusing in agro-ecosystem framework; population, resources, and environment; and issues in governance and policy, and then later expanded to women and gender; local economic, political and social institutions; indigenous knowledge and world views; local history, **health**; and Cordillera autonomy. Now it has become a University Research Center with the goal of making UP Baguio the lead institution for research in Northern Luzon guided by the following key considerations: "A multi-disciplinary approach to research: close linkage with local communities to enable the center to respond to social issues confronting the region; a vision of social science practice relevant to the process of social transformation."

The CSC has a **Journal on Philippine Culture and Society** entitled '**The Cordillera Review'** which contains researches related to IHW, as follows:

In the Cordillera Review Volume VI Number 2: September 2016

> 1 'The Mambunong and the School Knowledge Systems: Parallel and Interconnected' by Maria Mercedes E. Arzadon showed that the body of knowledge of schooling and the mambunong systems both contain information about the environment and the world, except that the mambunong system

provides explanations beyond the material world. In the section 'The Mambunong Knowledge System,' there are descriptions of the functions of the Mambunong which include reciting prayers directed to deities, souls of the dead, or malevolent spirits, to narrate a story such as the origin of a certain sickness and instructs people what to do. These prayers include asking for healing, for good harvest or fortune, and seek blessing for betrothals, weddings, divorces, deaths, and burials.

In the Cordillera Review, Volume VIII, Number 2, September 2018:

2. **'Understanding the Materiality of Death Rituals in Bontoc Society, Northern Philippines'** by Analyn Salvador–Amores which showed that death rituals done during wakes enable a safe and speedy journey of the spirit of the deceased to the afterlife. They also function to ward off evil and allow access to blessings that also benefit the living. These rituals then help the bereaved family to cope. And because the community gather in the house of the bereaved during wakes, these also reaffirm the solidarity of the community in times of crisis like death.

3. **'Rituals of Passage in Ibaloy Death Rituals and Practices'** by Rosella Camte–Bahni showed the Ibaloys of Loakan's traditional death rituals which featured rites of passage, divided into separation, transition, and to reintegration. The burial rites ensure that the spirit can peacefully leave behind its earthly existence and be accepted into the community of spirits in Mount Pulag. The surviving family members of the deceased also ensure to provide for the needs of the deceased so that he/she will have a smooth journey to the spirit world, otherwise, the spirit will bring sickness to the living relatives.

4. '**The Cultural Logic of the Kail (Second Burial) Practice'** by Learane K. Ampaguey showed the Ibaloy's death-related practice of kail – the process of unearthing, cleaning, and reburying the remains of the dead. It featured why kail is performed, how it is performed, when it is performed, and who are the people responsible for its performance. She featured her

personal experiences within her immediate and extended Ibaloy family attending different performances of kail for many years. Part of the ritual appeals to the deities and other supernatural beings to cure illness or sometimes seek benefit like good health, wealth, and good fortune.

Another book, **'Saliksik– Kordilyera, papers on indigenous practice, ritual life and oral tradition,'** a compilation of lectures hosted by the university in 2011 included an article about the traditional healing in a certain part of Kalinga:

5. '**The Kalinga mandadawak: Her Notions of Illness and Treatment**' is a lecture by Esteban Magannon. Here he presented some of his engagements with the mandadawak and some dawak rituals that he witnessed during his fieldworks in Ga'ang, Kalinga. The mandadawak is an indigenous healer.

Another book, '**CHIVA, A reader in Ibaloy History and Culture**,' published by CSC in 2017, included a research on Ibaloy values in healing and death:

6. '**Ibaloy Beliefs and Values in Healing and Death Practices**' by Rosella Camte–Bahni featured the indigenous practices and values of the Ibaloys of Loakan in Baguio regarding healing and death. It showed the Ibaloys there give high regard to the harmonious relationship of the living and the ancestor spirits including ensuring these spirits' wellness in the spiritual world by performing certain rituals. A day after the burial, the family holds a final prayer aimed to prevent stomachache and ensure the good health to all who ate during the wake. Ibaloys believe that ancestor spirits have some needs similar to the living and sometimes the spirits convey their needs through dreams, or through spirit mediums, or by causing discomfort or sickness to their living relatives. To appease the spirits and to remedy the sickness brought unto the living, they perform certain rituals or actions depending on the cause.

Research partnerships

UP Baguio has partnered with the Philippine Council for Health Research and Development (DOST–PCHRD) through PCHRD's 'Tuklas Lunas' program, a DOST funded Research and Development that has agenda on drug discovery and development which include indigenous medicinal plants in the Cordillera. They are currently working on 3 researches namely:

7. Tuklas Lunas Consortium in the Cordillera: Documentation, Standardization, and Formulation of Dosage Forms from Indigenous Plant and Microorganisms with Bioactives: Project 1. Potential activity of indigenous and endemic plant extracts from the Cordillera region against ESKAPS bacteria.
8. Discovery and Development of Health Products (DDHP): Disease – specific Bioactive Hits from Terrestrial Organisms: Project 7. Anti – infective hits from Priority Bioactive Extracts from Fungi.
9. Discovery and Development of Health Products (DDHP): Disease – specific Bioactive Hits from Terrestrial Organisms: Project 6. Anti – infective hits from Priority Bioactive Extracts from Indigenous and Endemic Plants or the Cordillera Against Staphylococcus aureus and Pseudomanas aeruginasa.

3. CIVIL SOCIETIES ORGANIZATIONS AND NON-GOVERNMENT ORGANIZATIONS (CSOS AND NGOS)

a. Community Health, Education, Systems, and Training in the Cordillera Region (CHESTCORE)

It is a non-government organization that aspires and works towards a health care system that is community–based and not urban centered, and service-oriented not profit oriented, one that is accessible, preventive in emphasis, and relevant to the needs of the people.

According to Anita Cawayan, program coordinator of CHESTCORE, health and wellness is not only physical, but

also includes the mental, emotional, and social aspects and is determined by socio-economic, cultural, and political dynamics.

One of their major programs is working with the communities to develop a community-based health care program, integrating traditional community health practices with conventional health care, and other alternative and complimentary health care practices like acupuncture. Cawayan mentioned that herbal medicines and ritual healing are resorted to as solutions to health problems in far-flung areas where there are no modern health facilities.

CHESTCORE has the following publications:

1. Book entitled **'Common Medicinal Plants of the Cordillera Region (North Luzon, Philippines)'** in 1989 by the renowned botanist and taxonomist Leonard Co covering 120 medicinal plants. It is designed as a Trainer's Manual for Community–Based Health Program. The reprinting in 2011 was supported by the Philippine Council for Health Research and Development (PCHRD).
2. A booklet on medicinal plants entitled **"Saguday ti Aglawlaw, Nasustansya a Mula ken Ruut'** (Blessings of the Environment, Healthy Plants and Grass) in 2022 supported by the Center for Development Programs in the Cordillera Region (CDPC). It serves as an instructional book on how to prepare and process 15 medicinal plants that many consider as grass. The reprint in 2023 was supported by PIKP.

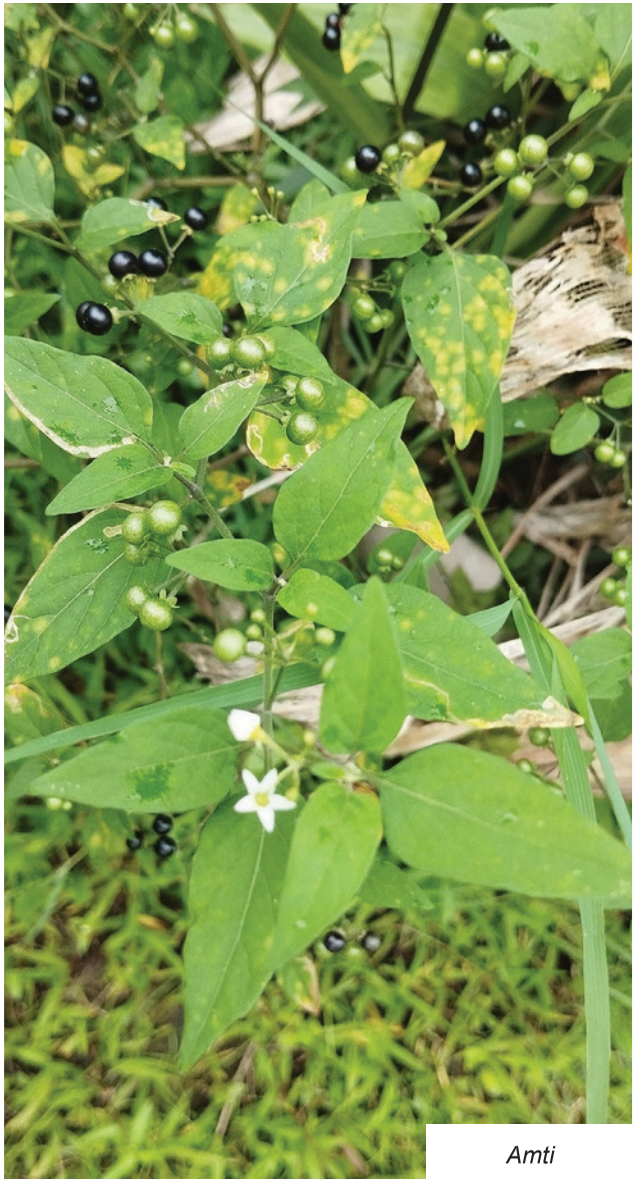
CHESTCORE partners with DOH for specific projects like exploring the use of the quinine tree for malaria. CHESTCORE is also currently looking into plants for mental health problems.

b. Doctors for Indigenous Training, Education, Networking, and Governance (DITENG)

DITENG is a non-stock, non-profit organization of medical doctors which aims to value cultural diversity, advocate for quality care, and conduct research and studies. One of its major advocacies is to have a culture-sensitive health care system wherein indigenous health practices are integrated into the mainstream health system. It collaborates with DOH and other agencies to do research on and advocate for IHW. The organization is headed by Executive Director Dr. Ryan Guinaran.



Alugbati



Amti



Avocado Leaves



Bain-bain



Banaba Leaves



Banana Tree



Bayabas Leaves



Bengao Plant



Citronella Leaves



Corn Hair



Galyang



Ginger Leaves



Gumamela



Guyabano Leaves



Kaimito Leaves



Kataka-taka



Kunig Leaves



Kutsay



Lagundi



Lantana



Lawud



Lemongrass



Nunu (Runu)



Oregano Leaves



Pakpaku



Paragis Grass



Papaya Fruit



Parya Leaves



Pias Leaves



Peppermint



Sappan Wood



Tawa-tawa

CHAPTER 1

NATURE'S MEDICINES IN ABRA

Story by Crisanta Batoon
Documented by Sixto Talastas

"Crisanta Batoon, 40, an Itneg mang-ngilot (traditional healing massage practitioner) based in Kias, Baguio, shares some of her knowledge on natural medicine, which she learned from her late father, Renato Batoon.

Our father, Renato Batoon, was a well-known indigenous healer in Tubtuba, Abra and nearby areas. He used medicinal plants, rituals and prayers, and *ilot* (indigenous massage therapy) in treating his patients. Aside from these, he also used food such as honey for medicine. The season to harvest honey is during the sunny days of March to May. Men in our community gather it in the forest, and usually, we have sufficient honey to supply us for the whole year.

As taught by our father, we not only use honey as sweetener but also drink it for treatment and prevention of colds and cough. To make it more effective, we mix it with oregano juice or *parya* (ampalaya or bitter gourd) leaves juice whenever these plants are available. If oregano or *parya* is not available, honey will suffice.

Honey, oregano and parya leaves cough syrup

Ingredients
Honey ..... 1 tablespoon
Oregano leaves ..... a handful
And/or Parya leaves ..... a handful

Procedure

1. Prepare and wash oregano leaves and/or parya leaves. (It is more effective if these leaves are organic and freshly gathered from the garden so they will still have juice.)
2. Mash or pound the leaves and squeeze out the juice.
3. Add 1 tablespoon of honey and mix well.
4. You can add more honey depending on your taste to lessen the bitter taste of the parya leaves.
5. It is now ready to drink.

Indications

For the prevention and cure of colds and coughs.

Dosage

For mild symptoms: 1 tablespoon a day in the morning
For severe symptoms: 2 tablespoons a day, in the morning and evening
It can be taken before or after a meal.

Kamoras, sinkamas ken suka

(Turnip and vinegar for measles)

When we were very young kids in Tubtuba, Abra, we had *kamoras* or measles. I cannot recall the exact date or our ages at that time, but I remember this well. Three of us, out of five siblings contracted the disease. During that time, our father was away in Kalinga. When he came home, we were in serious condition with high fever. He quickly got some *sinkamas* (turnip), pounded them finely and mixed it well with *suka* (vinegar). He then rubbed the mixture on our whole bodies. We soon recovered, but unfortunately, the second child, who was really in grave condition, didn't make it and died. I cannot recall the ratio of the *sinkamas* and *suka*, but I believe this healed us.***

CHAPTER 2

MEDICINAL PLANTS IN LOAKAN

Story of Vicky Macay
Documented by Sixto Talstas

Vicky Macay, 69 and a mother of four, is an Ibaloy elder from Loakan, Baguio City. She is a member of the IPED Council of Elders of the DepED – Baguio and DepED – CAR. She is also a cultural worker, researcher, writer and lecturer of Ibaloy culture. She has been an active community volunteer in Loakan for the past 35 years.

My family are original residents of Loakan, Baguio City. In the past when there were still few families in Loakan, there were many medicinal plants naturally growing in our surroundings. I learned and experienced the use of medicinal plants since childhood. We often had cough when we were children, so my mother would get some plants in our yard and make tea for us. When mother felt body pains, she would drink *kanepa* or gotu kola. Sometimes you would think she was just weeding the riprap, but actually, she was gathering *kanepa* for her drink. She learned that it was medicinal.

There was once a plant here that the Ilocanos call herbaka and when we had cough, mother would pound it and mix it with coconut oil to rub on our necks and backs. Or she would place it in banana leaves, warm it over a fire, and patch it on our backs, wrapping our chest with manta cloth. These were effective in treating our cough. We also crushed sunflower leaves and “hedges” with stones to use as a poultice for wounds to stop bleeding.

My mother used medicinal plants on us, her children, and on herself, so I also used them on my children. I also learned from my relatives, neighbors, and the community. Our community shares knowledge on medicinal plants. When people in the community knew we were sick, they would bring medicinal plants for us to use. When they didn't have the needed plant, they will look for plants in the surroundings.

"There is a plant here that can be made into tea." Or "You patch your painful body with this plant." Even if we live far from each other, they will come to visit.

Each time after I give birth, I would use plants in our yard to help me recover. I used guava leaves for washing and bathing. I also boiled *bain-bain* or *makahiya* plant for washing my wound, and it healed faster. I did not use any other medicine.

I suffered a stroke two times. First was in October 6, 2011, while conducting an ocular inspection in Happy Hollow together with people from DENR, NCIP, and City Hall. They took me to the Pines Hospital, and the doctor said my stroke was due to stress. When I was discharged from the hospital, I was given maintenance medication. I tried very hard to use my maintenance but after seven months, I decided to stop it.

"Doc, I don't like the medication anymore because I am getting thinner!" I told the doctor. "It seems the drug doesn't want me to eat rice or any other food! All food is tasteless!"

I got well even if I stopped my medication. The "ilot" (indigenous healing massage) by my granddaughter also helped in my healing. The good effect of this experience is that now I can eat food even if it is bland, without or with minimal salt.

In November 10 and 11, 2012, we again conducted an ocular inspect with people from the DENR, NCIP, and City Hall. After the activity, I went

home, rested to cool my body before taking a bath. After the bath, I lost consciousness and fell on the couch. When my son, Moren, carried me, my feet were like sweeping the floor. When they took me to the hospital, the doctor said I had a stroke. I could not talk, and I couldn't think clearly. I was just staring at the visitors. The doctor said I should talk to the visitors and that I should keep on talking to exercise my tongue and jaw. But I couldn't talk, so what should I do? So I tried to talk to him and stuttered to let me be brought home. He allowed this but said that I should go back every day for a checkup. I was again given maintenance medication which I took for 3 months only. My taste had become bitter, so I went back to my doctor in Pines Hospital.

I said, "Naku Doc, I really don't want to drink the medication anymore."

My doctor was understanding.

He said "Even if I give you many medicines, if you do not help yourself, I cannot do anything. So okay, just make sure you eat lots of vegetables, do not put salt. Make it like your rice."

So that's what I did for one year, coupled with drinking herbal tea from my home garden. When I worked at the *Avong* in the Ibaloy Heritage Garden, I made tea out of some plants there. It's already 16 years since I stopped the medication, and I am well. So now I realized that maintenance medication can be stopped.

"You should still take medication." some friends advised me.

I said, "Why are you telling me to go back to maintenance medicines? I have many maintenance medicines around here – these plants!" I never went back to the doctor.

In 1976 I had a kidney disease. It's because when we go to the farm, we buy the *piskaw* or *tuyo* or dried salted fish in bulk. And when we eat them, we eat a lot. They are very salty, so my kidney was affected. I had a hard time urinating. My hips hurt a lot, and I even urinated blood until I could not urinate anymore. I was hospitalized for a long time. After my discharge, I was given maintenance medication to prevent the kidney

disease from recurring. The medication caused me to lose weight, and I was getting thinner by the day. I stopped taking the medication and instead tried drinking lanting tea (plantago tea) and banaba tea which were recommended by some relatives. These teas proved to be very effective because I was totally cured of my kidney disease, and it hasn't recurred since. I now regularly drink these teas to keep me healthy. I also drink lanting tea whenever I am not feeling well. Now at 69, I am still strong, healthy, and always on the go.

There are other medicinal plants that I also use. The leaves of santol, kaimito (star apple), and avocado, can be made into tea for stomach aches. Recently, I discovered that the chico fruit is also good for stomach pain and diarrhea. The totot or dagta (sap) that comes out when you prick a papaya is an effective remedy for dog bites. I applied this when my daughter was bitten on the shoulder by a dog. It was a big bite. I washed the wound then applied the papaya sap. The next day I washed the wound again and applied the papaya sap. I did this daily until the wound healed.

Here's how to prepare lanting and banaba tea. The indications are based on my personal experience and those of neighbors:

Lanting tea

Ingredients

1. Lanting leaves ..... a handful
2. Water ..... 1 liter

Procedure

1. Wash leaves, preferably fresh
2. Boil them in water for about 5 to 10 minutes.

Dosage

- Drink as much as you like.

Indication

- Diarrhea with stomach pain
- Kidney problem
- General wellness

Banaba tea

Ingredients

1. Banaba leaves .... a handful
2. Water ..... 1 liter

Procedure

1. Wash the leaves, preferably fresh
2. Boil them in water for about 5 to 10 minutes.

Dosage

- Drink as much as you like

Indications

- Diabetes
- High blood pressure
- Dissolves kidney stones
- Urinary tract infections
- Lowers risk of heart disease

CHAPTER 3

THE JUNGLE GARDEN IN THE CITY

Source of healthy foods and medicinal plants

Story of Corazon Loste
Documented by Sixto Talastas

Corazon Loste, 63, a native of Besao, Mountain Province, and a resident of Springhills, Loakan – Apugan, Baguio City, is a home gardener with many different plants in her 600-square-meter lot property. She calls it the "jungle garden" because, as she says, planting at first was not organized. When they ate fruits, they just threw the seeds around the lot randomly, letting them grow on their own, forming a jungle-like surrounding. This "jungle garden" hosts many kinds of fruit trees, vegetables, ornamental plants, and medicinal plants. She started planting trees, vegetables, and ornamental plants in the late 1990s, and began planting medicinal plants in 2017. At present, many of the trees have fully grown, so she makes small plots and sets aside spaces for vegetables and intercropped medicinal herbs for pest control.

In 2017, I was diagnosed with HER2-positive breast cancer, a rare and deadlier kind of breast cancer. (Editor's note: This type of breast cancer tests positive for a protein called human epidermal growth factor receptor 2, or HER2) I started to suffer from depression, causing me sleepless nights, always thinking of the dreaded disease and the huge expenses I would incur. It is for this reason that I started growing medicinal plants. By taking different medicinal teas from my garden I was able to regain my lost sleep.

After a while, my right breast was removed at Notre Dame Hospital, and I underwent chemotherapy at SLU Hospital, which lasted until 2018.

During my chemo sessions, I was dismayed because I was expecting to be given medicine to make me stronger. Instead, I was just given some multivitamins. I felt it was not enough to counter the side effects of the chemo drug, such as weakness, loss of sleep, and loss of appetite.

When you are weak on a scheduled chemo session, the doctor will reset it for a later date. However, due to my consumption of the organically grown fruits, vegetables, and medicinal plants from my garden, I was able to counter these side effects and complete the chemotherapy on schedule.

The effect of using herbal medicinal plants is not a 'one time – big time' event, so I used them regularly. When I had my follow-up test in February 2021, the chest x-ray showed good results; the left breast, the sides of my right breast, and my liver were good. My blood sugar and my cholesterol were normal. Continuous use of medicinal plants develops the immune system, cleanses the body, and truly heals. I do not believe that when I use medicinal plants now all my ailments will be gone next month. They must be used continuously.

"I used this plant and that plant but why am I still sick?", some people say.

They may not have taken the medicinal plant continuously. These must be religiously taken to be really effective. This year, 2024, I am declared cancer-free.

I also had multiple nodules on neck, which fortunately were not cancerous on biopsy but became bigger after my chemotherapy. I used *sappan* and spirulina tea and later the *pokpoket* (*Ed: burburtak or blackjack plant*). After 6 months, the biggest nodule decreased by half, the other smaller nodules decreased significantly that they were almost unseen. Then after 8 months, November 2022, the biggest nodule had become very small, and all the other nodules were totally gone. My ultrasound in August 2023 showed that the small nodules were totally gone, and the biggest nodule had become so small, so small that I cannot feel it. The doctor gave no medication for this; I only used herbal plants. When I told the doctor that the medicinal plants may have

helped reduce and remove the thyroid nodules, the doctor said the plants have nothing to do with their disappearance. However, I really believe that it was the medicinal plants that made the multiple thyroid nodules disappear.

The challenges I faced with the use of medicinal plants are that some have bland or bad taste and the preparation can be laborious. Gathering, washing, and boiling are labor-intensive. Further, you must be very patient, have a strong will, and see the value of the medicinal plants.

What I realized is that continuous use of medicinal plants coupled with discipline really helps. My advice to others going through the same struggle as me is to use medicinal plants and at the same time follow the doctor's instructions.

"Padasen yu ta baka hiyang yu a kas kenyak." (You try it because it may suit you just like me.)

I continue to cultivate medicinal plants mainly for my health and that of my family. There are more than 30 varieties of medicinal plants that I use in making tea or mix with food. I make teas from a mixture of many plants and use it as my water. I use one set of plants for about 3 days and then I change to another set of plants, which I select at random. I also continue to propagate medicinal plants, so I have something to sell to those who need them.

My knowledge of medicinal plants came first from my family, and then from experiences of neighbors and friends, and later, books and the internet. I always share my knowledge with anybody who is interested, and to everyone who comes to my house, also to my friends and neighbors. Now I share it with the group that we formed, the Loakan – Apugan Sustainable Livelihood Association (LASLA) and Loakan – Apugan Growers Association (LAGA). Some neighbors and other fellow urban gardeners come many times to ask for medicinal plants. I tell them "Aay, haan kau dawat nga dawat. Ikkak dakayu ti seeds, biyagen yu dayta." ("Do not always ask. I will give you seeds, grow them.")

I also have a seed bank. All of the seeds are logged in a book.

My advocacy is to encourage the members of the community to add medicinal plants in their vegetable gardens so that they can use them instead of buying medicine from the store or pharmacy. One can start with a few plants and a few pots.

Back then, we tried growing trees from the lowlands, but they won't really grow here. Now they can survive. I think it's the effect of climate change. I now have malunggay, pias, marang, tamarind, rambutan and grapes. The pias, rambutan and grapes have borne fruit already.

Here are some medicinal plants I used and continue to use:

Sappan wood drink: (sibukaw – Tagalog)

Ingredients

Sappan wood stick (ballpen size) ..... 1 pc
Water ..... 1 liter

Procedure:

1. Just soak sappan in hot or cold water. When the water turns pink, it is ready to drink. You may leave the *sappan* in the water. When the water is consumed, you put water again. One stick can be used 10 times.
2. If using tap water, boil water first, then add sappan.

Dosage

- Drink anytime as you like, just like drinking water.

Indications

- Antitumor/anticancer
- Anti-inflammatory
- Cleansing
- For hypertension

At one time, I could not stretch my fingers upon waking up in the morning. After drinking *sappan* for many days, I could stretch my fingers. At another time, a friend could not walk because of arthritis. After drinking sappan for some time, he can now walk.

Other uses from my readings are the following: antibacterial, antiviral, antifungal, antioxidant, anti-allergy, anti-inflammatory, antimicrobial; for diabetes, blood disorders, kidney problems, and as an immune booster.

Variations

Sometimes I mix it with several other herbs like oregano, peppermint, pandan, lemongrass, dill, and coffee in tea bag. Do not mix oregano and coffee together because it will produce a strong odor.

Other uses

Sometimes I add sappan water when cooking food.

Guyabano

Ingredients

Guyabano leaves ..... 5 pcs
Water ..... 1 liter

Procedure

1. Boil water, then add guyabano leaves and continue boiling for 10 minutes.

Dosage

- Drink 1 cup 3 times a day: 1 in the morning before a meal, 1 at noon before a meal, and 1 at 3 p.m. (This is my routine because I do not drink any tea beyond 3 p.m. Otherwise, I cannot sleep.)
- Do not drink straight for one week because for some friends who tried this, it lowered their blood pressure too much.

Indications

- Anticancer
- Diuretic
- For hypertension

CHAPTER 4

PAGGAMIT NG HALAMAN AT LANGIS SA PANGGA-GAMOT

Sinulat ni Beatriz Aliwana

“

Beatriz Aliwana, 56, tubong Sagada, Mountain Province at kasalukuyang barangay kagawad ng San Vicente, Baguio City, ay isang katutubong manggagamot. Ang kaalaman niya sa mga halamang gamot ay kusang naiisip niya kapag nangangailangan ang pamilya niya. Kapag nakita niya ang bisa ng mga gamot na ito ay ibinahagi niya ang kaalaman sa mga kaibigan niya.

Ang mga sumusunod ay mga halimbawa ng paggamit ng halamang gamot:

1. Patatas: (mas maganda kung bagong hukay)

Kumuha ng bagong ani na patatas. Huwag balatan o hugasan kasi baka mawala ang bisa nito. Punasan lang ng tela para matanggal ang lupa saka mo kaluskusin.

Kumuha ng murang dahon ng saging, ipainit sa apoy at doon ilagay ang nakalos na patatas. Itapal ito sa napasa o nangingitim na parte ng katawan.

Ginagamit din ito sa may pilay *(muscle strain or twisted nerve or twisted blood vessel*).

2. Murang dahon ng papaya

Kumuha ng ilang pirasong murang dahon ng papaya. Dahon lang, huwag isama ang stem. Tadtarin ng pinong-pino at dikdikin hanggang lumabas ang katas. Salain at ipainom sa pasyenteng may dengue. Mapait ito pero mabisa.

Ginamit ko muna ito sa aking mga anak bago ko na-ishare sa iba.

Minsan, sinabi ng panglima kong anak na sumasakit lagi ang ulo niya. Paglipas ng dalawang araw ay biglang may lumabas na dugo sa kanyang gums. Nabigla ako. Kumuha ako ng murang dahon ng papaya at dinikdik ko hanggang lumabas ang katas nito at ipinainom ko sa kanya. Pagkalipas ng kalahating oras ay wala na raw sakit ng ulo niya at tumigil din ang pagdugo ng gums niya.

3. Galyang (Palauan, giant swamp taro)

Isang araw ay napaso ng kumukulong tubig ang kamay ng aking apo. Namula at nagbukol-bukol na may lamang tubig ang napaso. May nakita akong galyang sa paligid. Hindi ko alam na nakakagamot iyon pero basta naisip ko lang na gamitin iyon. Dalidali akong lumabas sa bahay at kumuha ng root ng galyang. Hinati ko lang at itinapal sa napaso niyang kamay. Paglipas ng mga 6 hours ay gumaling na ito. Wala na iyong bukol bukol sa balat niya. Tuyo ang sugat. Pagkalipas ng ilang araw ay nangitim yung balat pero natuklap din.

Ngayon ay 16 taong gulang na siya at walang peklat sa kamay.

4. Katas ng patatas para sa sore eyes

Ingredients

1 pirasong patatas (mas maganda kung bagong ani)

Kagamitan

- Malinis na tela na pang-sala

Paraan

1. Hugasang maigi ang patatas.
2. Kuskusin ang patatas at ang nakuskos ay dikdikin ng maigi para lumabas ang katas.
3. Ibalot ang malinis na tela sa nadikdik na patatas.
4. Pigain ang katas nito at ipatak sa mga matang may sore eyes; dalawang patak bawat mata.
5. Isang beses lang gawin.

5. Mantika ng baboy

Isang araw, nagpakulo ako ng tubig sa kaserola para pangligo ko. Nang kumulo ay binuhat ko papuntang banyo, at nang ibubuhos ko na sa batya ay di sinasadyang nabanlian ko ang isa kong paa. Agad itong namula, dali-dali akong nagtungo sa kusina para kumuha ng mantika ng baboy na iniipon namin, ipinunas ko ito sa aking paang nabanlian. Maya-maya ay nawawala na ang pamumula at hindi na rin nagtubig. Hindi ko alam kung bakit, basta naisip ko na lang ang naipong mantika ng baboy na siyang panggamot ko.

Isa pang kahalintulad na pangyayari ay noong tinawag ko ang aking tiyuhin para mag-welding sa aming rooftop. Napaso ang kamay niya na agad namula, kaya ipinayo ko ang mantika ng baboy. Ikinuwento ko ang aking karanasan nung ako ay mapaso sa paa. Bumaba sya, kinuha ang mantika ng baboy at ipinahid niya sa napasong kamay. Maya-maya ay nawala ang pamumula nito at hindi rin tumuloy na magtubig.

‘Yan po ang aking mga eksperimento na gusto kong ibahagi sa inyo.

CHAPTER 5

MEDICINAL PLANTS IN BARLIG AND BAGUIO CITY

Story by Lita Karty
Documented by Sixto Talastas

> *I am Lita Karty, 69, a native of Lias, Barlig, Mountain Province, and a resident of Green Valley, Dontogan, Baguio City. I will share my experience regarding medicinal plants.*

When we moved in Baguio City in the 1990s, I started gardening to grow our own food. This helped lessen our expenses from buying vegetables at the market and ensured that what we ate was healthy. These vegetables have kept me healthy over the years despite my advanced age.

In 2015, I had headaches, felt nauseated, and I was having a hard time urinating, so I had a laboratory test. It turned out I have UTI or urinary tract infection. I asked friends what medicinal plants could heal UTI. I searched for the plants they recommended and later planted them in my home garden. I also added medicinal plants that can heal ailments other than UTI.

Although I have a general knowledge of some plants with medicinal benefits, I learned even more from the rich experiences of other people, such as processing, dosage, and other ailments these plants can treat, not just UTI.

Here are some of the medicinal plants that I have used, with information I learned from different people since my childhood days up to now:

A. IN MY GARDEN

I.A. Medicinal plants that are used as tea, ointment, and bath:

Lemon Grass Tea:

Ingredients:

Lemon grass ..... 5 whole plants
Water ..... 2 liters

Procedure:

1. Boil water first, then add lemon grass. Continue boiling for about 5 to 10 minutes.

Dosage:

- Drink 1 cup 3 times a day, before or after eating.

Indications:

- Helps kidneys normalize urine flow
- Helps normalize blood circulation
- Prevents some bacterial infections
- Relieves pain and swelling
- Reduces fever
- Normalizes blood sugar
- Normalizes blood cholesterol
- Normalizes menstrual flow
- Antioxidant

Corn Hair tea

Ingredients:

Hair of corn ..... 1 bundle or a handful
Water ..... 2 liters

Procedure:

1. Boil water and corn hair together for about 5 to 10 minutes (from boiling point).

Dosage:

- Drink 1 cup 3 times a day:
  morning, noon, and evening.

Indications:

- Antioxidant
- Diuretic
- Enhance kidney health
- Helps heal urinary tract infections

Peppermint tea
(We call it “colcolgate” in Lias as it smells and tastes like toothpaste)

Ingredients:
Peppermint leaves ..... a handful
Water ..... 1 liter

Procedure:

1. Boil water first, then add peppermint leaves and turn off the fire.

Dosage:

- Drink 3 times a day as much as you like, in the morning, at noon, and in the evening

Indications:

- Treats colds, cough, and sinusitis
- Normalizes blood pressure
- Normalizes digestion
- Help relieve headaches and migraines
- Energizer
- Help relieve menstrual cramps
- Antibacterial
- Freshens breath
- Helps improve sleep
- Helps in weight loss

Tawa–tawa Tea

Ingredients:

Tawa–tawa stems & leaves ..... a handful
Water ..... 1 liter

Procedure:

1. Boil water first, then add tawa–tawa.
2. Continue boiling for 15-20 minutes.

Dosage:

- For Dengue patients with high fever, 1 cup every hour until fever subsides.
- For other ailments listed below, drink 1 cup a day.

Indications:

- It has a bitter taste. If a child can't tolerate the taste, add sugar or honey and follow up with lots of water
- Treats dengue fever
- Treats asthma
- Treats diarrhea
- Normalizes blood pressure
- Keeps the urinary system healthy
- Boost the immune system
- Helps cure malaria
- Prevents cell damage

There was once an electric reader who would ask for my tawa-tawa plant for his daughter who often had dysmenorrhea. When he first saw my tawa-tawa, he asked if he could take home some cuttings, which I gladly gave. Since then, whenever his daughter suffers from dysmenorrhea, he always asks for the plant. Over time, it became his habit not just to ask for tawa-tawa but for other medicinal plants as well. Even after his daughter got well, they continued drinking this tea to stay and feel healthy.

Kataka–taka natural ointment

Ingredient:

- Kataka–taka leaf

Procedure:

- Cut open a leaf and smear the juice or sap on the cracked foot or skin lesion, once a day.

Indications:

- Cracked feet
- *Alipunga* or athlete's foot
- Other skin disorders

Bayabas leaves

As a bath or wash:

Ingredients: (This quantity is for the whole body; reduce the amount when used in a small area):

Bayabas leaves ..... 2 handfuls
Water ..... 3 to 4 liters

Procedure:

- Boil water and bayabas leaves together for 15 minutes from boiling point.
- Let it cool to lukewarm.
- Use for bathing or washing wounds

Indications

- For all kinds of skin diseases
- For infected wounds

When my youngest child, Moya, was still a kid, she had scabies, a kind of skin disease that produces watery and itchy blisters. It got worse as time went by, so I brought her to a dermatologist. She was given ointment and pills, which she took for a month, and her skin disease indeed healed. However, after a month, when the medicines were gone, the disease returned. I got frustrated

and switched to bayabas leaves.

Karub-fas (squash) - Regular consumption of this keeps the eyes healthy.

Papaya - Normalizes bowel movement

Yusa (taro) - A remedy for iodine deficiency

Alugbati - For cleansing

B. IN THE WILD AND THE SURROUNDINGS

Gumamela flowers and leaves tea:

Ingredients:

Gumamela flowers ..... a handful
Gumamela leaves ..... a handful
Water ..... 2 liters

Procedure:

1. Boil water first, then add gumamela flowers and leaves. Continue boiling for about 5 to 10 minutes

Dosage:

- Drink 2 times a day as much as you like, in the morning and in the evening

Indications:

- Antioxidant
- Helps promote weight loss
- Reduces the growth of bacteria
- Promotes a healthy liver
- Normalizes blood pressure
- Diuretic

This is one of the plants that people in Lias use when they have problems urinating. From my experience, aside from being diuretic, it also reduces my back pain.

Lantana leaves Tea:

Ingredients:

Lantana leaves ..... A handful
Water .....1 liter

Procedure:

1. Boil water first. Remove from the fire, then put the *lantana* leaves.
2. Let them soak for 5 to 10 minutes, and then it is ready to use.

Dosage:

- Drink as much as you like, 2 times a day, in the morning and in the evening.

Indications:

- Diuretic
- Antioxidant
- Antimicrobial
- Enhance Kidney Health
- Helps heal wounds
- Heals skin disease
- Heals colds, cough, bronchitis, and tuberculosis
- Normalizes blood pressure
- Helps ease back pain

This is used by people in Lias to induce urination and reduce back pain. Other people eat its ripe fruit or add them to the tea.

Putputud Tea:(Putputud, Lias; Putuptud, Besao; Horsetail, English)

Ingredients:

Putputud ..... a handful or 1 bundle of leaves
Water ..... 2 liters

Procedure:

- Boil the water and putputud together for about 5 to 10 minutes from the boiling point.

Dosage:

- Drink 3 times a day: 1 cup in the morning, 1 cup at noon, and 1 cup in the evening

Indications:

1. Antioxidant
2. Diuretic
3. Immune booster
4. Normalizes the respiratory system
5. Enhance Kidney Health
6. Normalizes blood sugar
7. Heals urinary tract infection

The *putputud* plant is a low-growing grass that grows alongside creeks and other bodies of water. Its leaves are like small sticks but hollow inside. It is also very coarse, so it is used for scrubbing dirty cooking pots. When people in Lias have a UTI, they go to the river to gather this plant and use it as tea. I used it many times during my childhood days.

Khurun (Cogon Grass) Tea:

Ingredients:

Cogon roots ..... A handful
Water ..... 2 liters

Procedure:

1. Boil water and cogon roots together, and once it boils, continue boiling for about 5 to 10 minutes.

Dosage:

- Drink 2 times a day, as much as you can, in the morning and in the evening.

Indications:

- Antioxidant
- Antibacterial
- Diuretic
- Tonic or energizer
- Helps heal Diarrhea

Reed shoot (otar chi nunu)

Nunu (Lias term for “reed”; Ilokano “runo”) is a tall grass that grows up to 4 feet in height. It is abundant near rice fields. When I am in the farm and feel a stomachache, I eat some fresh nunu shoots and feel better. Similarly, people who have ulcers eat fresh nunu shoots and they get well.

Amti or Black Night Shade

Amti is an erect herb plant that grows approximately 1 meter in height. It just grows naturally anywhere: home yards, along foot trails and riverbanks, beside rice fields, and in the forest. It is one of the most sought-after vegetables in Lias for a sick person.

During my childhood in Lias, I once had headaches, and the elders in the neighborhood told me to eat amti. I collected handfuls of amti from the surroundings, boiled it with a lot of water, and then ate it. It was my viand for every meal for one day, and after that, my headache was gone.

In those times, people believed that even if someone had a fever, they should not stay home but go to the farm, work, and eat a lot of amti. In their experience, eating amti relieved pain and fever. You can also boil it with a lot of water, and you can drink it as water.

Pakpaku or edible fern

Pakpaku grows abundantly near bodies of water like rivers, creeks, brooks, and rice fields. During my childhood, it was common knowledge that *pakpaku* is an energy food. As we walked home tired from work in the rice fields, we would gather what we can along the way and eat them fresh. It reduced our tiredness, and we felt rejuvenated. We also gathered more to cook at home.

CHAPTER 6

HEALING PLANTS FROM ALL AROUND

Story by Julio Coyasan
Documented by Sixto Talastas

Julio Coyasan, 59, a native of Suyoc, Mankayan, Benguet, and a resident of Dengsi, Tawang, La Trinidad, Benguet, is a healer using massage and medicinal plants. His extensive knowledge of these is a combination of traditional, which he learned from his family, and modern, which he learned from books, other people, and social media. He started practicing when he was around 15 years old.

1. **Sapang**

Sappan Wood (English)
Sibukaw na kahoy (Tagalog)

I learned about this from a group of jeepney drivers plying the Pugo – Baguio route. In November 2022, I went to Pugo, La Union for a business trip. At the jeepney terminal, I saw 2 preparing to drink Ginebra San Miguel gin. I asked one of them if he was the one going to Baguio.

“No,” he replied and pointed to a jeep nearby. “That jeep over there is the one scheduled for the trip. As for us, our trip is done, so we’ll have a little drink before we go home.”

Then he began chopping a chunk of wood into small sticks, less than a foot in length and about the thickness of a finger. He put a stick inside a newly opened 2x2 bottle of gin. In less than a minute, the gin turned pink. I was amazed, so I started a conversation to learn more about the wood.

“What is that?” I asked.
“Sapang.” they said, “We put it in the gin to lessen the bitter taste.”
“Can it be used in plain water?”
“Yes, when used in water, it has many health benefits.”

They shared some health benefits of sapang, but what I remembered most is that it is anti – cancer and makes the body feel good. They said they get the wood from around Pugo.

“Can I buy those from you?” I asked.
“No, you take all this for free; we still have some at home.”

When I went home, I followed the procedure that the drivers taught me.
Sapang tea.

Ingredients:
Sapang wood sticks ..... 1 to 2 sticks
Water .....1 liter, hot or cold (better hot)

Materials:
1. Glass or ceramic container 1-liter size

Procedure:
1. Fill the bottle with water, then put one or two sapang sticks inside and cover. As soon as the water turns reddish, it is now ready for drinking. If the bottle is emptied, replenish it with new water. Keep replenishing; if the stick doesn’t produce color anymore, discard it and use new sticks.

Dosage:
1. Drink as much as you like, just like drinking water

Indications:
- Cleanses circulatory system and normalizes its functions
- Antioxidant
- Anti – bacteria
- Anti - inflammatory
- Improves liver function

- Diarrhea
- Diabetes
- Helps prevent cardiovascular diseases

It doesn't taste bad; in fact, it tastes just like water. For better effectiveness, wait 3 days until the water has turned maroon before drinking it. Now I drink water with sapang every day, and I feel great. When these sapang sticks are all used up, I will go to Pugo again to get a fresh supply.

Aloe Vera: Used as a detoxifier/cleansing.
Ingredients:

1. Aloe vera
2. Honey
3. Olive oil (or coconut oil)

Procedure:

1. Split the aloe vera in half lengthwise and scrape the soft, gel-like part inside.
2. Mix a 1:1:1 ratio of aloe vera gel with honey and olive oil, or you can add more of any of the ingredients to suit your taste.

Dosage:

- Take as much as you like. However, if you take a lot, it could act as a laxative.

Cactus: For sprains where there is swelling and pain.
Procedure:

- Cut off all the thorns.
- Cut in half or thinly,
- Place it on the affected part. (I saw my mom place cactus slices on the sole and on top of the foot, like a sandwich.)
- Wrap with a gauze bandage or any clean cloth.

One time, a cousin came to seek help from my mother as he sprained his ankle. My mom washed the foot with warm water, did ilot with coconut oil, then padded it with sliced cactus. She wrapped this with a

clean cloth and instructed my cousin to leave it overnight. The next day, my cousin came again for a second session. He was already walking straight and felt good.

Suob - Guava leaves for steam treatment

In Suyoc, Mankayan, when I was young, I witnessed my grandmother performing suob or steam treatment for women who had just given birth. She would collect fresh bayabas leaves and boil them in water for five to ten minutes. After boiling, the water is poured into a pail, covered with a thin lampin or diaper, and then the mother sits on the pail, above the water. According to my grandmother, the steam will help heal the wounds from childbirth. She also said that the mother's buttocks do not touch the water so that the skin in that area will not turn dark ("haan nga ngumisit"). After the suob session, the water in the pail is used for the mother's bath or for washing her wound.

I have learned from others that it is also beneficial to mix other leaves with the guava leaves, such as avocado leaves, chopped pineapple leaves, pomelo leaves and/or citronella leaves.

Editor's Note: This is like a hot sitz bath, an old accepted medical practice used to relieve pain, swelling, and discomfort in the perineal area, such as in hemorrhoids and after childbirth. The difference is that in a hot sitz bath, the perineal area is soaked in the very warm water, while in this story, the mother sits above the water, and only the steam reaches her perineal area. The warm water or steam increases blood flow in the area, promoting faster healing.

CHAPTER 7

MEDICINAL PLANTS IN DANDANAC

Story by Urbana Casiwan
Documented by Sixto Talastas

“Urbana Posdo Casiwan, 58, is a ‘mang-ngilot’, or indigenous massage therapist, of Kias, Virac, Itogon. She also uses medicinal plants to help her family and patients, in addition to “ilot”. She learned the trade during her childhood in her birthplace, Dandanac, Besao, Mountain Province, where medicinal plants are abundant, and frequently used to treat various illnesses. She advises that for these to be effective, they need to be used consistently over time, like “maintenance medicines.”

Here are some medicinal plants she shared:

1. Native Kutsay

Ingredients:
Native Kutsay ..... A handful
Lana (coconut oil) ..... Freshly made

Procedure:
1. Pound the native kutsay and squeeze the juice.
2. Mix the juice with lana (ratio is 1 teaspoon juice to ½ teaspoon lana).
3. Drink the mixture, followed by lukewarm water.

Dosage:
- 1 to 4 years old ..... ¼ teaspoon Kutsay juice
- 4 years old to teens ..... 1 teaspoon Kutsay juice
- Adult ..... 1 tablespoon Kutsay juice

Can be used 1- 3x a day, depending on the severity of the cough.
For dry cough, it will soften the phlegm.

Indications:

- Used for cough, especially persistent ones.

Other uses: Native kutsay can also be used in treating sprains and other body injuries.

Story: One time, a student came to the clinic where I worked before for treatment of a twisted ankle during a basketball game. I treated him and he became my *'suki'*, a loyal client. He sought my treatment at another massage clinic I moved to, and even called me for home service for a leg injury. I asked his relatives to look for kutsay. After performing hilot, I heated the kutsay, padded it on his leg, and bandaged it. We repeated these for three more sessions until his leg was fully healed. I learned this use of kutsay and tagumbaw for massage from my mother Dominga. It is also a common practice in Dandanac.

2. Mountain Tea

Any kind of mountain tea can be used. We have two kinds in Dandanac. Boil 5-6 cups water first, then add a handful of the leaves. Continue boiling until the water turns pink or light orange, then remove from the fire. It can be taken hot, warm, or at room temperature. Drink as much as you like, anytime.

Indication: Used for the general well- being of the body.

3. Banaba Leaves Tea

Boil 5-6 cups water first, then add 3 to 6 banaba leaves (or 1 leaf per cup).

Continue boiling until water turns dark, then remove from fire. It can be taken hot, warm, or at room temperature.

Drink as much as you like, anytime.

Indication: Used for the general well-being of the body.

4. Avocado Leaves Tea

Ingredients:

Avocado leaves ..... Handful
Water ..... 1 liter
Salt ..... Pinch
Inti (raw cane sugar) ..... 1 teaspoon

Procedure: Boil water first, then add avocado leaves, salt, and inti. Continue boiling until the water turns dark, then remove from the fire.

Dosage: Drink as much as you like, anytime.

Indications: Used for diarrhea and the general well-being of the body.

5. Tea blend

Ingredients:

Avocado leaves ..... a handful
Bayabas leaves ..... a handful
Kaimito leaves ..... a handful
Kasoy bark ..... a handful
Water ..... 2 liters

Procedure:

Boil all the ingredients. When the water turns dark, remove the leaves and bark.

You can drink it hot, warm, or cool.

Dosage: Drink as much as you like, anytime.

Indications: Used for diarrhea and the general well-being of the body.

When I was about 13 years old, I often suffered from diarrhea. I had a poor appetite and was malnourished. My mother would prepare this tea blend, or just avocado tea, which was always effective.

Kunig (Turmeric) Tea

Ingredients:

Kunig roots (peeled and sliced thinly) ..... a handful
Water ..... 1 liter

Procedure:

1. Boil the ingredients. When the water turns yellow, remove it from the fire.
2. Drink this hot, warm, or cool.

Dosage:

- Drink as much as you like, anytime.

Indications:

- Used for arthritis and hypertension

Variation:

- Put the sliced kunig in the water (same amount as above) and let it soak overnight.
- Drink the water the next day as much as you like, anytime.

One time, my husband suffered from arthritis; his knees were swollen and painful. I applied what I learned from my mother, the use of *kunig* tea. I prepared *kunig* tea and my husband drank it daily. After a month, he got well. Besides arthritis, his hypertension was also gone. He continues to drink kunig tea occasionally.

Tagumbaw Tea

Ingredients:

Tagumbaw leaves ..... a handful
Water ..... 6 cups

Procedure:

- Boil the ingredients. When the water turns dark, remove from the fire. It can be taken hot, warm, or cool.

Dosage: Drink as much as you like, anytime

Indication: Used for peptic ulcers.

Other uses of tagumbaw: The leaves or bark are used for padding on injured body parts.

Story 1: One time, my husband suffered from peptic ulcer and did not want to see a doctor. I prepared *tagumbaw* tea, and he drank this daily as his water until his ulcer was gone.

Story 2: One time in Dandanac, when I was about 15 years old, there was a “begnas” (a community thanksgiving feast) when the community gather, play gongs and dance all night.

I was among the audience watching, when suddenly, I was called to dance with a partner from another town. My shyness got the best of me, and I ran away, jumping down to a lower terraced lot. Unfortunately, a big rock rolled down and hit my foot, causing pain and swelling.
My mother performed *ilot* on my feet with coconut oil. She then cut about a foot of tagumbaw stem. She placed this near a fire to heat the bark. Once heated, she peeled off the bark, padded them on my affected foot and then bandaged it with a clean cloth and let it stay overnight. She removed this padding the next morning. Later in the evening, she placed a new tagumbaw bark padding after oiling my foot. She repeated this for four nights until my foot was healed. ***

CHAPTER 8

STORIES OF HEALING IN THE LUBOS-TUMPAO-TIOTIOEN-DULNUAN FAMILY

Story by Mary Jo Karla Dulnuan
Documented by Sixto Talastas & Penny Domogo

Mary Jo Karla Tiotioen Dulnuan, 57, is a former teacher and presently a member of the Pico Council of Elders in barangay Pico, La Trinidad, Benguet. She grew up in Pico, the eldest of eight children but two of her siblings died early. Her family are original settlers in that barangay. Her mother, Felomina Tiotioen, is Ibaloy and was a former OIC municipal treasurer of La Trinidad. Her father, Agustin Dulnuan, is half-Ibaloy and half-Ifugao and was a former provincial guard in the province of Benguet. Her grandfather and her mom's father, Evaristo Tiotioen, is from Atok. He married Flora Tumpao from La Trinidad.

Her mother was a traditional healer, taking after her great-grandmother, Songajen Lubos Tumpao, who was a mambunong (Ibaloy indigenous priest). When they were children, they were often sick and sometimes, they got sick at the same time. Her mom would use medicinal plants to heal their ailments. Sometimes, she also would rub her saliva on the sick person and say prayers. When their illness was something they could not explain, they asked the help of the mambunong. Her parents and grandparents and great-grandparents are already gone but they have left a rich legacy of knowledge and skills in indigenous healing to their family, some of which Karla shares in the following stories. Her cousin, Gretchen Tiotioen, shares one story on the balbalosa plant.

Healing stone of Lolo Evaristo Tiotioen

Lolo Evaristo Tiotioen was a collector of unusual and uncommon objects, be they plants, wood, stones, etc. One time, he went to Sitio Atol, in the mountain near our house in Pico, and when he returned, he had with him a stone the size of an ostrich egg and colored dirty white. Later, he started healing using this stone, which he learned about through a dream. The dream was to take care of the stone and pour clean water on it every day, then rub the stone. Afterward, use the water and apply it to the painful part of the body, like the arms, hands, legs, or stomach.

He followed what was instructed in the dream. He placed water in a basin, submerged the stone in it, and placed this under his bed. Every day he would discard the water and pour fresh water. This regular changing of water is done to avoid the breeding of mosquitoes. The stone was turned over once a day to keep it evenly wet. The water poured over the stone was what Lolo used for healing.

When somebody needed healing, Lolo Evaristo would get the basin out from under his bed. He would dip his hand in the water and hold the stone with his fingers, reaching the bottom of the basin. He would then rub the water on the affected parts of the body. With this, body pains and shallow cuts were healed. He only used this, though, on the members of his wide family circle who believed in this kind of healing.

Related to this kind of healing is something I learned from Google. Here are two ways water can help heal by dissipating negative energies:

1. Fill a glass container with 1 liter of water and cover it. It's not necessary to boil the water as long as it is clean. Place this on the floor or table in the middle of the wall or room. When the water gets cloudy, change it with new water. Also, if you have just experienced a difficult challenge in your life, change the water, even if it has not turned cloudy. The effect of this is that you will feel calm and refreshed. This is because water absorbs negative energy. Use the discarded water to water your plants.

2. If there's a depressing or oppressive vibe in the room, a glass of water will absorb and neutralize it. Place it under the bed so you don't step on it when you get out of the covers. Get rid of the water in the morning because fresh water works best.

Lesson from Lolo Bancho Tumpao

My great-grandmother, Songajen Lubos, was married to Bancho Tumpao. They had natural springs in their land. However, Lolo Bancho did not want anybody to fetch water from these springs. It was not that he was "imot" or stingy. He told us that he was just taking precautions because some people might "gamud" or poison the water with their words and cause illness to those who will drink from it. He further explained that this happens if the person fetching water "ket agmaymayutmut" (is cursing or wishing ill will to anybody) in front of the spring. I was amazed that such things happen, and I realized how important it is to take care of our water sources.

The big old silver one peso coin of Lola Flora

When we were young, my brother, Francis Dulnuan, was bitten in the thigh by our neighbor's dog. Lola Flora Tiotioen took an old one-peso coin from her purse and then started rubbing it to and fro on the wound. Shortly after, Lola brought him to the health clinic for the anti – rabies shots.

I think that, perhaps, the silver content of that old one-peso coin may have helped in healing the dog bite.

Some medicinal plants used by Mom Felomina Dulnuan

Balbalosa leaves for the wounds

(As related by Gretchen Tiotioen, cousin of Karla and niece of Felomina)

(Ed: Silver is a medically accepted medicine for wounds.)

When I was a child, I had a wound. I remember my aunt using *balbalosa* to treat that wound. Auntie cut the leaves lengthwise and then rubbed a little *lana* (coconut oil) on the leaf, warmed it over a fire, and then plastered it over the wound. And then she bandaged it with a clean cloth. The wound easily dried up, leading to its faster recovery.

(Added by Karla)
You let this balbalosa dressing stay overnight. The next morning, remove the dressing and put another fresh leaf using the same procedure. When the edges of the wound get itchy, that's a sign that it is healing. Continue changing the balbalosa dressing daily until the wound is dry and healed.

Bengao Plant

Another plant that she used was the bengao, a wild plant. Its root and leaves have an unusual smell. She would dry the roots a little, then cut them into small pieces. She then pinned one to each shirt of her children to ward off negative energies or so they will not be easily frightened. It can also be placed in a pouch bag or wallet. When you feel dizzy or unwell, just smell the root. If it is dry, just pinch the root to release the smell.

She also used this plant as tea. It is a stress reliever when taken in small amounts. As the tea boils, the aroma itself relieves stress.

Take caution, though, as this tea increases blood pressure, so it is not recommended for people with high blood pressure and heart conditions.

Bengao grows well in damp and shady places.

Another way of warding off negative energy is using salt like Epsom salt or ordinary sea salt that we buy in stores or in the market. Get a spoonful of the salt and put it in a little container. You either put this in your pocket or in your bag.

Camphor leaves and guava leaves

We have a big old camphor tree in our yard. At times, we get a few leaves that can be reached from our window and boil these in water till the water turns brown or dark brown. We use this water for bathing to soothe the body. The fragrant aroma that it emits while boiling is in itself relaxing.

The leaves of the guava can also be boiled and the decoction is used to wash wounds to facilitate healing. You can also boil the leaves until the water turns very dark brown and bitter. You can drink this tea before and after surgery to help in the healing of the wound. You can drink as much as you like anytime.

Healing boulders in the river

When we go to the river to swim or for a family outing and the sun is shining brightly, we always look forward to lying down on warm boulders. In our rivers, stones of different sizes abound- from pebbles to cobbles to boulders.

Some boulders are hot while some are warm, so we select the boulder with just enough warmth so as not to burn our skin. Sometimes we just lay down the affected body parts on the warm boulder and sometimes, we would lay our whole body down, face down or face up. We prefer boulders because their big sizes can accommodate our whole body when we lie down.

These stones store the heat from the sun. In turn, this heat can treat some ailments - helps heal wounds, warms the lungs to loosen the phlegm and bring it out, and also relaxes tired muscles, among other benefits. This is common knowledge and practice among the members of the Ibaloy clan, to which I belong. This healing principle is like that of

hot compress therapy and hot stone therapy being used in some wellness spas.

Naam-amlingan
(sudden feeling of weakness or dizziness for no apparent reason)

Some years ago, I joined a teachers' seminar in San Fernando, La Union, along with some fellow teachers from the Cordillera. During a session, I saw a teacher from Mountain Province laying down her head on the table, seemingly weak. She was *naam-amlingan,* which means her condition was caused by unseen spirits. (One sign of "na-am-amlingan" is that the person's ears feel cold when touched.)

One co-teacher from the Ilocos hurriedly went out and gathered a handful of various shrubs from the surroundings. She used these plants to gently whip different parts of the patient's body. She did this silently. With every gentle whip, the plants produced an aromatic smell that I think helped the patient recover. After a while, the patient regained her strength and stayed on to finish seminar.

When asked by some of our companions what kind of plants are used in this kind of healing, our co-teacher said that there are no specific plants required; any leafy plant will do. However, you have to cut from the stem; don't just take the leaves. ***

CHAPTER 9

SOME INDIGENOUS HEALING PRACTICES OF THE BAGBAGO PEOPLE OF TUBO, ABRA

Story by Tito Cadalig Alfonso
Documented by Sixto Talastas

Tito Cadalig Dogui-is Alfonso, 59, is a Bagbago traditional health practitioner who hails from Barangay Dilong, Tubo, Abra and now lives in Quirino Hill Extension, Baguio City. He employs rituals and indigenous massage in his healing. He practices his healing in Baguio and Dilong and in whatever place that need his services. He learned all his healing and ritual knowledge through observation; no one formally taught him. He says that these things are not taught formally. When a person is interested in learning, then he or she can observe the practitioners and ask them about their craft.

Here he shares some of the indigenous healing practices of his people as he had witnessed them since his childhood to the present.

Mensangaili* or *ubaya

Traditional community lockdown in times of epidemic

During my childhood in the *ili* (village) of Dilong, Tubo, Abra, during the flowering season of the star apple, there was a *pangok* (epidemic) of malaria. Many people were afflicted with the disease, and a few died. The elders gathered and discussed what to do.

“Mensangaili tako!” (Let’s have a traditional community lockdown!”), they declared.

Some men went around the community to announce it, and some

people were tasked with guarding the trails leading to the village so that no people would enter, and no one would go out while the villagers conducted some rituals. Families brought out food to the center of the village for the people to partake. Gongs were brought out to the center and were played, and the people danced. Some men took some wooden slabs called *tambul* from their *dap-ay* (indigenous socio-political structure) and beat these wooden slabs with sticks rhythmically, while walking from house to house.

"Umali kayu et, umunud kayu en dakami, dakayu ay sakit umali kayu en dakami!" ("Come now, come all of you, diseases, come follow us!"), they called as they walked around the village.

When all the houses were visited, they went to the *saeban* or p*apattayan*, a sacred place for rituals located near the entrance of the village. They called on all the diseases from the village and brought them there. After the *mensangaili* ritual, the incidence of malaria was greatly reduced.

Now that people are going to school, many no longer believe in this practice. But in the olden days when there were no hospitals, indigenous healing methods like this were resorted to, and they were effective.

Home Birth of a Suni
(Breech Delivery at Home)

Again in Dilong, when I was a child, I went to a neighbor's house out of curiosity to witness how a baby is born. A nurse and a midwife were assisting the mother. The baby was "suni" (breech), with the buttocks of the baby coming out first. The nurse and the midwife did all they could for a long time, but they could not deliver the baby.

"*Ipan tayun isuna ijay ospital, ipa – cs tayu ta haanen makaluwar jay ubing!"* (Let's bring her to the hospital for a caesarian section because the baby cannot come out!"), the nurse and the midwife declared.

Upon hearing this, some men started to prepare an *assiw*, a makeshift hammock made from a blanket tied to a long bamboo pole. This is the indigenous mode of transportation for a patient.

From among the onlookers came forward an old woman whom we knew as a *partira* (a traditional birth attendant).

"Ay mabalin nga ipakat ko pay ti kabaelak santo yu ipan isuna ijay ospital?" ("Can I first do the best that I can do before you bring her to the hospital?"), she said.

And so, she performed *ilot* on the mother. From the outside, she repositioned the baby inside. After a while, the mother was able to deliver the baby headfirst who cried instantly upon coming out. All the people present breathed a sigh of relief.

The men were greatly relieved by this successful birth, otherwise they would have to carry the mother for about 5-6 hours to the nearest hospital in the neighboring town of Cervantes, Ilocos Sur. As is their custom, at least one able-bodied man from a household should go and help in this kind of emergency.

After the birthing, there was a discussion among the people present that if they brought the mother to the hospital, she and the baby probably would have died. The hospital is a five-to-six-hour hike away and the mother would surely be drained of blood before arriving there. Also, with the baby's buttocks stuck in the opening, air would accumulate inside the womb, which could result in the death of both baby and mother.

Aside from witnessing the expertise of the *partira*, I also witnessed other common birthing practices in Dilong.

Aprun ti Biklat
(Phyton's Bile)

There are traditional medicines used for mothers who have just given birth. One such medicine is the bile of a python. Whenever a python is killed, the bile is collected, sundried, and then kept in a glass bottle.

When a woman gives birth, the bile is soaked in warm water for a few minutes until the water turns greenish. It is then taken out and kept again for future use. The bile water is drunk by the mother to induce the *aliwen* (clotted blood) to come out from the womb, giving instant relief to the mother.

Kuba
(Indigenous Sanitary Napkin)

We also have indigenous sanitary napkins for mothers who have just given birth. I once witnessed the older women from our neighborhood go to the forest to find and collect the bark of the *kuba* tree. After gathering the bark, they proceeded to the river carrying wooden paddles. They used these paddles to beat and mash the barks until they became soft and absorbent. (These wooden paddles are also used traditionally to beat the dirt out of the laundry.) After this, the softened barks were washed in the river and then dried. These are sturdy and they cannot be easily ripped apart. They are then kept to be used as sanitary napkins for the mother who just gave birth.

However, as years passed and commercial sanitary napkins became available in stores, women don't use kuba anymore.

Blue Rocks

In Dilong, we have a community practice in healing *talindanum* or athlete's foot, a skin condition usually starts as itchy blisters between the toes. Farmers often contract *talindanum* because their feet are always soaked in the mud for many hours a day. If not cured soon, it may expand and spread to other parts of the feet. The blue rock is able to heal this.

(Ed. Note: This knowledge and skill of processing kuba are alive also in other Igorot tribes. Aside from absorbing blood, this kuba is known to promote healing of the mother who has just given birth. It is also observed that the peculiar smell of postpartum blood is absent if kuba is used. This bark can also be used as clothing. During the Ubaya Festival 2024 in Besao, the elementary boys who represented Tamboan Elementary School all wore g-strings made of kuba.)

There are certain areas in our mountain where the rocks are blue. During the dry season, blue powder forms in the surface of these rocks. This powder is scraped off and collected by the villagers. Sometimes we can even collect as much as a big can of cooking oil. These are kept in our homes so that if the season for working the rice paddies comes and many farmers would get *talindanum*, we have a ready natural medicine to cure them.

Blue powder paste

Ingredients

Blue powder .....1 teaspoon or more, depending on the width of the skin infection

Water .....1 teaspoon or more, depending on the amount of powder (1 measure of powder to 1 measure of water)

Procedure

1. Mix the powder with water to make a paste
2. Rub the paste on the affected skin

Dosage

- This medicine is very potent. One-time application is enough. However, the fluid from the blisters may unknowingly spread to other parts of the body, or the infection may expand, especially when the patient scratches the affected skin, as it is very itchy. When this happens, simply reapply the solution to the affected skin. Usually, the next day, the infected skin is dry, and the itch is gone.
- You can add more paste depending on the severity of the infection.

Indication

- For *talindanum* (athlete's foot)
- For other skin diseases

Side effect

None, except for a stinging or burning sensation on the skin upon application of the paste.

During the 1980s, I worked as a miner in the Lepanto Mines in Mankayan, Benguet. In the underground tunnels, there are some areas with blue rocks. I learned that it is copper, a mineral that is the main component of electric wires. Because of the moisture underground, these blue rocks produce a liquid that is blue, or sometimes green, or even blue-green. When this liquid touches your skin, it will feel a sting or smart. Miners also collect this liquid to use as medicine in case they are afflicted with *talindanum*. In our place in Dilong, the blue rocks are exposed to the sun and air, so they produce powder instead of liquid.

Editor's note: The "Bagbago" people or "Bago" live in the border regions between Ilocos and the Cordillera Mountains, encompassing some parts of Abra and Ilocos Sur. They have retained their customs and traditions, and language. Some Bago people I interviewed traced their roots to Besao, Mountain Province. Presently, many have migrated to other places because of intermarriage, higher education, and livelihood.

CHAPTER 10

TINITIN, LUCHIS, TOKAG

(HEALING & WELLNESS IN THE FOREST)

Stories by Ignacio 'Fatuna' Machis and Robert 'Achinchang' Bocalan, Jr.
Documented by Sixto Talastas

Fatuna Machis, 72, was born and raised in Lias, Barlig, Mountain Province. He later worked as a miner at Philex Mines in Tuba, Benguet. After retiring, he now resides in San Luis Extension, Baguio City. He learned about the tinitin from his grandfather, Tarukin, during his childhood days in Lias. The tinitin is a prayer for healing fresh cut wounds. He recites this prayer whenever a family member or a friend suffers a cut wound. Fatuna knows two versions of tinitin: one calls on Soop and Songyop, and the other is directed towards the indigenous Supreme Being, Kafunyan. He passed down this prayer to his son, Marphil Machis, 46, who used it when he or a friend suffered a cut wound. However, Marphil can no longer recite this prayer due to memory lapses caused by a stroke he had years ago.

Tinitin
(Healing prayer for cuts)
Shared by Fatuna

This is the tinitin that Fatuna recited:

"Kuat kanu nagpas nan ipukaw ya chachan ana-anap sin mantinitin ya nar-us cha Soop kan Songyop, ya ensoop cha ya nakakse-et ya natchok. Yasa ta ku makukuchiman ta chimad ya mapuy-an."

("Soon after a person was cut, they looked for the one who can perform the tinitin; then Soop and Songyop passed by. They closed the wound,

it suddenly went dry, and the bleeding stopped. So may the wound dry and the dead skin peel off so that it will easily heal.")

"Soop" and "Songyop" are personifications of the term "connect" and "return," referring to the closing and healing of the wound.

Luchis ya Tokag
(Moss and Monkey)
Story by Fatuna

In the 1960s, in Lias, Barlig, Mountain Province, teenage neighbors Karsuwan and Lassuchan, went hunting in a nearby mountain with a World War II American rifle called Springfield, that they took turns using.

In the forest, they saw a monkey and shot it, but it fled, springing from tree to tree. They followed the monkey to a brook, where it climbed down to a nearby waterfall, holding a pad of moss against his stomach where the gunshot wound was. They thought only people use *luchis* so they were amazed to find out that even monkeys use it, too.

After returning to the village, Karsuwan and Lassuchan shared this experience with their families and relatives. Their neighbor, Fatuna, heard the whole story and because the story was amazing, he still remembers it to this day. The Lias people use the *luchis* to heal cut wounds and stop bleeding, but they were amazed that a monkey used it.

Recalling this unique story from his childhood, Fatuna said that his belief in the *luchis* as a healing plant was strengthened because of this story.

Luchis ya Tinitin
(Moss and healing prayer for bleeding wounds)
Story by Achinchang

In the early 70's when Robert 'Achinchang' Bocalan, Jr. was in his teens, he went to gather firewood in a nearby forest called Pagkhu in his village in Lias. While cutting wood with his bolo, it slipped out of his

hand and made a deep cut about 3 inches long on his knee, causing heavy bleeding. He immediately gathered some *luchis* (moss), which are abundant in the surrounding area, on the ground and the trunk of trees. He gathered some small vines to tie it with. He then made a pad of *luchis* to cover the wound and tied it with the vine. He then carefully started for home, leaving behind the firewood.

At home, his grandfather, Chayongaw, in his 70s at that time, performed the *tinitin* to prevent infection and inflammation and promote faster healing. Achinchang couldn't recall the exact words of the *tinitin*, but it included invoking the healing power of *Kafunyan*, the Igorot Supreme Being. Right then and there, the bleeding stopped. Despite the size of the wound, it didn't become infected or inflamed and remained dry and healed quickly.

Achinchang, now 67, said that the combination of *tinitin* and *luchis* led to the fast healing of his wound. He emphasized that luchis is an effective first aid for bleeding wounds in the forest.

Later, he learned about *ledges*, an herb growing in open spaces. Crushing the leaves and applying them to a wound also stops bleeding. According to Achinchang, *ledges* have more healing power than *luchis* because their juice stings like tincture of iodine.

Tukfu and Kamilin

Achinchang shared that there are 2 poisonous plants in the forest to avoid:

1. *Tukfu* (Lias) (*tukbu*- Kankanaey) – A shrub whose leaves sting when touched, causing itchy burning rashes. The rashes go away on their own after 2-3 days thus hunters don't really consider this much of a problem. He does not know of any first aid remedy. *Editor's note: tukfu – stinging nettle, English.*)
2. *Kamilin* tree – Its sap causes swelling and painful blisters if it touches the skin. This also heals on their own after some days.***

CHAPTER 11

FAMILY'S HEALING PARTNER

Story by Phylin Wa-ay
Documented by Sixto Talastas

Phylin Wa-ay, 34, a native of Guinaang, Bontoc, Mountain Province, and a resident of Pinsao Pilot Project, Baguio City, shares her family's healing experiences with her 74-year-old neighbor, Lydia Culos, known as Baket Culos in their community. Lydia is a native of Besao, Mountain Province, and resides near the Pinsao National High School where she works.

Auntie Culos, as we call her, is well known in our barangay, having served as a *tanod* and as a *kagawad*. She is also an *in-ilot* (a traditional healing massage practitioner) and *in-apok (a local shaman).* She performed healing sessions with her constituents suffering from different ailments while simultaneously performing government duties. After her stint in the barangay, she spent her time looking after her family and continued treating various ailments for people from different places.

I am a mother of 3 boys; one is still a baby and the other two are twins who are in grade 4. Whenever my twin kids become ill, I take them to Auntie Culos.

For prolonged cough and colds, she performs 'ilot' (traditional healing massage) mostly on the back. Additionally, she recommends the use of medicinal plants like lagundi, ashitaba, oregano, and lemon for treatment and

*In – apok – Guinaang , Bontoc term for Spiritual Diviner and Healer or local shaman, like the Mensip-ok of the Kankanaey of Mountain Province.

teaches me some few basic processing techniques for these plants. For example, lagundi, oregano, and ashitaba can be used as tea and can be taken as often as desired, like water. However, Mrs. Culos doesn't provide the exact recipe or the exact dosage; it's up to me to determine these depending on the severity of my children's cough or colds. For the lemon, the juice is better mixed with honey before drinking. For bathing the kids, water from boiled lagundi is recommended.

For unexplained fevers of my children, Auntie often diagnoses these as caused by strained muscles, ligaments, or tendons and treats them accordingly. The diagnosis always confirms my suspicion about the causes of the fever.

In all her '*ilot*' sessions, Auntie Culos applies generous amounts of *lana* (coconut oil) to the affected body parts to make the massage smoother and help keep these areas warm. After the *'ilot'* sessions, my children start to heal soon.

Aside from being an '*in-ilot'*, Auntie has spiritual healing abilities, or '*in-apok*, as we, the Guina-ang people, call it. When she sees her patients, she assesses them not just physically but also spiritually. Sometimes when she performs '*ilot*', she couples it with healing prayers invoking "*Apo Dios*" or God. The prayers include calls for the affected body parts to heal and for the general health and wellness of the patient. Occasionally, she burps while performing *ilot*, sometimes very long, amusing those present. In other places, the same type of healer also experiences burping or yawning while performing healing.

When she diagnoses an ailment as being caused by a curse, hex, or spiritual trauma, she recommends the patient conduct a ritual in their own custom and tradition, such as butchering a chicken as part of the treatment procedure.

In 2016, I was elated to learn I was pregnant with my third child. However, after just a few weeks, I had a miscarriage. After a year, when I felt ready for another pregnancy, I consulted Auntie Culos about my previous miscarriage. After examining me, Mrs. Culos said I had a low ovary causing the miscarriage, just as I suspected. Mrs. Culos then

performed *'ilot'* on me, deeply pressing, manipulating my stomach and beneath, repositioning my ovary to its original place. We had a total of 8 *'ilot'* sessions lasting about a year in 2017.

In 2021, after working towards our next child for a long time, I got pregnant again. Now, my husband and I happily take turns looking after our third child, a healthy baby boy. Although it took around 4 years before I gave birth again, I believe our *'ilot'* sessions with Mrs. Culos helped me conceive. It was not just me that Mrs. Culos helped; there were others from around the community and beyond. We heard other success stories from random people in our community regarding Mrs. Culos' '*ilot'* of the ovary and subsequent conception.

One such story is that of a couple from another barangay, who regularly went to Mrs. Culos for *'ilot'* to reposition the woman's ovary. This woman used to have miscarriages like me but after some '*ilot'* sessions with Mrs. Culos, the woman conceived a baby. This is one of the stories that encouraged me to seek treatment from Mrs. Culos.

CHAPTER 12

A HEALER'S JOURNEY FROM THE VILLAGE TO THE CITY

(URBANA OF KIAS)

Story by Urbana Casiwan
Documented by Sixto Talastas

Urbana Casiwan, 60, is an Igorot Kankanaey born and raised in sitio Dandanac in barangay Tamboan, Besao, Mountain Province. She is a mang-ngilot, an indigenous healing massage practitioner. She comes from a family of mang-ngilot – her mother, Dominga Posdo, and her maternal grandmother were both mang-ngilot. Urbana observed how her mother treated members of the community and eventually learned her techniques. At age 30 years old, she started practicing "ilot," or therapeutic/healing massage, with a few patients.

In 1991, she relocated to Baguio City to avoid the dangers brought about by intense militarization in their area, where people were often suspected as being rebel supporters and were prevented from going to their farms. In Baguio, she found city life challenging and had to be practical. She used her skill as a *mang-ngilot* to make a living. She started doing *ilot* home service around their area in Kias, and later expanded her services around the city. She also worked at various massage clinics in Kias until she became a household name there.

She learned some modern massage techniques from other *mang-ngilot*. In 2010, she joined and graduated from a Massage Therapy Training sponsored by the City Government of Baguio. The training included Thai, Shiatsu, and Swedish massage techniques. A few years later, she opened her own massage clinic in Kias.

Kias is a small commercial area at the boundary of Baguio and near the

mining areas of Itogon, Benguet. Miners often stop there to purchase supplies, and some of them patronize her clinic. Urbana spends more time and effort on miners, as their bodies are hardened by back-breaking work. Their most common complaint is '*sakit ti siket*' or lower back pain.

In Besao, where they farmed and produced their own food, Urbana and her mother did not accept cash payment for their '*Ilot'* healing, as it is part of Igorot tradition to help the sick and needy. In Baguio, however, because it is her livelihood, Urbana accepts payment in kind or in cash. She doesn't receive these directly in her hands; the patient should place the payment on the table. Urbana will only handle the cash after clinic hours. She explained that there were instances in the past when she accidentally or absent-mindedly received the cash payment with her hands, and she felt that her power to heal is diminished. In keeping with indigenous tradition, she doesn't discriminate between patients who can pay and those who can't. She treats everyone, even if the patient has nothing to give.

She has developed her own *ilot* style, especially since many of her clients in Baguio are just "nabannog" (tired or exhausted). Sometimes, she lets the client soak their feet in warm water with salt until the water cools. Afterward, she dries their feet and performs the *ilot*. She finds it easier to do *ilot* because the warm salt solution relaxes the muscles.
Urbana can heal *naligus ay siki* (twisted ankle or sprain), muscle and joint pains, over-fatigued muscles, and other ailments. She can also heal prolonged cough and colds. For cracked bones, she advises the patient to see a specialist. When necessary, she combines *ilot* with the use of medicinal plants (refer to Medicinal Plants in Dandanac, Besao.)

As a *mang-ngilot*, Urbana knows that she may get something from her clients that could make her unwell, so she cleanses by rubbing her fingers with salt after the *ilot*, or if salt is not available, with vinegar.***

CHAPTER 13

SIBLING LESSONS: A BROTHER'S GUIDING HAND

(DARIUS OF AMBASSADOR, TUBLAY, BENGUET)

Story by Darius Puyao
Documented by Sixto Talastas

> *I am Darius Puyao, 54, a native of Lias, Barlig, Mountain Province, currently residing in Coroz, Ambassador, Tublay, Benguet. I am a mang-ngilot or indigenous healing massage practitioner. I do home service as I don't have a clinic. I treat people with pilay (minor dislocations or sprains), inflamed muscles, trapped nerves, stroke, palsy, and seizures. My knowledge and skill in ilot , or indigenous healing massage, came from my mother, Benita Puyao, a local mang-ngilot in Lias, and from my younger brother Alvin, also a mang-ngilot in Baguio.*

I inherited my mother's skill in ilot when I was still a child. When she performed ilot in our home in Balatoc, Itogon, Benguet, I would watch her and sometimes practice it on my friends. My mother used only her thumb to press and manipulate, and she massaged only on the injured part of the body. In 2021, during the pandemic, my brother Alvin convinced me to practice hilot as a livelihood. He taught me different kneading strokes that he had developed himself. He showed me how to use all my fingers and to apply hilot on the nearby body parts of the affected area to stimulate better circulation of blood and fluids.

Since then, I have developed my own style of hilot. It is similar to Alvin's, but in addition to what he taught me, I have incorporated some kneading strokes that I learned from my patients. Like my brother, I also studied human anatomy to understand how the bones, muscles, ligaments, and nerves are connected and function. This knowledge helps me determine which part to move or manipulate and how to do it effectively.

My first hilot experience: fish bone stuck in the throat

I was a Grade 3 student in Balatoc, Itogon, Benguet, when a man came looking for my mother to remove a fish bone stuck in his throat. Since my mother was away, he asked me to treat him instead. I kneaded his throat and neck and later, because I could not find the coconut oil my mother used, I spit on my hand and massaged his throat and neck. After a while, the fish bone was gone.

Use of ginger

I use ginger patches on swollen parts of the body but first, I perform hilot on the affected part using a generous amount of lana or coconut oil.

Procedure for ginger patch:

- Wash a handful of ginger and slice it thinly.
- Place the slices on the affected body part.
- Wrap the area with a bandage or clean cloth.
- Let it stay for one day, and avoid taking a bath during this time. The ginger helps in the faster healing of injuries.

Treating stroke patients

In dealing with stroke patients, I fulfill four roles: *mang-ngilot*, physical therapist, caregiver, and counselor.

- *Mang-ngilot*: I perform soft tissue manipulation to stimulate recovery.
- Physical therapist: I conduct speech exercises, walking exercises, and whole-body exercises. For example, in walking therapy, the healthy leg should lead the step followed by the paralyzed leg. I avoid recommending physical therapy gadgets that may add a financial burden to the patient, so I just teach them effective exercises that they can perform even when I'm not around.
- Caregiver: I assist with challenging movements, feeding, and even changing diapers when necessary.

- Counselor: I consistently encourage the patient to be strong-minded and to always think positively.

Importance of mobility

I always advise my patients that if the injury is not serious, they don't need to rest completely. They should move around and continue their usual daily chores to keep the affected body part active. However, for serious injuries, they must rest for an extended period to give the damaged body cells time to recover.

Challenges in Performing *Hilot*

There are challenges in my *hilot* practice. One is when the patient has strong energy, it can diminish my own energy. Another challenge arises when I attend to many patients consecutively, leading to exhaustion.***

CHAPTER 14

BLENDING INDIGENOUS WISDOM AND MODERN HEALING MASSAGE

(JULIO OF TAWANG, LA TRINIDAD)

Story by Julio Coyasan
Documented by Sixto Talastas

Julio Coyasan, 59, a native of Suyoc, Mankayan, Benguet, and now a resident of Dengsi, Tawang, La Trinidad, Benguet, is a 'mang-ngilot', or indigenous healing massage practitioner. He hails from a 'mang-ngilot' family; his grandmother, aunt, and mother were all 'mang-ngilot'. He first learned from them and then further developed his skill by observing other hilot practitioners. He also studied modern massage therapy and exchanged knowledge with the blind hilot - massage practitioners in La Trinidad. Today he incorporates all his knowledge into his healing sessions.

I have been doing *hilot* for more than 40 years. I come from a family of ‘mang-ngilot’. My two lolas, the mother and aunt of my mother, my father and mother, and my aunt are all *mang-ngilot*. I have a relative who is a *mang-ngilot* in every sitio in Taneg, Mankayan, the barangay adjacent to Suyoc. Our house was like a clinic, always with people coming for treatment, even pregnant women.

"When you sleep and lie on your side, always lie on your right side so that the heart’s pumping will not be impeded. If you turn and lie on your left side, keep it brief and then switch back to lying on your right," my mother or lola would tell the pregnant women.

I began practicing massage therapy at a young age, around 12 or 13 years old while in grade 5 or 6. It all started with my uncle Roque Itsok, an expert welder of bridges, who would call me over to his house to perform 'kulis' and then massage and press his feet. In return, he would

always give me peanuts as a snack. It was in their house where I found a book on human anatomy that sparked my interest in healing body ailments and deepened my knowledge on what parts of the body to manipulate.

When I was old enough, I started a massage clinic in Pico, La Trinidad, Benguet. I was a skinny bachelor young boy at that time. Nowadays, I have no clinic and I switched to being an on-call massage therapist.. Sometimes when I have no massage appointment, I work as a driver for hire or a driver/guide for tourists.

The ailments that I treat include sprain, *naligasi* (dislocation), stroke, *pannateng* (colds), *uyek* (cough), *trangkaso* (flu), and *nabulol-dila* (speech impediment), among others.

The massage techniques that I utilize include the traditional ones that my family taught me and modern techniques that I read in books and learned from modern technique practitioners. Traditional techniques include the *kulis* (a couple of wooden sticks are used to scratch or knead the soles of the feet) and traditional healing massage and ventusa. Modern techniques include Swedish, Shiatsu, and Thai. I also use a massage machine.

Aside from the above-mentioned techniques, I developed other ways of healing like walking on pebbles, covering the client with sand, warm bath, body manipulation techniques, massage with medicine plant patches, and when my client is far away, I do energy healing with prayer.

Places that I have visited for healing includes Laoag, Abra, Tarlac, Manila, and Batangas.

Using healing massage:

A. Naligasi (Dislocated ankle) #1

One time during my teen age years in Suyoc, an uncle of mine suffered ankle joint dislocation. He came to our house limping and asked my mother to treat him, so my mother performed hilot on him. While

watching them, I felt pity towards my mother whom I saw was getting tired.

So I said to mom, “Syakun, Nanang.” (“Mom, let me.”)
And so, I got hold of the foot, pulled it hard fast, twisted it hard, and pushed it hard fast. There was a sudden popping sound and my uncle cried in pain. And then he slowly moved his foot and stood up.

“Uuy! Mayat diyay inaramid mu ah! (“What you did was good!”), he exclaimed.

The dislocated joint was returned to its normal position.

B. Naligasi (Dislocated knee) #2

This happened in November 2019 during the Adivay in La Trinidad, Benguet. *(Editor’s note: The Adivay is the month-long festival of Benguet Province held annually for the whole month of November.)* The day before the street dancing event, a group of students were practicing for their dance performance the next day. Among them was a 13-year-old girl who twisted her knee. Her family brought her to the Benguet General Hospital, also in La Trinidad. The doctor there recommended a surgical operation on her knee. They told the doctor they would return the next day as they have to prepare the money for the operation. Then they went home. Then her father recalled that his older brother, who also had an accident before and had a dislocation on his feet, was healed by me, so somehow, they managed to contact me.

When I got to their house, I saw a tall chubby girl lying face down on a baking table, with her leg obviously twisted and the kneecap was out of place. What I saw was like impossible to treat so I recited a quick prayer in my mind then I asked the girl,

“Do you like to be operated on?”
“No uncle! I don’t like to be operated on, please!”

Her answer gave me confidence to treat her. I performed *hilot* while we talked about what happened to her. When the affected muscles had become a little softer, I pulled her leg and there was a popping sound and she cried aloud in pain. The knee joint was placed back to its normal position. I continued to massage her knee to make sure it was really back to its normal position.

And then I gathered her family members around her: her father, mother, and brother, and together, we prayed and thanked the Lord. Soon, she got up and managed to stand. We all cried in happiness.

The girl said, “Mabalin samet nu bigat ket maki-sala ak!” (“Maybe I can still dance tomorrow!”)

“Ngem nu agsala ka, kargaam ti pads.” (“But when you dance, put some pads.”), I replied.

They thanked me profusely, asking me how much my service was, I replied that it is the Lord that healed her, I am just an instrument. I asked only a small amount to cover the fuel of my car, which they gave, together with lots and lots of bread, which were baked by the father. The next day, I learned that the girl managed to dance during the Adivay street dancing, but with her knee bandaged.

Treating a stroke patient:

A. Use of Pebbles

Around 1985, I was called to Taguig, Metro Manila to perform *hilot* (healing massage) on a retired army officer who suffered half-body paralysis due to a stroke. In addition to *hilot*, I requested that the family build a pathway solely dedicated for his walking therapy. The pathway, which I designed, had railings made of lumber for him to hold onto while he is walking. I specified that this pathway be filled with pebbles so that the soles of his feet will be stimulated with every step he took. I explained to them that in our place in the Cordillera, sometimes some people will walk barefoot so that their soles are massaged, and the reflex points stimulated. They all liked the idea so when it was finished,

it was not just the patient who walked on it, but even other family members who happily joined the walk.

After our *hilot* session in the morning, we would support him as he walked back and forth the pathway. Whenever he felt tired, we let him rest until he had rested enough to continue. This session is done every day and repeated many times each day.

I took weekly trips to visit them in their home in Taguig, stayed there for a few days then return to La Trinidad. When I was not there, his family would be the ones supporting him during his walking therapy sessions.

My patient had a daughter whose boyfriend would sometimes visit and assist me. We became friends. I noticed that he was rather shy around her girlfriend's father because the father was very strict.

One time he asked me, "Pwede bang turuan mo ako ng paghilot? Para kung wala ka ako ang manghilot sa kanya para magpa-lakas ako sa kanya!" ("Can you please teach me how to do *hilot* (massage)? So when you're not around, I will do it instead and I'll be able to make a better impression on him!")

So I taught him how to do massage and how to do *kulis*. My patient gradually became better and so the frequency of my visits started to decrease until I finally stopped visiting. After some time, I heard that his daughter and the boyfriend got married and started a family.

B. Use of Sand

More than 15 years ago, I treated a stroke patient, a senior citizen, with the use of sand in the beach and the usual healing massage. The patient, his family, and I, went to a beach in San Fernando, La Union. I told the family to bring a shovel as we will cover ourselves with sand. When we got to the beach, the family members of the patient didn't like to be covered in sand.

They said, "Awan met sakit ko!" ("I don't have ailment!")

I explained to them that this kind of therapy is beneficial not just for stroke patients but for healthy people as well. It is good for the heart as it regulates the blood and water flow within the body. The patient liked the idea, so he went first; we covered his body in sand, and I was next. Soon, the other family members were swayed and followed suit. The patient was covered for 45 minutes while I took only 30 minutes because I needed to prepare something.

“Ay wen inya! Midyu mayat ti rikna!” (‘It’s true! It feels good!”) they said after they finished and cleared themselves of sand.

After this, the patient was given a warm bath using water from the faucet. Then I performed *hilot* – massage on him. After the *hilot*, I told him not to go back to the sea water so that his body, already warmed by the *hilot*, will not be cooled off by the water.

The event was not only about healing but was served as the first family reunion for the patient and his children in a very long time. Due to the sickness, they had a great family bonding experience.

C. Making the Mind Stronger: #1

In treating stroke patients, the number one healer should be the patient himself or herself. That’s why I always challenge my patients to make their minds stronger.

One time, a close friend of mine suffered a stroke and became bedridden for a while. He owns a vast tract of vegetable gardens in Benguet and three public utility vans plying the Halsema hi-way, and he has a young wife. I visited him in their house and performed *hilot.* We prepared hot water for him to soak his feet in it. When the water was cooled off, his wife took the water away.

While she was out, I said to my friend, “Kitam a, masapul agpapigsa ka. Nu haan mu tulungan ti bagim ket baka matay ka. Ubing pay ni baket mu, adipay agasawa manen. Bagiyen da jay garden mu, ken imaneho da dagijay van mu!” (“Beware, you must make yourself strong. If you do not help yourself you may die! Your wife is still young, so she may

marry again. Another man will own your garden, and drive those vans of yours!"

I visited him again the next day for our next session. I was helping my friend to a sitting position and his wife was at his back, when suddenly, my friend tried to stand. Slowly, he struggled very hard to stand. His wife was shocked. I was amazed. My friend continued, even if it seemed very difficult, until finally, he was standing. We were full of joy at that time. Seeing a bed-ridden person suddenly stand is just amazing. I believe that the warning I gave my friend the day before challenged his mind to heal his own body.

Making the mind stronger: #2

One patient suffered a mild stroke and I was called to treat him. He was a politician. Every morning, after our *hilot* session, somebody would assist him with a walking exercise. I observed that he was strong willed.

He jokingly said, "It's all in the mind…sometimes... I must get well for the sake of my constituents!"

Over the course of four months, utilizing a combination of traditional, modern, and my own techniques in our sessions which we held thrice a week, the patient recovered. After some time, I learned that he won in the elections.

D. Tongue Massage for Nabulol (Slurring):

When a stroke patient has impaired speech, I will massage the tongue. Here's how I do it. I prepare warm water and a clean towel, which will serve as a glove. Using the towel, I will take hold of the tongue and slowly pull it out and swing it from side to side. My other hand will also massage the lower jaw area and the area just above the Adam's apple. While pulling the tongue, I will push the areas under the jaw. I will also massage the tongue by continuously pressing it on all sides. For first-time patients, pulling the tongue will produce a popping sound and result in slight bleeding because a stagnant muscle is suddenly torn apart. It is not a cause of worry, though, as it is very minimal and part

of the healing process.

Aside from tongue massage, I instruct the patients to always talk and always exercise their tongue, mouth, jaw, and neck.***

CHAPTER 15

PAGGAMOT SA PAMAMAGITAN NG HILOT AT HAWAK

(BETTY NG SAN VICENTE)

Kwento ni Beatriz Aliwana
Isinulat ni Sixto Talastas

“Si Beatriz Aliwana, 54, ay isang katutubong manggagamot na nakatira sa Sitio Tenerrace, San Vicente, Baguio City. Ipinanganak siya sa Baguio Gold Mines kung saan nagtrabaho ang kanyang tatay. Ang kanyang mga magulang ay taga Sagada, Mountain Province. Kasalukyan rin siyang kagawad ng barangay San Vicente. Isa siyang mang-ngilot o manghihilot. Nakakagamot din siya sa simpleng paghawak lang. Gumagamit din sya ng mga halamang gamot na nasubukan niyang may bisa. Kaya niyang manggamot sa mga sakit na may kinalaman sa espiritu ng mga yumaong tao at espirito ng kapaligiran. Isa rin syang “medium” - maluglugan o sinasapian ng mga espiritu, para makipag-usap sa mga tao. Kung kailangan ang ritwal, hindi siya nagriritwal mismo pero nagririseta siya ng ritwal ayon sa tradisyon ng lugar ng pasyente.

Kaya niyang magdiagnose o malaman ang mga sakit sa pamamagitan ng paghawak sa pasyente, pagbasa sa nakasulat na kumpletong pangalan ng pasyente, o sa simpleng tingin lang. Isang paraan din niya ng pag-alam ay ang paggamit ng coupon bond, lalagyan ng lana o coconut oil ang likod ng pasyente at idikit ang coupon bond saka tatanggalin. Ang mabubuong larawan sa papel ay babasahin o i-e-interpret niya.

Sabi din niya na meron siyang third eye o nakakakita ng mga

pangitain o vision o bagay na hindi nakikita ng karaniwang tao. Minsan nakakakita sya ng kasalukuyang nagaganap sa ibang lugar, minsan naman ay merong naipapakita sa kanyang isip na pangyayari sa nakaraan na siyang sanhi ng sakit ng pasyente. Minsan nakikita din niya dito ang mga gagawin para malunasan ang karamdaman ng pasyente.

Ang karaniwan niyang ginagamot ay mga karaniwang sakit ng mga bata tulad ng sipon, ubo, at pilay, at ang mga sakit na hindi kayang gamutin ng mga duktor.

Ayon kay Beatriz, ang pilay ay karaniwan sa mga bata. Ito ay na"twist" o na-strain o naipit na muscle o maliliit na nerve o blood vessel na kailangan ibalik sa puesto niya para mahusay ang daloy ng dugo. Ang karaniwang simtomas ng pilay ay iyak na iyak ang bata o kaya lagnat. Nakukuha ang pilay kung mali ang posisyon ng pagtulog ang bata, palaging nasa walker, bigla o malakas na paghatak sa kamay or katawan ng bata.

Kabilang din sa mga kaya nyang gawin ay magpataas ng matris para makatulong sa pagbubuntis. Nagpapayo din sya sa mga kabataang naliligaw ng landas. Isa rin siyang marriage counselor; nagpapayo siya sa mga mag-asawang hindi magkaintindihan.

Para kay Beatriz, ang lahat ng mga kaalaman at nagagawa niya ay "binigay na gifts ng Panginoon" sa kanya. Pati ang ilot ay natural na nagagawa nya at hindi niya kailanman inaral. Alam niya kung kailangan i-refer ang pasyente sa duktor. Pag ang pasyente ay nalaman nyang nanga-ngailangan ng operasyon ay ipapayo niya na magpa-duktor.

May lugar sa tabi ng bahay nila na kung saan tinitignan ni

Beatriz ang mga nagpapatulong. Puede rin siyang pumunta sa mga bahay – bahay para manggamot kung ang pasyente ay hindi makalabas, pero hanggang sa San Vicente lang.

Unang karanasan ko sa paggamit ng hilot sa paggamot:

Minsan, sa Pines City Doctors Hospital, may bagong dating na pasyente na nakahiga lang, hindi maka-upo o maka-tayo, isa syang lalaking binata naipit daw ng sasakyan at medyo nababaluktot ang spinal column. Nakita ko yung lalaki na nahihirapan kaya nilapitan ko sila at inalok ko ng tulong.

Kinabukasan, may dala silang lana at dinahan-dahan kong hinilot ang likod ng pasyente, itinutuwid ko ang kanyang mga buto sa spine. Tumulong din ang pasyente, itinuro nya ang mga dapat hawakan.

Araw-araw ang paghilot ko sa kanya Pagkatapos ng isang linggo ay nakaupo na sya. Hindi makapaniwala ang mga duktor sa mabilis na paggaling nya. Tinuloy-tuloy namin hanggang paunti-unti ay nakatayo at nakalakad, hanggang sa makalabas na sya ng ospital. Pagkalabas nila ng ospital, hinanap ako sa ospital ng kanyang mga magulang, labis ang pasasalamat nila, kung hindi daw dahil sa akin, baka hindi na daw gagaling ang anak nila.

Yun ang simula ng paghilot ko.

Hawak

Minsan dito sa Baguio, nakasakay ako sa jeep at may nanay na may kargang sanggol na iyak ng iyak.

“Pwede bang hawakan ko ang sanggol?” tanong ko sa nanay.

Hinawakan ko ang sanggol sa ulo at bigla itong tumigil sa pag-iyak. Ito ang una kong karanasan sa paggamit ng simpleng paghawak sa paggamot.

Nagpa-anak

Minsan, inabot kami ng gabi sa trabaho sa barangay. Pagdating ko sa bahay, may babae na naghihintay sa akin, tulungan ko daw manganak ang anak nya. Dito rin sila sa barangay San Vicente nakatira at kanina pa daw umaga naglabor ang anak. Nagalit ako kaya kasi bakit hindi na nila dinala sa ospital. Natapos ko midwifery pero hindi ako lisensiyado.

Pagdating namin sa bahay nila, nakita ko ang isang batang babaeng buntis na nakahiga sa kama, nalaman kong katorse anyos lang pala sya. Tamang-tamang pagpasok namin sa kwarto ay lalabas na ang sanggol kaya pinaanak ko na. Pero hindi ko pa pinutol ang pusod dahil hindi ako lisensyado, kaya iniwan ko muna para tawagin ang lisensyadong midwife ng barangay. Tumakbo ako ng mabilis at bumalik kami agad pero di pa lumabas ang bahay-bata.

Pumuwesto ako sa may ulunan ng batang ina at sinabihan ko sya,

“Kagatin mo ang ngipin mo! Pag sinabi kong tulak ay tumulong kang umiri ha para didiinan ko ang tyan mo! One, two, three, tulaaakk!”

Diniinan at itinulak ko ang tyan niya at sabay na umiri ang batang ina. Biglang lumabas ang inunan at ang namuong dugo. Nakahinga ng maluwag ang batang ina. Binalot namin ng mga lampin ang sanggol at kasama ang ina ay dinala namin sila sa ospital para duon ipaputol ang pusod.

Pagtuturo at pagpasa ng mga kaalaman

Kaya kong makita kung ang tao ay may kakayahang mang-gamot. Noon, may mga tinuruan akong mga tao at naging mga alalay ko sa panga-gamot.

Sa paghilot ay itinuturo ko ang mga paraan ng paghagod at ang mga bahagi ng katawan na dapat hagurin. Pero kung sanggol ang may pilay ay hindi ko na pinapahawak sa kanila kasi baka magkamali pa sila. Pag natuto na sila at kaya na nilang magsarili, ineengganyo ko silang mag-sarili. Kaya may mga tinuruan ako noon ang nagsasarili na ngayon.

Pero pag may pasyente sila na nanga-ngailangan ng ritwal, ay puede akong tumulong.

May mga suliranin din sa pagtuturo at pagkuha ng mga kasama at alalay. May ginang akong tinawag noon na dati ko ring pasyente, nakita ko na merong siyang malaking potensyal mang-gamot at nakita ko na talagang gusto nyang matuto, kaya tinuturuan ko siya at lagi kong kasa-kasama pag nagho-home service ako. Ang problema ay laging nagseselos ang kanyang asawa dahil palaging gabi na kami kung umuwi at iba't-ibang lugar ang pinupuntahan namin. Dahil dito ay lagi silang nag-aaway na mag-asawa. Kinausap ko pa yung mister pero di naglaon ay ganun pa rin hanggang sa huminto na lang sya.

Meron din akong tinuturuan at kasa-kasama ko sila sa mga home service ko. Nung tumagal ay napansin ko nagkaka-mabutihan yung isang binata at yung isang babaeng may asawa na, dahil lagi silang magkasama ay natutukso sila sa isa't -isa. Kaya pagkatapos kong kausapin sila ay hindi ko na sila sinasama.

Ang dalawa kong anak na dalaga naman ay hindi ko tinuturauan pero nakitaan ko ng potensyal ng panga-gamot. Minsan pag umuwi ako na pagod ay nagpapa-masahe ako sa kanila at kaya naman nila, pero ayoko sana munang manggamot sila, mag-graduate muna sila at magtrabaho bago sila manggamot.

Mga hamon sa pagga-gamot:

Minsan, may mga pasyente na hindi maka-intindi, pag dumating sila, gusto nila na maasikaso agad sila kahit hindi naman emergency ang sakit nila. Yung iba, sasabihin na nanggaling pa sila sa malayo kaya gusto nilang asikasuhin sila agad para maka-uwi daw sila ng maaga. Ipinapaliwanag ko sa kanila na may pamilya din ako na asikasuhin, may duty ako sa barangay at kailangan kumain din ang aking pamilya. Karamihan naman ay makaka-unawa, pero may ilan na hindi maka-intindi, kahit anong paliwanag mo ay ipipilit ang gusto. May iba pa nga na pag hindi mo napag-bigyan ay ichi-chismis ka nila. Kaya naman ibibigay ko ang aking numero para bago sila pumunta sa akin ay kumontak muna sila para itaon namin sa oras na bakante ako.

Meron din isang lasing na lumapit sa akin, sabi nya,

“Demonyo ka! Kademonyohan iyang mga pinagga-gawa mo!” (“You’re a demon! What you’re doing is evil!”)

Sinabi pa naman niya yun sa harap ng maraming tao. Ako naman ay nagpapaliwanag ng mahinahon kahit nagagalit na ako, pinakalma ko ang isip ko para hindi ako ma-high blood. Nagsorry siya noong hindi na siya lasing at nagpapatulong ang mga kamag-anak niya sa akin.

Payo sa mga pasyente

Sinasabi ko sa mga taong nagpapatulong sa akin na unahin muna ang paniniwala sa Dios at medicina bago ang kultura.

Kung anuman ang gusto ninyong itanong ay tumawag kayo sa akin sa 09088573425.***

CHAPTER 16

NATURAL HEALING MASSAGE

(ALVIN OF BAGUIO)

Story by Alvin Puyao
Documented by Sixto Talastas

I am Alvin Puyao, 50, born in Lias, Barlig, Mountain Province, and raiiased in Balatoc, Itogon, Benguet where my father worked as a miner. I am a mang-ngilot, or traditional healing massage practitioner, based in Baguio. I use a combination of traditional ilot, which I learned from my mother, Benita Puyao, a traditional mang-ngilot in Lias, and my own style of ilot, developed through studying the cases of my patients. Sometimes, I also use other healing methods in addition to ilot, like the use of suction cups to remove cold from the body (modern ventusa) and ginger as padding to affected parts of the body.

My first patient was a puppy

Around 1984, when I was just 9 years old, I performed my first healing massage, and it was on a puppy. My friends and I were playing basketball when a limping and crying puppy wandered onto the court. After our game, I decided to try ilot on the puppy. I was not sure if I could heal the dog but still, I tried. It's good that the dog was tame and didn't bite when I got hold of his leg and started the ilot process. The dog cried in pain as I slowly massaged the affected foot but didn't bite me. After a few minutes, I released the dog, which then walked away normally. We were all amazed that ilot could heal an injured dog.

Fishbone in throat

Soon after, people began asking me to treat them. Many Ilocanos would call on me for treatment. They love fish and some would have a fishbone stuck inside their throat. I would massage the throat downward

continuously until the fishbone was released and swallowed.

My mother was a known *mang-ngilot* (traditional healing massage practitioner) in our place so patients would show up at our house to ask for treatment. When mother was away and the injury was mild, they would ask me for help.

I almost stopped performing ilot in high school due to the influence of my barkada (friends). I only performed *ilot* on my friends when they are injured.

Developing my own style

After my marriage in 1999, I went to Macau, China, to work in a fitness gym. After work, my Filipino co-workers and I would sometimes roam around and visit different places, and this is where we met a Filipina managing an antique shop. The place became one of our hangouts after work. She shared that she was bringing her young son to the hospital weekly due to recurring fever.

I told her, “Kung gusto mo, tingnan ko yung anak mo, baka may pilay kaya laging nilalagnat. Kung may pilay siya, subukan kong hilutin at baka sakaling gumaling.” (“If you want, I would like to see your son. He may have an injury that’s causing the recurring fever. If he has an injury, let me try to massage him and he might be cured.”)

She let me look at her son and true enough, I felt a slight injury. I treated the kid, and he felt relieved. Afterwards, she paid me. It was the first time I was formally paid for my ilot service. After a few days, the child fully recovered, and they stopped going to the hospital. This experience made me realize that traditional ilot was not enough. That was when I decided to learn more about healing massage.

Editor’s note: Alvin defines pilay as soft tissue injury which could manifest as recurring fever. This could be caused by yanking the arms of the child such as when changing his clothes, or when carrying him. Pilay could also occur when a child falls. There is no obvious injury but the muscles or nerves or blood vessels may slightly be injured.

After six months, our work contract expired, and we returned to the Philippines. Later, I and some townmates applied to work in Hongkong, but the promised job was fake. Fortunately, some Filipinos helped us find odd jobs. However, these were not permanent and often times I was jobless, so I decided to do *ilot* for fellow Filipinos to make ends meet. I developed my own style of healing massage. I started adding massage strokes to the traditional one I learned from my mother, using all my fingers instead of just the thumb.

After a few months, I returned to the Philippines. Because I had no regular job, I decided to make healing massage my livelihood. I joined a massage clinic and also did home service.

One time, when I was still starting as a *mang-ngilot* in Baguio, I went home to Lias. My mother was not feeling well so I performed *hilot* on her. She said, “Haan met gayam nga traditional ti ilot mo. Mabalin ka gayam nga agsingir nu kasta.” (“Your *ilot* is not traditional after all. You can ask for payment if that is the case.”)

In 2007, my father also experienced my *ilot*“ and was pleased.

“Tattak lang napadasan ti kasta nga panag-ilot a” he said, “adu ti napadasak nga mang-ngilot ngem haan nga kasta.” (“It’s only now that I experienced this kind of *ilot*. I have tried many *hilot* – massage practitioners but none like this.”)

In 2009, after establishing a small loyal clientele, I opened my own massage clinic.

My own style, the natural healing hilot

Compared to my mother’s traditional ilot, which uses the thumb to press and knead, I use all my fingers for a better effect. While my mother treats only the affected body part, I include other parts, following the muscles and nerves that may be involved.

I didn’t study modern massage techniques like Swedish, Shiatsu, or Thai. Instead, I continuously self-study to better manage injuries and

ailments. I do this every time I treat a patient. I also study the complex systems of the human body using anatomy charts, which now hang on the walls of my clinic. These charts have greatly helped me learn the structure of the bones, tendons, ligaments, and muscles, and how they operate. They also helped me learn the structure and connections of the nerves, veins, and arteries, and the circulation of blood and water in the body.

By following the muscles, nerves, and other parts, I discover the connections and endings. Thus, I can locate the connections of soft tissues, allowing me to *hilot* another area of the body that is not injured which stimulates the flow of blood, water, or energy in the injured part and promotes healing. All these factors have further enabled me to understand how an injury may affect other parts of the body or how those parts may, in turn, affect the injured part. This is my own style, which I call 'natural healing *hilot*'.

Use of ginger as patch

I also use ginger in some healing sessions, particularly for stiff muscles causing severe pain. After performing *hilot* using generous amount of *lana* (coconut oil), I place thinly sliced ginger on the affected area and then wrap it with bandage. The ginger and *lana* keep the area warm, contributing to the faster healing.

Passing of my knowledge

After some years, I taught my younger brother Paul my style of *hilot.* He practices it on his family in Barlig, where he lives with my mother and other siblings. He also has the natural healing ability that runs in the family, so I just added my own knowledge. He is an elementary school teacher, so he doesn't really need to work as a *mang-ngilot* just to earn an income.

During the pandemic in 2020, I encouraged my older brother and the eldest of us siblings, Darius, to learn *hilot*. Like Paul, he also has healing hands that runs in the family, so I just added my knowledge. After a short time, he developed his own style of *hilot*.

Distant healing through prayer

Before the pandemic, in January, 2019, I suffered from an unknown disease causing severe pain from my lower back to my feet as if nails were being driven into my buttocks. Moving my feet was hard and painful. Different lab tests couldn't determine any disease. I took the drugs prescribed by the doctor but to no avail. It came to a point where I couldn't stand anymore and going to the toilet was an arduous task. The pain was excruciating and intolerable.

My mother suspected that my condition was "aramid ti tao" ("work of a person" meaning it had something to do with unseen forces) since the doctors couldn't determine my ailment and what was causing it. She suggested that we try the healing method of my uncle, Claudio Maton, her older brother, who is an indigenous healer, a *mangngagas*. Even if I didn't believe in this kind of illness causation, I readily agreed because I was so desperate that I will try anything to get well. She called my uncle who happened to be visiting my aunt in Balatoc at that time. Over the phone, my uncle asked about the circumstances surrounding my condition.

After a while he said, "Pasyentem metlang ti nangaramid." ("A patient did that to you.")

My mother's suspicion was confirmed. And then Uncle recited a prayer over the phone. I couldn't understand what he was saying as he was using old unfamiliar Lias words that I haven't heard of, especially since I grew up in Balatoc.

After the long phone prayers, I was amazed and grateful because I started to slowly feel better. The next day, I was able to walk slowly, although still difficult, and I was able to slowly drive my car. We did some rituals in Balatoc. After a few days I was totally healed.

Previously, I didn't believe in gamud (sorcery) and I didn't also believe in indigenous healers who could treat people affected by it. With my experience, I now believe in these other kinds of illnesses and other forms of healing using prayers and rituals. I believe that God let me

suffer this illness so I will recognize that there are other traditional healers. So now when I encounter patients like my case, I refer them to indigenous healers like my uncle.

FB and Tiktok Pages

I run a massage clinic in General Luna St. and offer home services. I also maintain a Facebook page, *Alvin Natural Hilot Thru Muscle and Nerves,* and a Tiktok page, *Alvinnaturalhealing,* where I showcase videos of my treatments.***

CHAPTER 17

MAN-UYAD (BONE SETTER)

(KAWELAN OF DONTOGAN)

Story by Rizaldo 'Kawelan' Amawan
Documented by Sixto Talastas

"Rizaldo "Kawelan" Amawan, 47, is a native of Lias, Barlig, Mountain Province. He is a man-uyad. According to Kawelan, man-uyad is a Lias term for a traditional healer skilled in both bone setting and soft tissue manipulation. In contrast, a mang-ngelot, is a traditional healer whose skill is limited to soft tissue manipulation. Soft tissues include muscles, ligaments, tendons, nerves.

Kawelan learned to perform *elot** by observing his father treating fellow townmates. His skills further developed when his father eventually taught him and his five siblings how to perform *elot*. Kawelan started practicing when he was around 10 to 11 years old. His first patient was Karub, a young man ten years older, who had twisted his ankle. Kawelan applied *elot* on Karub, and he soon recovered. Kawelan's reputation for healing spread quickly by word of mouth among the townsfolk, partly because his father was already a known *man-uyad*.

When his father was away working on the farms, rivers, or in the forest, the community would ask Kawelan to perform *elot*. Many years later, Kawelan's father stopped performing *elot* when his children were good enough to do it themselves

"It's too much if we all do *elot*. You yourselves can do it now." he told his children.

As years passed, Kawelan further honed his craft through experience. Presently, he can treat old and young people alike. Some of the

(Editor's note: *For simplicity, "elot" will refer to both bone setting and soft tissue manipulation in this story.)

ailments he treats include flu, *nanpiliw* (twisted ankle), *nan-ilus* (dislocation), *nachara* (blood clot), *oro-or* (headache), *putug mata* (painful eye), *putug fab-a* (tooth ache), among others.

Currently living and working in Baguio City, Kawelan still performs *elot* when fellow Lias townmates living in Baguio and nearby areas call on him for treatment. One difficulty in performing *elot*, he says, is the absence of *lana* (coconut oil) or any massage oil. Since he works in house construction as a carpenter – mason, he doesn't always carry *lana*. Massaging without using *lana* can be painful for the patient and harder for the practitioner because *lana* warms, moisturizes, and softens the skin, making the massage easier.

Kawelan can diagnose a broken bone or fracture just by touching the wound. For bone fractures, he doesn't manipulate the exact area of the fracture but touches and manipulates the surrounding areas to reposition nerves away from the cracks. According to him, if a nerve is stuck in a bone crack, it may be damaged and cause paralysis. He said that broken bones cannot be treated by *elot*, so upon determining that there is a broken bone, he immediately recommends the patient to go to the hospital.

Kawelan does not accept cash payment for his services, believing that doing so will have a negative effect on him. He recalls a time in Philex, Tuba, Benguet, when he was working on a house renovation for his sister who lives there. A lady neighbor approached his sister to treat her 15-year-old daughter who was injured from a fall. Her daughter suffered from pains in her hip and thigh, preventing her from walking. His sister recommended Kawelan as he is better than her. So, Kawelan treated the daughter. The mother offered some cash as payment, but he politely declined, and he went back to work on the house.

Unknown to him, the neighbor gave the cash payment to this sister, who accepted it without informing him and used it to buy meat for their lunch. After eating, he suddenly began experiencing pain in his hip and thigh, preventing her from walking. His sister recommended Kawelan as he is better than her. So, Kawelan treated the daughter. The mother

offered some cash as payment, but he politely declined, and he went back to work on the house.

Unknown to him, the neighbor gave the cash payment to this sister, who accepted it without informing him and used it to buy meat for their lunch. After eating, he suddenly began experiencing pain in his hip and thigh without any apparent cause. Suspicious of what might have happened, he asked his sister if she received any money from their neighbor. She admitted to taking the money to buy meat. Despite being older, he reprimanded her, explaining that he was now feeling pain similar to that of his patient. He reminded her of their family condition that if they accept cash payment, they will suffer the pain felt by their patient. Later that day, as he returned home after work, Kawelan was limping due to the pain. However, by the third day, the pain had disappeared on its own.***

CHAPTER 18

PASSING DOWN THE TRADE: A FATHER'S LEGACY TO HIS DAUGHTER

(RENATO AND CRISANTA BATOON)

Story by Crisanta Batoon
Documented by Sixto Talastas

"Crisanta Batoon, 40 years old, an Itneg from Tubtuba, Tubo, Abra, is a mang-ngilot, an indigenous healing massage practitioner. She learned her healing ability from her father Renato Batoon, who was also a mang-ngilot in their place. She started practicing ilot, or indigenous massage, when she was around 13 to 14 years old. Her first patients were her aunties, uncles, and grandfather in their hometown. Later, she treated other people too, developing her craft through her own experiences.

After high school, she went to Vigan, Ilocos Sur to work in a small food factory where they cooked *bagnet* (crispy pork cuts) and *longganisa* (pork sausage). There, she performed home service hilot on the side, treating mostly children.

One time in Vigan, a 6-year-old boy kid from Barangay San Jose in Vigan City suffered a twisted ankle while playing on a parked tricycle. The boy's family called on her, and she treated the child. She performed *hilot* on his ankle, feet, and soles. After 3 days, the boy's feet healed.

In June 2022, she went to Baguio and tried working in some restaurants, but her salary was small and always delayed. So, she decided to work at her aunt's massage clinic, Urbana's Massage Clinic, along Philex Road in Kias, Baguio. Here, she learned modern massage techniques like Swedish, Shiatsu, and Thai, from her aunt Urbana.

According to her, Swedish massage uses light and gentle strokes aimed at relaxing muscle tension. Thai massage involves pressing specific acupressure points and stretching to normalize body energy flow. Shiatsu uses finger pressure on specific parts of the body to restore balance and promote healing. Crisanta's indigenous technique, on the other hand, uses deep tissue manipulation and targets specific injured or tired body parts.

Like her father, she doesn't ask for payment from her patients but accepts anything they give her, whether cash or in kind.

She can treat the following body conditions:

- *Sakit ti bagi* (body pains)
- *Natikli or nateltel* (Itneg) or *napilay* (Filipino, Ilocano) (sprain or twisted soft tissue)
- N*aligu*s (twisted joint)
- Swollen muscles
- *Nalamminan nga bagi* (cold has crept into the body making one feel sick)
- *Uyek ti ubing* (cough in children)

In the following story, Crisanta shares some of her father's experiences as a healer.

My father, Renato Batoon, was an Itneg indigenous healer in our place in Tubtuba, Tubo, Abra. He passed away in 2019 at the age of 71. He performed healing in many ways: through '*ilot*' or indigenous massage therapy, medicinal plants, prayers and rituals. He could treat *natikli* (Itneg term for sprains or twisted soft tissues), *nagamud* (hexed), *kagat ti aso* (dog bite), *kagat ti uleg* (snake bite), chicken pox, among others. He didn't ask for payment but accepted anything that the patient voluntarily gave. He learned his healing ability from his grandfather and passed down some of it to, us, his children.

When we were still children, our father shared that he had some *ansisit* (dwarfs) as friends. He didn't mention when his encounter with the ansisit began or if they were guiding him, but he did say that he sometimes played with them. Even I would sometimes dream of playing

with some *ansisit*.

Our father Renato was also a travelling healer. He travelled to see patients in many places, including Vigan, Laoag and the rest of the Ilocos provinces, Isabela, Cagayan, Manila, and Olongapo. My siblings and I were amazed at how our father managed to find his patients in these faraway places despite having no previous travel to these areas, except for Olongapo where he worked for some time.

Ritual Healing

One of my younger sisters married and settled in Vigan, Ilocos Sur, so our father frequently visited the place to heal people. There was a time in 2013 when I also visited them, where I witnessed one of my father's healing sessions. Some people came to fetch my father to see a patient at his home. I accompanied him. This patient had an enlarged, very painful stomach. We were informed that he and his family had consulted doctors, but they couldn't determine the cause. As per our father's instructions, the family got a small native pig, a male and female native chicken, and two native eggs. When the pig and the chickens were butchered, he checked the livers for good or bad omens and performed a ritual. Our father never allowed anyone near him during the ritual, as he didn't want to be disturbed or distracted. After the ritual, the meat was cooked, and we all partook of it.

After a week, the patient's stomach flattened to normal, and the pain was gone. Out of gratitude and happiness, the patient offered a large amount of money to our father so that he could buy an owner jeep, but our father declined and instead opted for a smaller amount to buy a motorbike. This motorbike would later become his service vehicle for travelling to different places to treat people. The patient is now retired and healthy. Sometimes, we see him walking around his residence. ***

CHAPTER 19

BAKI

(HEALING RITUAL OF IFUGAO)

Story by Dum
Documented by Sixto Talastas

> *The baki or ritual healing happened in Hingyon, Ifugao while the patient was in Baguio. I am a Tuwali-Ifugao from Hingyon, my nickname is Dum, now residing in Baguio, and this is my story related to baki.*

Baki is a ritual for various occasions such as agricultural activities and a ritual for healing, for protection, and well-being. It may also be a ritual for burial and many more. It is a ritual to connect to the unseen and spiritual beings. The performer of *baki* is called *mumbaki* or Ifugao traditional priest.

In 2010, I gave birth to my son at the hospital via caesarian section. The supposed to be happy occasion turned into a nightmare. In a month, I underwent three (3) surgical operations.

I was about to be discharged after my caesarian but for some unknown reasons, I felt an excruciating stomach pain. Then all of a sudden, pus was coming out from my caesarian wound. They rushed me to the emergency room and the doctor had to perform an emergency operation to remove the decaying uterus because my life was at stake.

Without my knowledge, my father went home to consult a *mumbaki* since my life was in critical condition. They performed a *baki* for healing called "*mana'hawut*". This required three chickens, the first chicken is for '*tung-ngol'* ritual, it is an offering for the supreme god. The second chicken is for '*pa'bi*', an offering for the dead ancestors and the third chicken is for the '*mana'hawut*', imploring the unseen healer to heal me.

Days passed but still, I was not getting better, the skin around my wound was also decaying causing the surgical stitch to break open and prompting the doctor to perform a third operation. According to the doctor, a strong strain of bacteria was eating the skin and flesh causing it to open and preventing the wound from healing. They had to scrape out the decaying part and stitch it again to join the skin.

A third operation was required and when it was done, my father again went home to see the *mumbaki*, they performed the '*munlablabi*' *baki* where 2 chickens were butchered. The first chicken was offered to the '*pinading*' or fairies/deities and other similar nature spirits, the second chicken was offered to the '*munlablabi*' or nature spirits that roam around in the night to scare people.

I think one reason my father sought the help of the *mumbaki* for the third time was because when I was at the hospital and my third operation was finished, an old woman, a *Kankanaey,* came to visit. She was the mother-in-law of my cousin.

"Someone is holding a grudge against your daughter; she may have hurt somebody and that that person is now seeking revenge!" she said to my mother upon seeing me.

My mother, a very religious person, didn't believe her and just brushed it off, but it caught the attention of my father. Because he believes in *baki,* he insisted on going home to seek the advice of a *mumbaki*.

Much later after I got well, my father and I were having a conversation, I asked him if he really believes that the baki helped me survive those critical days.

He said, "Yes, of course, you were confined in the hospital for 1 month, but you were not healed. When we conducted the baki, you were healed!"

My father really believes in *baki* and other traditional healing practices in our place. But for me, I still have some doubts regarding the effectiveness of *baki* because my education dictates me to look for

scientific basis. However, for patients who are suffering from ailments that doctors cannot treat and for desperate measures, I still recommend *baki* . There were some instances in our place where patients go to the hospital, but the doctors couldn't explain and couldn't heal their sickness. However, when they went to the *mumbaki* for treatment, they were healed.

Father said, "*Nu agpa-baki ka, damagen da nu apay agpa-baki ka, nu anya ti napasamak."* ("When you seek help from the *baki*, they will ask you why, what is the story behind."

The *mumbaki* investigates the circumstances to determine the kind of ritual to be used. The *mumbaki* performed the "*mana'hawut*' baki for my healing when my uterus was removed, and the '*munlablabi*' when I was still not getting better, to deliver me from bad spirits.

Aside from my experience regarding *baki*, our community also shares a common knowledge about the *mumbaki*. *Mumbaki* have specializations just like doctors, depending on the level of their healing power or level of knowledge and experience. For example, there are *mumbaki* who specialize in simple headache, '*natomyo*' or affected by spirits. There are also those who specialize in serious and critical conditions, mostly the more experienced ones. Most *mumbaki* are male but there are a few females. Becoming a *mumbaki* can be thru family lineage or if a person is naturally gifted with the skills of a *mumbaki*.

Aside from the mumbaki, there are also other traditional healers like mang-ngilot or traditional healing massage practitioners and herbalists. There are still others who use prayer, healing breath, and chants.

Unfortunately, the mumbaki and other any indigenous healers are dwindling in number. When they grow old and die, no one takes their place. In Hingyon, I think that the traditional healers are all older than 55 or 60 years. There are no young healers as of now. I think this is the effect of education and technological advancement. Another reason may also be because when you have a healing skill or gift and you neglect a patient, you may experience the sickness of the patient that you neglected. If not you, then your family.***

CHAPTER 20

IYAP

(HEALING RITUAL OF LIAS, BARLIG, MOUNTAIN PROVINCE)

Story by Campen Talastas
Documented by Sixto Talastas

Campen Talastas, 54, is a native of Lias, Barlig, Mountain Province but currently lives and works as a fire officer in Quezon City. He shares one of his experiences with indigenous healing during his childhood days. Lias, like all other barangays in Mountain Province, is an indigenous Igorot community.

One sunny season around the early 1980s, Campen, a grade 4 pupil from Manila, went home to Lias for a summer vacation with his siblings and grandparents. Upon arrival in Lias at night, he had a stomach ache. It was the first time he felt such pain- it was tolerable but would get severe at times- and it lasted the whole night. The next morning when his Lola Lichaway, who is a *man-iyap* (a local shaman), saw that his condition had not improved, she suspected that a spirit had greeted or talked to Campen. She decided to perform an *iyap* (a Lias term for divination and healing), a ritual to connect to the spirits, determine the cause of illness, and treat it. It is believed that when the spirit of a dead relative meets and greets a person, especially children, that person may get sick. Usual ailments include headaches, stomach aches, or vomiting, and in infants, unexplained crying.

Lola Lichaway sat on a chair and, after some prayers and meditation, she called on the spirits of their ancestors. Soon, she felt sleepy and kept yawning until her yawn became very big and she went into a trance. A spirit entered her body, and her voice suddenly changed. Lolo Alipio, Lichaway's husband who was seated by her side, talked to the spirit, who turned out to be Emiliana. Emiliana is Campen's deceased mother and Lichaway and Alipio's daughter- in- law.

Speaking through Lola Lichaway, Emiliana said she was very happy to see her son, Campen, come home to Lias. She said she missed him dearly and just wanted to greet and connect to him. Lolo Alipio told the spirit Emiliana that because of her action, her son suffered stomach pain. He advised her never to repeat what she did to Campen, as it might cause illness again.

After some pleasant goodbyes, the spirit left and Lola Lichaway came out of the trance and was her usual self. Campen and his siblings, who were present, were dumbfounded by what they had just witnessed. After a few minutes, Campen's stomach ache started to fade. In less than an hour, the pain was completely gone and Campen was well again.***

CHAPTER 21

PAGGAMOT SA PAMAMAGITAN NG PANGITAIN AT RITWAL

(STORIES OF HEALING BY A LOCAL SHAMAN)

Kwento ni Beatriz Okyo Aliwana
Isinulat ni Sixto Talastas

Aksidente sa Isang Bata

Isang araw sa San Vicente, Baguio City, ay umulan ng malakas. Nasa elementary pa ako. Biglang may nagpakita sa isip ko – isang bata na naglalaro sa gilid ng kanal sa bandang baba ng mga kabahayan namin dito ay nahulog sa kanal. Nagulat ako at sinabi ko ang nakita ko sa mga matatanda na nakatambay noon doon sa labasan pero hindi sila kumbinsido.

“Maniwala ka dyan? Bata lang yan,” sabi ng isang matanda sa katabi niya habang paalis ako.

Hindi ako pinaghinaan ng loob at hinanap ko iyong bata sa may kanal at inuwi ko siya sa kanila. Ito ang una kong karanasan sa mga pangitain.

Naluganan

(Nasapian)

Noong bata pa ako, sinama ako ng aking lola sa bahay ng isang pasyente na kalalabas lang ng ospital. Hindi daw malaman sa ospital ang sakit niya kaya pinauwi. Pinatawag pala nila kami para magpatulong. Maya-maya habang nagku-kwentuhan kami ay biglang inantok ako hanggang hindi ko na maalala ang sumunod na nangyari, yun pala ay naluganan o nasapian na ako ng isang espiritu. Si lola ang kumausap sa espiritu at ipinapaliwanag ang gusto nitong sabihin sa pasyente at sa pamilya nito.

“Ano yun lola, anong nangyari?!” tanong ko pagkatapos.

Ipinaliwanag ni lola na may gustong sabihin ang isang espiritu sa mga

kapamilyang naiwan niya kaya siya nagparamdam sa pasyente kaya ito nagkasakit. Pumasok ito sa aking katawan upang ipahiwatig nito ang gustong sabihin sa mga kapamilyang naiwan.

Mula noon ay dinadala ako ni lola sa mga pamilyang gustong magpatulong na may parehong kaso. Hindi ko maintindihan kung bakit ako ganun, samantalang ang ibang mga bata ay walang ganun. Hindi naman ipinapaliwanag ni lola o kaya ni nanay ang nangyayari sa akin. Marami kaming napuntahan ni lola na may kaparehong mga kaso na kung saan sangkot ang mga espiritu. Pero sabi ni lola na itigil ko na ito kasi bata pa ako. Kailangan magkapamilya muna ako at matapos ang aking panganganak. Mula noon ay huminto ang aking mga pangitain.

Nag-asawa ako at nanganak. Noong isang taon ang aking bunso, biglang may kumatok sa bahay na nagpapatulong. Hindi siya umalis hanggang hinawakan ko siya.

Pagtawag ng Kaluluwa

Noong college ako sa Pines City Doctors Hospital na nag-aaral ng midwifery, may dinala doon na lalaki na naipit sa dalawang sasakyan. Isang linggo na siya sa ospital pero walang pagbabago sa kanyang kalagayan. Kinausap ko ang kanyang mga magulang kung naniniwala sila sa tradisyonal na paggagamot.

“Opo”, sabi nila.

Sinabi ko sa kanila na kumuha ng damit o t-shirt ng pasyente at puntahan yong lugar kung saan nangyari ang aksidente at tawagin ang kanyang ispirito. Tawagin nila ang kanyang kumpletong pangalan – first name, middle name, apelyido. Pagkatapos nito ay dalhin nila ang damit na ito at ipasuot sa kanya. Sinunod nila ang aking sinabi at pagkatapos ay gumaling ang kanilang anak.

Dito nag-umpisa na ako ay dinadayo ng mga tao para magpatulong pero laging sinasabi ng aking ina na bata pa ako. Kailangan magpamilya pa raw ako bago ako tumulong sa ibang tao. Pero kapag hindi ko gamitin ang aking kaalaman ay ako naman ang pinahihirapan,

ako ay nagkakasakit. Kaya ang ginawa ng aking lola ay sinasamahan niya ako para siya ang mag-interpret kapag may sumanib sa akin na ispirito.

Timmengao
(duwende, Tagalog; dwarf, English; timmengao, Kankanaey)

Inanyayahan ako ng aking balae na sumama sa kanilang grupo ng tradisyonal na manggagamot sa Tabuk para obserbahan ang kanilang paggagamot. Habang nanonood ako sa nangyayari na gamutan sa Tabuk, nakita ko ang isang binatang lalaki na nakahiga sa loob ng isang sasakyan. Linapitan ko sila at nakipagkwentuhan. Nalaman ko na hindi daw siya makaihi sa loob ng isang taon. Nagpakonsulta na sila sa doktor at lahat ng lab test niya ay normal.

“Anong sabi nila diyan?” tanong ko sabay turo sa nagyayaring gamutan.

“May nainggit daw sa akin, kaya nagpapakuha sila ng limang manok, isang aso, at isang baboy para katayin!”

Nadismaya ako kasi imbes na makagaan ang manggagamot sa mga pasyente ay magastusan pa sila kasi maraming hayop ang pinapakuha. Naniniwala kasi ako na ang pagtulong ay hindi lang sa paggamot sa sakit pero dapat maka-menos din ang pasyente sa gastos.

“Pwede bang hawakan ko sya?” tanong ko sa mga magulang.

Paghawak ko ay may nagpakita sa isip ko.

“Magsasaka ka ba?” tanong ko sa binata.

“Opo!”

“Meron ba kayong inipon na mga dayami ng palay na nakatambak sa gilid ng palayan nyo?”

Opo meron!”

“May panahon ba na umihi ka don?”

“Opo”

“May nakatira duon na dwende na naihian mo, ibinalik sa‘yo ang ihi mo kaya hindi ka maka-ihi!”

Nagpakita kasi sa akin ang eksena kung saan yung binata ay nakatalikod at umiihi sa tambak ng mga dayami at may timmengao o duwende na naihian nya. Ito ay nagalit. Nakikita ko pero tinatanong ko pa rin yung binata para malaman ko kung paano nya sasagutin. Lahat naman ng isinagot nya ay tugma sa nakikita ko sa pangitain. Nagtinginan sila, pati ako tinitingnan nila.

“Pwede bang wag na kayong pumunta dyan?” sabay turo sa gamutang nangyayari. “Umuwi na lang kayo, magkatay kayo ng manok at pag naluto ay dalhin nyo at i-atang o ialay sa may bahay ng timmengao sa tambak ng dayami.”

Kako pa,“Wala namang mawawala sa inyo pag ginawa nyo, hindi pa kayo gagastos, hindi rin masasayang yung manok dahil pagkatapos ng pag-alay ninyo ay kainin din ninyo.”

Kinagabihan ay sumakay na ako ng bus papuntang Baguio at sila ay uuwi na rin daw sa bahagi rin ng Kalinga.

Kinabukasan ng gabi, nasa Baguio na ako, tumawag ang aking balae. “Betty, nandito ang mga magulang ng taong ginamot mo daw doon sa Tabuk.”

Kinausap ko sila, anila,“Kagabi ay ginawa namin ang mga sinabi mo noon sa Tabuk, at kaninang umaga ay umihi na ang anak namin. Maraming salamat!” Panay ang pasalamat nila.

Demmang
(Espirito ng tubig na nakipag-asawa ng mortal)

Panahon ng pandemic, ang anak kong dalaga na si Enriqueta, ay

matagal na nag-bleeding kahit hindi niya period. Pagpunta niya sa kubeta ay natumba sya, putlang putla na siya at tuloy ang pagdurugo kaya dinala namin sya sa Baguio General Hospital. Marami silang ginawang test pero normal naman lahat kaya napilitan silang pauwiin ang anak ko.

Wala namang nakitang sakit ang duktor kaya naghinala na ako na baka kakaiba ang dahilan kaya kinagabihan, sinubukan naming alamin ang sanhi ng karamdaman ni Enriqueta. Nagtanong-tanong ako sa kanya kung ano sa tingin nya ang mga maaaring dahilan. Habang nag– uusap kami ay may pangitain na biglang pumasok sa isip ko – ang anak ko ay nakayakap sa isang malaking bato sa may paanan ng talon o waterfalls, nakatingin siya sa talon, habang nasa tubig naman ang isang espirito na nakatingin sa kanya.

“Anak, meron bang panahon na nagpunta kayo at naligo sa talon sa may Camp 4? At may niyakap kang bato at matagal ka sa bato?” tanong ko sa kanya.

“Opo, Ma, noong nasa 1st year high school pa ako, nagpunta kaming magkaka-klase doon. In-appreciate ko kasi yung tubig kaya napayakap ako ng matagal sa bato habang pinapanuod yung tubig sa talon.”

“Sa iyong panaginip, meron bang tumatabi sayo sa pagtulog mo na hindi mo kilala?”

“Opo, basta na lang syang tumatabi, matagal na, simula noong nasa high school pa ako!”

“Naku! Meron kang demmang!”

“Ano yun?”

“Yun ang espirito na nakatira sa tubig, yun palang pag–appreciate mo sa tubig ay nagustuhan ka din ng espirito at ikaw ay kanyang inasawa!”

Nagpatulong ako sa ibang manggagamot at sinabi sa akin kung anong gagawin ayon sa kultura ng mga Ibaloy. Kailangan daw naming mag–

alay ng pagkain at ilang mga bagay sa espirito ng talon sa Camp 4, Tuba, Benguet. Nagdala kami ng pinakuluang karne ng baboy na walang asin at mga alak at inialay namin ang mga ito sa may talon. Kumain na rin kami doon ng konti para lang samahan iyong may bahay sa talon. Pagkatapos ay tinawag ko ang naiwang kaluluwa ng anak ko na inasawa ng espirito ng talon,

“Enriqueta, halika ka na, umuwi na tayo!” sabi ko.

Pagkatapos ng ritwal na ito ay may pangalawang ritwal na gagawin sa bahay naming sa Baguio. Pag-uwi namin sa Baguio ay bumili kami ng mag-asawang manok, isang pulang tandang at isang dalagitang manok. Naghanda rin kami ng *bigao* (winnowing basket) at inilagay namin dito ang mga lumang coins at mga perang papel. Kinatay ang mga manok at linuto at ini-alay sa espirito ng talon. Kinausap siya na kunin niya ang pera para may pamasahe siyang bumalik sa bahay niya. Lahat ito ay ginawa namin para maghiwalay sila ni Enriqueta.

Nang matapos namin ang mga ito ay gumaling na si Enriqueta, hanggang ngayon na graduate na sya sa college. Wala nang tumatabi sa kanya sa panaginip at hindi na naulit ang pagdurugo nya.

Dragon ng Dagat
(Dragon of the Sea)

Isang babaeng nagta-trabaho sa Hong Kong bilang kasambahay ang nag-video call sa akin. Isang kaibigan niya na kasambahay din sa Hong Kong at dati kong pasyente ang nag–recommend ng pangalan ko sa kanya. Nagpatulong siya ukol sa kanyang problema, hindi raw siya makatulog sa gabi at laging nakalutang ang isipan. Hindi na siya makapag-trabaho ng maayos.

Hiniling ko na itext niya sa akin ang kumpleto niyang pangalan at pagkabasa ko ay may nagpakita agad sa akin na pangitain: isang grupo ng mga babae ang nasa tabing dagat at nagkakatuwaan na nangunguha ng mga bato at ibinabato sa dagat. Isang dragon sa dagat ang tinamaan. Namangha ako sa dragon, sabi ko sa sarili,

“Ganito pala ang itsura ng dragon!”

Tinanong ko ang babae, “Nagpunta ka ba sa tabing dagat at naghagis ng mga bato sa tubig?”

“Opo.”

“May natamaan kang dragon ng dagat! Magtanong ka sa mga Chinese diyan kung ano ang ugali nila pagdating sa mga ganyan.”

Pagkatapos ng ilang araw, muli kaming nag video call.

Sabi niya, “Ayon sa payo ng isang Chinese ay nagpunta kami sa isang templo, nagsindi kami ng insenso, at humingi ako ng patawad sa dragon sa dagat. Pagkatapos nun ay gumaling na ako! Maraming salamat po!”

CHAPTER 22
CLAIRVOYANCE AND HEALING

Story by Giovanni Reyes

Giovanni Soliman Bete Reyes or "Giovs" is a Kankanaey Igorot who traces his roots to Sagada, Besao and Ilocos Sur. He was raised in the tradition of the Anglican Church yet lived in a Kankanaey village. He is actively involved in the advocacy for natural justice and indigenous peoples' rights at the national, regional and global level. He is also a customary law enthusiast and presently an environmental planner, utilizing traditional knowledge and science.

A River Stone

As a Sagada-born Kankanaey-Igorot of Mountain Province, it's not unusual interacting with extraordinary men and women elders within the Cordillera region. Such elders are known to community members as "*men-sip-ok*" (Sagada), or "*ensup-ok"* (Bontoc). In Ifugao, they are called "*mabaki*" or *"mumbaki*" and in Benguet, "*mambunong."* Ascribed here as traditional healers, they do not ask for persons of ill-health to come to them, rather that, they are sought, referred to and consulted by them. They hold distinction for their psychic skills and become known for their culturally-based techniques of diagnosis and healing that are respected and acceptable to communities they belong to. Depending on the healer's "findings," certain rites are prescribed, including a particular animal for ritual use. While traditional healing is ironically vulgarized and demeaned as "*paganism,"* the deep spiritual reverence traditional healers have for nature, amplified by their persistent acknowledgement and uttering "*Nailangitan ay Ama*" (Heavenly father) at the end of their prayers have contributed significantly in protecting biodiversity. The "integrity of creation" Christianity speaks of in regards to respect for nature, is a practice already being done by indigenous communities

who treat their caves, forests, rivers and lakes with sanctity as Christians would on temples, churches and cathedrals. In such a context, there is apparently no higher value attached to health work done by a medical doctor to a healing practice by a traditional healer. Neither is a traditional healer's role perceived as "*backward."* This can be observed in some Cordillera communities where medical doctors share the same ethnicity as the traditional healers. Although viewed as "*different,*" both are valued as complementary and to certain extent, interchangeable. "Illness," as used here, is not about ailment that medical science can cure.

A Bontok woman *ensup-ok Baket Kifanay* explained, "*Where certain natural areas are by customary practice designated as ritual sites, humans entering that space for no reason or permission, reap certain consequences like an illness that doesn't respond to medical cure*."

Who is Baket Kifanay?

I first met Kifanay one Satuday morning at a community market in Kiangan, mid 1997. Kiangan is a municipality of Province of Ifugao that is "enshrined in Ifugao mythology as the dwelling home of Wigan and Bugan, the mythological ancestors of the Ifugao." (Provincial LGU). Aged between 55 – 60, Baket Kifanay traces her roots to Guinaang, Bontoc, Mountain Province, located west of Ifugao. She prefers to be called "*I-luta ak*" (from earth's soil) rather than "*I-Fontok ak*" (I am a Bontok). Explaining this, she said, "*Wad-ay ya nan inyanak ko ay babae isnan payew. Intatakcher ko is bassit ay inmanak. Sya nan anak tako'y wadchas ka korte'n si gobyerno*." ("I gave birth to a baby girl in a rice paddy. I stood in the mud with my knees semi-bent while giving birth. She's our child now with a government court"). I would later meet her daughter as an employee of the Bontoc Municipal Trial Court.

Describing her full-sleeved tattoo from shoulder to wrist in both arms, Kifanay said: "Maipangkhep isnan fatek isnan limak, nan ad-i makaimaton sinan khamesh ko ket mafigfig na sak-en sinan fatek ko ay kag ken Kifanay." (With my tattoo in both arms, anyone who cannot recognize me through my face will still know me as Kifanay).

How We Met

I was then renting a second floor of a house in Kiangan above the Saint Joseph Church of the Catholic mission, with a spectacular view of mist-shrouded landscape and morning clouds billowing towards Lagawe valley in the east. The house is a minute away from the community market. One Saturday morning, while paying for a kilo of mango, I noticed an elder woman looking at me, and as if she knew me.

She said as she approached me, "*Fakhen khgayam Igorot nan asawam. I-Macau pet sya?* " (Your wife is not Igorot. She is from Macau).

I asked, "*Ngan si nang ammuam, Ina*?" (How did you know that, mother?)

Her reply left me numbed:, "*Wen ah tay mailak met is ka angash mo. Mafashak man nan wad-ay is ka ulom!"* (Yes, of course, I can see through your face. I can read what is on your head!).

I then requested that we go to a corner where no one can hear us. After letting her know of my kinship roots, and reasons for my stay in Kiangan, we had more conversations in the following weeks and months. She would provide guidance and advise me about customary beliefs and practices specific to sub-barangays (sitio) and barangays. These included certain protocols during travels to meet with community through host families, awareness about actions of persons or "strangers" you suddenly meet, and certain protective measures against harm that can come through friendly-offered food or drinks in places one is not too familiar with.

The Guardian Spirit of Tappiya

Adjacent to the Batad terraces is Tappiya, a waterfall made famous by its calm and serene flashing water sounds and gentle river flow. For present-day tourists, it's a "breathtaking scenery one can visit all year round" (guidetothephiippines.ph). The profit tourism brings to travel tour operators makes the visit here "all year round." In 1997, I headed a team to Batad to do a to feasibility study on community-based eco-tourism for Batad alongside implementation of a restoration project on

eroded stone walls in its amphitheater terraces. Then and there, I got exposed to the "other side" of Tappiya.

After a swim in Tappiya, I picked a black stone the size of a pear fruit for "souvenir" and for therapeutic scrub (*Igod).* Igorots use stones to vigorously scrub their whole body, from the shoulders down to the foot, to remove dead skin and dirt (*kilot).* This cleaning of *kilot* from the body using a stone is a traditional practice called "*men igod.*" Almost all households have "*igod*." I brought the black stone to my residential home at Quezon City.

About a week later, I felt persistent irritation on my shoulder blades as if a foreign object got stuck on my back. This went on for months. I was in and out of St. Luke's Medical Center in Quezon City, going through check-ups, blood tests, x-ray and taking prescribed medicines. The pain could be felt at certain times of the day as some kind of a fatigue that would disappear at some point, only to come back again.

Back in Kiangan, I consulted Baket Kifanay.

Even before I began to explain, she asked: "Ay wad-ay inalam is bato id Tappiya?" (Did you bring home a stone that you picked up from Tappiya river?)

I answered in the affirmative. She related that Tappiya, like any waterfall can at certain times "act dangerously when portions of its body are polluted" by any human waste, use of soap, shampoo and cream. According to her, integral to Kabunian's (God's) creation of nature, including water bodies like creeks and rivers, is God's delegation of powers to nature spirits to ensure their purity as life-giving source. She said the Tappiya Waterfalls have spirit dwellers guarding it. It is necessary, therefore, for outsiders on exposure trips or simply entering Tappiya like me to ask permission to swim in its pool, or bath in shallow portions of the river. In my case, I picked a nicely pear-shaped stone from the river as a take home "without permission."

Kifanay continued, "You have no such knowledge and understanding so you can ask the spirit dweller for its kind understanding."

She added: "*You have to go back to Batad and return the stone you took from the river. Not that the spirit dweller got mad at you. It uttered in wonder what the picking up of a stone from the river, which it considers its own, is all about? That utterance is the energy that penetrated your body, causing you pain."*

She poured gin in a glass as her means to "see through" for "messages" and "signs" of possible contact with the spirit dweller of Tappiya, As Kifanay looked straight at the glass, she said, "*I see in the main door of your home floating particles in the form of mists that appear and disappear. These particles of mists are from Tappiya. Return that stone you got from the river. A man will be waiting there to guide you."*

Returning the Stone

As advised, I travelled back to Quezon City to get the stone. I experienced a slight "*dugat"* (goose bumps with momentary chill) as I packed the stone. I travelled straight to Banaue and at dawn, used a motorcycle to reach Batad by 6 am. Upon reaching the village, I saw an old man seated next to the Village View Inn looking at me.

"What took you so long? I have been waiting for you!." he asked.
Not knowing him, I asked who he was.

He said, "*I am assigned to offer a sacrificial chicken for you at Tappiya*." As we prepared the next day to leave for Tappiya, the "mumbaki" summoned Batad Barangay Kapitan (village chief) Gaspar Angihan, and requested him to bring a multi-colored rooster with a spur. We walked to Tappiya with the mumbaki holding the rooster, Kapitan Gaspar holding firewood and two cooking pots while I bringing rice, rice wine (tapey) and smoked meat (etag).

Upon reaching the river, the rooster suddenly flew off the mumbaki's hand, and went out of sight. I asked what's to be done with the ritual chicken now gone!?

The *mumbaki*, unconcerned at all, sat down with a calm voice saying:

"It will return. It simply flew off to meet his fellow chickens, to bid them goodbye and 'inform' them of its role as a sacrificial animal in a ritual to be done."

Kapitan Gaspar interpreted the *mumbaki's* explanation saying "this is one reason the chicken population thrives in their village – when a sacrificial rooster flies off, to bid goodbye to fellow roosters and return." After about thirty minutes, the *Mumbaki* whistled with an ear-piercing sound. The whistling summoned the chicken flying back onto his waiting arm. The *mumbaki* then started talking to the chicken in a language only he and Gaspar understood. Kapitan Gaspar would translate later what the *mumbaki* uttered.

"*You are the animal chosen for this ritual and you bear a big responsibility - to heal the person next to me*."

After the ritual food was cooked, the *mumbaki*, holding on to the pot of meat, turned to talk to the river.

He said, "*Spirit dweller of Tappiya, partake of this ritual food we offer you. Forgive the innocent ignorance of this man for taking out your belonging without permission. But you were not angry. I appeal to you to get back that word you uttered. Your utterance entered his body resulting in pain. Yours is no evil, and his picking a stone is not evil. Let him move from here freely and without pain. " (translation by Gaspar Angihan)*

After the prayers, the *mumbaki* asked me to partake of the food.

I said, *"Our Kankanaey practice does not allow me to eat a ritual food because I'm the person to be healed. Eating the ritual food might prevent healing to take place!"*

The *mumbaki* said*: "This is Batad, not Sagada! Let's Just Eat!"*

The *mumbaki* would mention later almost the same view that Baket Kifanay mentioned about the river: The Creator delegates stewardship of nature to certain spirits, in this case, guardian spirits of waters.

At the end, the *mumbaki* asked if I wanted to carry back home that stone now that permission can be sought. I declined with a big “no, thank you, that’s yours,” ending the river rites with glee.

Back at my boarding house in Kiangan, I had a long reflection. The scientific and the material, logical view and analysis of things that predominated my mind as a development activist, shifted towards harmonizing spiritual and cultural values attached to lands and resources.

After less than a week, I breathed “*ay kaneg ak dadlo ipogaw*” (like “I’m back to being human”).

The “weight” on my shoulders disappeared. Frequent mental blocks gone. The stone has been returned to where it belongs - where river ‘owns’ the rocks, stones, pebbles, sand, by giving them shape as it flows through on them. Its possession over these are to be respected.

The protection of areas where indigenous peoples’ spiritual and cultural values are attached, reciprocate nature’s life-giving role. The indigenous belief and view of Tappiya as a living being is nature conservation at its pristine best. Undefined yet lived at. Unmentioned yet real – to be scaled up and celebrated.***

CHAPTER 23

CALLING BACK THE KACHIDWA (SOUL)

Story narrated by Ms. Mary Fanak-il
Documented by M.E. Regpala

Mary Fanak-il is a 40 year old i-Sadanga mother of 4. She was born and raised in Baguio City. Her parents, both from barangay Saclit in Sadanga municipality, relocated to Baguio City to find paying jobs and send their eight children to school. Mary quit college when she was in her second year and married Arthur at age 18. They presently reside in Saclit Village in San Luis Extension, Baguio City, near Mary's parents. Here, she shares two healing stories.

This is a story about my daughter, Rina, who got sick in 2022. My daughter was a very active, lively, happy and chubby 14 year old. Every time my husband and I came home from work, she would cook coffee and prepare a snack for us. One day, I noticed that she was not well. She was quiet, withdrawn, did not eat, and always wanted to sleep. If she ate, it was very little and she said she was not hungry. She just drank water. She often sat in a dark corner of the house or curled up in bed, or asleep. She did not like bright lights and wanted the windows and lights closed most of the time. She said she felt cold, especially at dawn. She had no energy and grew very thin. This was very unusual, and we were very worried.

For the next two months, we were in and out of Baguio General Hospital for consultations, but each time, the doctors could not find anything medically wrong with her. It even occurred to me that somebody might have bullied her or worse, hurt by a man, but she said no.

One time she felt dizzy, which was understandable as she had not been eating well, and said that inside her head, she felt icy cold. We called an ambulance to bring her to a nearby clinic. Again, the attending doctor

did not find anything wrong with her. After one of Rina's consultations at the hospital, a pediatrician who looked Igorot passed by and talked with us. She suggested that we try our traditional practices *(ugali)*.

She told us, "*Hindi maiiwasan ang ganitong nangyayari kasi andito tayo sa kabundukan. Haan nga amin nga sakit ket maala ti agas*." ("We cannot avoid these things from happening as we are in the mountains. Not all diseases can be healed by medicines.")

It was timely that my mother was going home to Sadanga, so she brought Rina along with her.

In our village is Auntie Kullas, a well -known *in-aanap (*a traditional healer and a local shaman). She was usually consulted to determine the cause of illness and prescribe rituals for healing. She also performed indigenous massage using coconut oil, medicinal plant roots, and prayer.

When my mother and my daughter reached Sadanga, they immediately went to see Auntie Kullas. Auntie massaged my daughter with the use of coconut oil and medicinal plant roots. Auntie said that my daughter's muscles and bones were very hard and cold like ice or iron to her touch. When she applied medicinal oil on Rina, the oil was immediately absorbed.

Auntie Kullas also told my mother that before they visited her, she heard the voice of a young girl playing with other children. When the children were in front of her house, one of the young girls said, "Agdagas tayo ta mangan tayo ditoy kenni Lola" ("Let's drop by my grandmother's house and eat there.") But the other children refused, and they all went away. Auntie Kullas thought that the young girl might be one of her grand-daughters but she was not sure which one. When my mother visited her with my daughter, Auntie Kullas was sure that the young girl's voice she heard was Rina's.

Auntie Kullas asked my daughter about her dreams, and Rina recounted that every night in her dreams she had playmates, and they usually went swimming in Asin. I recalled that my daughter loved

swimming and sometimes went swimming with friends without my permission. Auntie Kullas explained that my daughter had unseen spirit friends who were always playing with her. They loved swimming in a river, which is why she often seemed weak and lifeless.

Auntie Kulas suggested that my daughter stay in Sadanga for treatment. My daughter stayed in Sadanga for four months, and everyday Auntie Kullas massaged her with medicinal oil. After these treatments, my daughter's condition improved but she was not fully well.

An additional prescription from Auntie Kullas for Rina's complete healing involved performing a ritual in Asin to call back her *kachidwa* (Saclit term for "soul"). We were to take her white dress and some *porchos* (reed plant with the top leaves tied in a knot). Auntie Kullas said there would be a sign if we were successful in calling her back. We were also instructed to schedule this ritual so that when it was finished and we returned to Baguio, it would coincide with Rina's arrival in Baguio from Sadanga with her grandmother.

We scheduled the ritual in the afternoon. I requested my nephew to drive me to Asin on his motorbike for faster travel. When we reached Asin, we followed Auntie Kullas' instructions. I went around the swimming pools where Rina and her companions frequented, waving her white dress while calling her name and telling her to come home.

"Umayka ta agawid tayo ta nalamnin ditoy," ("Come, let's go home as it is cold here.") I shouted while waving her dress.

Then we placed the *porchos* in the four corners of the swimming pool. After that, we were to go home directly without looking back.

After the ritual was finished, I got on the motorbike, and we started for Baguio. My nephew remarked "Auntie, dinmagsedagsen ka, kasla ka nadoble." (Auntie, you have become so heavy, like you are double." We both had goosebumps (kinilabutan - Pilipino) as we felt that there was a third person riding with us – we knew it was Rina's soul, just as Auntie Kullas had said. But I sternly reminded my nephew that we must not look back even if we felt something unusual. And we should not stop or

else she will be left behind again. We drove straight to Baguio and arrived just as Rina and her lola reached Baguio.

That evening, we butchered a native chicken and cooked it with *tinaguwan* (Sadanga) or *inasin* (Bontok) (pork that is heavily salted then sundried) . The family then partook of the meal.

After a few days, we observed that Rina was back to her lively, active, and happy self. When I came home from work, Rina would be cooking and preparing coffee and snacks for me again. Yes, Rina has indeed come home.

Editor's note: In indigenous Igorot communities, children need to be accompanied by adults when going out of the village. It is a traditional practice of many people in the Cordillera to call out to everyone, especially children, to go home when it's time to leave a place, particularly bodies of water and other uninhabited places in nature.

CHAPTER 24
A VISIT FROM A GRANDFATHER

Story by Mary Fanak-il
Documented by Penny Domogo

Soon after I got married at age 18, I gave birth to my eldest son, Armand. When he was one year old, he had a high fever and his eyes rolled as if he was having convulsions. I was so worried, so my younger sister and I rushed him to Baguio General Hospital. But when we were inside the emergency room, my son was playing like there was nothing wrong with him. The doctor sent us home. But by the time we reached the nearby trees in front of the hospital, he again had a high fever with his eyes rolling. So we brought him back to the emergency room. Again, my son behaved like his normal self and was sent home. When we went out, he was sick again. This went on three times in two hours. The doctor in the emergency room got angry with us.

“Isu nga umay kami ditoy hospital ta agpatulong, ket ag-unget ka pay,” I told him. (“We came here to seek help, and you get angry.”) I knew there was something wrong with my son.

A nurse approached us and, seeing that we were young, she said, “Apay adda pay parents yo? Ta damagen yo no adda ammo da nga “agbirbirok” ta ipan yo dayta ubing. Awan magastos yo.”

(“Do you still have your parents? Ask them if they know a local shaman. Bring the child to that person. You will not spend anything.”)

At 5 o’clock the next morning, my mother brought us to an *in-aanap* (local shaman) in another part of the city. At this point in my life, I really didn’t believe in traditional healers, so when we were in the house of the *in-aanap* and she was praying, I was keenly listening.

“Dear Lord, tulungam dakami tapno mabirukan mi ti rason nga agsaksakit daytoy ubing.”, the healer said. (“Dear Lord, please help us so we will find out why this child is sick.”)

Upon hearing “Dear Lord”, I was relieved that she knew God, so I carefully listened to what she said next.

The *in-aanap* said that my child’s grandfather (my uncle) visited and “sinaklot siya” (held him in his lap as adults usually do with children). He meant well but because he is “different,” his action resulted in the child’s illness. He was not leaving as he had no money for fare. So the *in-aanap* said that we should conduct a ritual when we returned home to San Luis.

At home in the evening, we performed the ritual. We butchered a chicken and cooked it with etag (meat that is heavily salted then smoked till dry). After these were cooked, we placed a small piece of etag and some rice in a plate, filled a bowl with soup and a chicken leg, got a small bottle of gin, and one P100 bill. We set all these on a table.

I then said, “Uncle, umayka mangan ken uminom. Daytoy met ti pletem ta apan kan. Ta sabali kayo ken sabali kami. Haan mon nga bisbisitaen daytoy ubing ta agsakit.” (“Uncle, come eat and drink. Here also is money for your fare so you can leave because you are different from us. Don’t visit this child again so he won’t get sick.”)

Then I understood a tradition that we practice in our village in Sadanga. We hang a small piece of etag and a bottle of gin outside the door so that if ever a spirit visits, he or she will eat and drink, then go away without causing illness.

After the ritual was finished, I noticed my son’s eyes cleared! Earlier, his eyes looked cloudy. I was amazed (“*nasdaaw ak”).* His fever was gone, and he was well! Since then, he has never been sick again. He is now in 4th year college.

My Reflections after these experiences

In the past, I only knew that the hospital was the place to get help when somebody is sick. I totally didn’t believe in the *in-aanap*. Now, I know that the *in-aanap* are real. We cannot disregard traditional healers and traditional healing. We should understand and respect them. We will not

lose anything, anyway. It's the same God that is called upon.

Looking back at these family experiences, I realized that God uses doctors to treat the sick in hospitals and also uses the *in-aanap* or local shamans to heal the sick through traditional ways using oil, medicinal plants, prayers and traditional rituals.***

CHAPTER 25

DAW-ËS

(A CLEANSING RITUAL)

Documented by Jill Cariño

Jill Cariño, 65 years old, is an Ibaloy development worker born and raised in Baguio City. She has worked with various non-government organizations and networks since the 1980s, promoting and advocating for indigenous peoples' rights and traditional knowledge. She is presently the Coordinator of Partners for Indigenous Knowledge Philippines.

The daw-es is a cleansing ritual performed by the Kankanaey people of Besao after serious, unexpected, or unusual misfortunes or accidents happen. For example, it is done when there is a vehicular accident that brings sudden death/s to the family or when a house is burned. It is also done after a person experiences a traumatic event. It could be done at the site of the incident, or in the dap-ay, or in the home of the person concerned. The ritual is meant to help the person, and his/her family and community cleanse their minds of fear and trauma and to seek the help of the spirits so that such an incident will not happen again or will not happen to others present.

We conducted the *daw-es* on August 27, 2022, after a serious incident of abduction and psychological torture of one member of our family by unidentified persons. It was performed by three elders from Besao – Lakay Olsim, Lakay Abidal, and Peter Casiben. They are respected elders who are usually called upon by the i-Besao people to perform rituals and to give advice during significant events like weddings or death in the family.

The ritual was conducted in the family home in Camp 7, Baguio City, from mid-morning until mid-afternoon. The immediate family, as well as siblings, in-laws, nieces, and nephews gathered around with the elders.

Two native chickens (hens), *etag* (smoked salted pork), gin, tobacco, coins, and an antique necklace made of snake bones, were placed in a basket and prayed over. The ritual started with prayers by the elders calling on Apo Kabunian, the spirits of the ancestors, the spirits of the land, the spirit owners of the place Camp 7 and others who had died before. The elders asked the spirits to cleanse the person's mind and help him overcome his fears. Each step of the ritual was accompanied by long prayers, with the elders repeating the prayers at every step.

The 2 hens were killed one after the other using a sharp knife. Then some feathers were gathered from the tail and wings of the chicken, tied together, and placed by the doorway to be kept there to ward off evil spirits or negative energy. The elders then burned off the feathers of the chicken. The liver of the chicken was inspected, then some internal parts were separated and buried outside in the garden. The chickens were cleaned for cooking then boiled together with the *etag*. They were then brought back to the elders for more prayers. The chickens could not be eaten by the person concerned nor by his family but were taken home later by the elders. The elders prayed over the gin, drank some and gave it to the person and the family members to drink. Prayers were said for each of the items in the basket. After the performance of the ritual, a candle was lit, and we were instructed to keep it burning until the next day.

The effect of the ritual on the person was that he felt comforted by the prayers of the elders and the presence of his family. It helped remove the feeling of fear and trauma from the incident because of the support shown by those who gathered for the ritual.

Usually, a dog is butchered during the *daw-es* as it is believed that the dog can guard against evil spirits and his bark will scare them away. However, today, chickens can also be used.

CHAPTER 26

AMMA

(HEXING AND COUNTER HEXING)

Story by Grayson Naogsan
Documented by Sixto Talastas

Grayson Naogsan, a 49-year-old Balangao from Paracelis in the easternmost part of Mountain Province, now resides in Aurora Hill, Baguio City. Amma is a Balangao word for hex or counter hex, also pertaining to the act itself of hexing or counter hexing.

In 1986, when I was in Grade 6, my aunt, who was studying in a certain college in Ifugao, started feeling sick shortly after winning the Student Council presidency. She came home to us in Poblacion, Paracelis but her condition worsened. She was brought to the hospital in Poblacion, but the doctor couldn't determine her illness. All the while she wondered what might be the cause of her illness. From the hospital, she was brought back to our home.

After a few days, four lalakays (old men) from Natonin, an adjacent town located at the higher part of Mountain Province, arrived to perform a ritual. I learned that older members of our family have requested their help. They all wore traditional ba-ag (g-strings), walked with canes, and came on foot as the road linking Paracelis with Natonin was open only during the dry season and there was a very limited number of public utility vehicles. It seemed they were all in their 80s, so I was amazed at how strong they were still to be able to hike for a day. These old men are practitioners of amma (man-amma or oma-amma).

As per their instruction, certain animals were prepared for the ritual: a pig, a dog, a duck, and a chicken, along with items like the *labba* (rice winnower), and *panay* (ceramic plates). Very early the next morning, just before daybreak, the ritual began. The animals were killed one by

one while the *lalakays* chanted prayers. They examined the *agtuy* (liver) and *apru* (gall bladder) and concluded that whoever performed hex on my aunt was a powerful *man-amma*. After the animals were butchered, some of the meat was cooked while the rest was set aside for the *lalakays* to take after the ritual.

The *lalakays* arranged the *labba* and 3 *panay* side by side on the floor. One *panay* contained a *tunaw* (rice wine), another contained something I couldn't see, and the third was empty but had a cover. While chanting, they would put something into the second *panay*. Eventually, one of the elders opened the supposedly empty *panay* and took a hair from it, showing it to my aunt,

"This is your hair that was taken from you and the one used to hex you."

At first, I was skeptical, thinking that the hair could belong to anyone. However, during the ritual, while the *lalakays* were chanting, a *korapa* (bat) flew in, circled above us, and landed precisely on the opened empty *panay*. The *korapa* never flew off, even when one of the *lalakays* casually covered it. How could a bat be not afraid to go where there were many people? The *lalakays* may have produced a sound that attracted the bat, but still, why would it land exactly on the *panay* and not just somewhere on the ground, and why did it not fly away even when a *lakay* came near it to cover it? It could not have been a coincidence. Right there and then, I was convinced of the power of the ritual. I learned later that the *korapa* symbolized the person who hexed my aunt.

After the ritual, the lalakays returned to Natonin, taking with them the meat that was set aside. Before leaving, they instructed our family to prepare for the next part of the ritual at my aunt's home in Natonin. A few days later, we travelled to Natonin with my aunt carried on a makeshift hammock. The second ritual followed the same procedure as the first but without catching a bat. We then returned to Paracelis.

Although I was not present during the following events, I was later informed that another lakay from Alfonso Lista, Ifugao, visited our house two days after the second ritual. He confessed to hexing my aunt,

admitting that another woman asked him to do it because she lost to my aunt in the Student Council elections. The *lakay* pleaded for the rituals to stop, as he was suffering greatly due to the counter rituals performed by the *lalakays* of Natonin. Unfortunately, the *lalakays* of Natonin had already gone home, and the *lakay* from Alfonso Lista went home without meeting them.

After a few more days, the *korapa* died, probably because it wasn't fed while being held captive. About a week later, my aunt suddenly woke up as if nothing happened. She collected the dirty clothes and brought them outside and washed them. Those who saw her were all amazed. They realized that she didn't know what had transpired. When told, she had a hard time believing it. She has been well since then.

Looking back, some of us believe that when the *korapa* died, the *lakay* from Alfonso Lista might have also died, as the *korapa* represented him. When the *korapa* died, the spell on my aunt was broken. There is a belief in Natonin that practitioners of these kinds of rituals must be single men or women because the practice may have adverse repercussions on their children, such as sickness, accidents, or suffering the same fate they inflicted on others. Today, no one in Natonin performs these kinds of rituals anymore.***

CHAPTER 27

MANMADMAD

(IBALOY INDIGENOUS PRAYER LEADER)

Story of Vicky "Chiday" Macay
Documented by Sixto Talastas

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Manmadmad is the term for the Ibaloy indigenous prayer leader. It comes from the root word "madmad", which refers to the indigenous prayer of the Ibaloy people of Baguio and Benguet. Madmad is a prayer for healing and wellness and for other various occasions and situations such as safe travels, weddings, house blessings, wakes and burials. There is a kind of madmad that involves butchering of a pig during festivities.

There are different styles of *madmad* depending on the *manmadmad*. It is not memorized and has no structured lines or words to follow. It is inspired, expressed freely and spontaneously, and delivered extemporaneously from the mind of the *manmadmad*. This knowledge of *madmad* is not taught in the way it is taught in schools. It can only be learned by listening to the *manmadmad* whenever they perform a madmad. The Shiva ni Doakan, an Ibaloy youth group that frequently visits the Avong in the Ibaloy Heritage Garden, always perform a *madmad* at the start of their program. They learned this by listening whenever there is a *madmad*, and the elders would guide them.

The *manmadmad* can be female or male, young or old but must have integrity. Age is not a qualification. What's important is you say the prayer sincerely and properly.

When I was in high school, I dreamed of a long tunnel brightly lighted at the far end. I was standing outside the tunnel with an old woman and an old man. They were holding a bigao (winnowing basket) with gabi/"pulos", knife and "ungot" (a bowl made from coconut shell).

They told me, “Here, receive these.”

When I accepted these, they disappeared. I think that was the start of my being an *manmadmad*.

Some people confuse “*manmadmad*” with “mambunong.” Mambunong is the Ibaloy indigenous ritualist/priest while the *manmadmad* is the Ibaloy indigenous prayer leader. To become a mambunong requires a long, difficult and complicated process set by the elders.

I first performed a *madmad* was when my older brother conducted a keshew, a ritual wherein the bones of dead relatives are exhumed, cleaned, and transferred to another burial place. We exhumed the bones of our parents and the father-in law of my younger sibling. My older brother called me to perform the *madmad*. I was reluctant because it seems to contradict my Christian beliefs, but I felt obligated because my brother requested it and it involved our parents and my sibling’s father-in law. I didn’t want my sibling to hold a grudge against me, so I did it.

The next time I performed a *madmad* was when my child died. I did it again because my uncle told me to, with the help of my aunt.

On another occasion, my aunt told me to do the *madmad* when she had her house blessed.

“Why me?” I asked my aunt. “It should be you as you are older.”

She insisted that I do it, so I did it. I did not want to do it because I felt it went against the teachings of our church. But I also realized that the prayers are directed to the same God. Furthermore, relatives have been asking me to do it ever since I was younger. Also, I come from a family of *mambunong*. So, I, then accepted the role of *manmadmad.* Now, I do the *madmad* wholeheartedly and combine Christian prayers with the traditional ones.***

CHAPTER 28

AGGASANG

(LIFE FORCE*)

Story Grayson Naogsan

Documented by Sixto Talastas



Grayson Naogsan, 50 years old, is a Balangao from Natonin and Paracelis, Mountain Province, currently residing in Aurora Hill, Baguio City. Moma chewing is prevalent in both Natonin and Paracelis. Moma is a mixture of fuwa or betel nut, lawud (gawed) or ikmo leaf, and apor or apog (lime). This mixture is chewed but not swallowed, producing a red spit. It's like something for the mouth to play with. In Paracelis and other parts of the Cordillera where moma chewing is prevalent, you can ask for moma from anybody you see chewing it and they would willingly share. It acts as a reason to start conversations. Because of moma, even strangers will talk to each other as if they know each other well. All moma chewers share their moma because they also will ask from others if they run out of supply. This generous sharing happens only with moma, not with any other product.

Grayson says he is not a traditional healer but he shares his experience regarding the strong life force of a person that can, unintentionally, cause illness to another person with a weaker life force. This same life force, though, will heal whatever ailment it caused. This life energy is called "aggasang" in Balangao. Here is his story:

Before the pandemic, I went for a vacation in my hometown in Poblacion, Paracelis, Mountain Province. One day, I went to Bunot, another barangay of Paracelis, to get wood and at the same time visit my friends there. As we were sharing stories, one man whom I did not

know joined our group and got moma from my luyong (moma pouch), which I left lying on a chair. After a while my attention was called.

“Ingka egeman ti ulo na didiay ta naulaw,” (“Go touch the head of that person as he is dizzy.”) my friend said as he pointed to the person who got moma from my luyong.

I replied, “It’s normal for him to get dizzy because *moma* really makes you dizzy.”

“No, that’s not from *moma*,” my friend countered.

So I touched the man’s head and chest. After a while, he was well.

“Napigsa ti aggasang mo a!” (“You have a strong “*aggasang*!”), exclaimed my friend.

“Anya nga aggasang? Haanak tupay nga mamati ti kakasta!” (“What *aggasang*? I don’t even believe in those things!”) I said.

“Agpakada kayu gamin umuna santo kayu maki-moma tapnu haan kayu ma-aggasangan!” advised another friend to the man who got dizzy. (“Before you get moma from somebody’s *luyong*, ask permission first so you won’t be affected like that.”)

There were other instances like this where I was asked to touch a person who felt unwell after meeting me. I observed that usually those affected are people younger than me.

I know of a lady townmate, very much younger than me, who also has strong “*aggasang”*. One time, she and her lady friends were sharing stories when one of them suddenly felt dizzy. She was told to touch that person, but she did not want to because she also does not believe in

these things. They prevailed on her, though, so she touched the person who, after a little while, was back to her normal self.

Editor's note: Dr. Michael Tan, a medical anthropologist and professor, explains this life force in his book "Revisiting Usog, Pasma, Kulam. "Many cultures have concepts of a basic metaphysical life force…. this mystical vital force, while perceived as an attribute if not a source of health, is also seen as a potential cause of illness…. even without the individual's wanting to cause illness."

CHAPTER 29

PELTEK, PITIK, FUNI

(INDIGENOUS WINE OPENING RITUAL)

Stories by Felix Siplat, Hector Sucte, and Ignacio Machis
Documented by Sixto Talastas

Editor's note: Rice wine making and drinking is a deeply embedded tradition among the various ethno-linguistic groups in the Cordillera. The fermented rice wine is known by different names, such as tapey (Kankanaey), tafey (Ibaloy), boyah (Banaue). It is made from white or red or black rice, which can either be glutinous or not. Tapey is essential in indigenous festivities and ceremonies and is traditionally aged in ceramic jars. When a jar is opened, and before drinking, an elder says a prayer and pours a few drops of wine on the ground. This opening ritual has different names depending on the place: peltek (Ibaloy), pitik (Kankanaey), funi (Lias).

With the introduction of bottled wine and other alcoholic drinks, these have often replaced tapey in many rituals. However, the ritual is still performed even when opening a bottle of wine or any alcoholic drink. While wine was traditionally consumed only on special occasions, it is now often consumed casually due of the availability of bottled drinks. Regardless, this ritual still is performed.

Since wine or alcohol drinking in the Cordillera is primarily a male tradition, the ritual is typically performed by a male elder. However, if no men are present, a woman may perform it. Here are three short stories about this opening ritual.

Peltek

Story based on a lecture by Felix Siplat during the Ibaloy Festival in October 2022

Felix Siplat, 75, is an Ibaloy elder, culture bearer, and former officer of Onjon ni Ivadoy, an organization of the Ibaloy indigenous people. He currently serves as the IPMR of Barangay Poblacion in Tuba, Benguet, and is also a manmadmad or Ibaloy indigenous prayer leader.

Tafey or rice wine is a traditional wine of the Ibaloys of Benguet, used on many occasions and even on ordinary days. The drinking of *tafey* must be preceded by an invocation of health and wellness called *peltek*. Upon opening a jar or bottle of *tafey*, an elder pours *tafey* into a *kawil* (coconut shell) or glass container or simply pours a few drops to the ground, asking for *da'tok* or blessing from *Kabunyan* to bless the wine and those who will partake of the *tafey,* wishing for abundance and for physical and mental wellness. The elder then calls on the spirits of the dead relatives of the event's sponsors to partake in the wine and food and participate in the occasion. He also calls the unseen nature spirits like *ampasit* and *atoros*, whether benevolent or malevolent, to participate so that they will not harm the living. Afterwards, the reciter pours a few more drops of the alcoholic drink on the ground.

After the prayer, the one who sponsored the event drinks first and then the others follow. In casual drinking sessions, whoever bought the drinks will drink first before the others. Different elders may have varying styles of performing *peltek*.

I began reciting indigenous Ibaloy prayers with *peltek,* and later on, I learned other types of prayers. Since childhood, I learned by observing and listening to the elders. Upon the prodding of an uncle, I officially became a *manmadmad* in 2020 during the pandemic after undergoing the *lawit*, an indigenous ritual of acceptance to perform indigenous Ibaloy prayers, which involved butchering two pigs. The *lawit* was officiated by a certain lakay (elder) from Beckel, La Trinidad, Benguet.

Pitik

Story by Hector Sucte

Hector Sucte, native of Atok, Benguet, and a resident of Honeymoon, Baguio City, is an Ibaloy elder. He is a community organizer for Tongtongan Ti Umili (People's Forum), a people's organization advocating for rights, welfare, genuine social change, and a just and lasting peace. He is also a community organizer of ORNUS, an organization of urban poor settlers in Baguio.

Pitik is the act of praying before drinking any alcoholic beverages. It involves pouring a little amount of the drink onto the ground or into the upturned cap of the bottle, serving as an offering to the unseen spirits. The invocation calls for blessings from *Kabunyan*, the supreme deity, and other spirits, for the general health and wellness of all present. The prayer can also be specific, depending on the purpose of the occasion.

For example, at a gathering in Loakan during the pandemic, the villagers gathered to discuss impending demolitions and land issues. They brought out bottles of alcoholic drinks and asked a male elder to do the *pitik*. In his prayer, I noticed that he included their specific concern:

"…sapay kuma ta haan kami nga maawanan ti daga…".
("…hopefully, we do not lose our lands…")

In our family gatherings, when we drink and they do the *pitik*, the prayer always includes call for my safety because they know that my occupation as an activist is very risky, and I am being red tagged. After the *pitik*, while drinking, they often advise me to take safety precautions.

Even during casual drinking sessions with friends and acquaintances, we always do the *pitik* and call for the safety of everyone present and to prevent misunderstandings especially when there are young boys in the group.

Funi

Story by Ignacio "Fatuna' Machis

Mr. Ignacio 'Fatuna' Machis, 73, is a native of Lias, Barlig, Mountain Province and a resident of Naguilian Rd. San Luis Extn. Baguio City.

Whenever I attend an event where alcoholic drinks are served, I always perform the *funi* before drinking. I pour a small amount of liquor into the upturned cap of the bottle and place it beside the bottle, or pour a little amount on the ground if the ground is soil and then recite the *funi*: "Kannan uwam ay Kafunyan ta uminum kamis (name of liquor), attan chakamis swerte ta ammanokan ya amfafuyan kami ta ku kamin progreso ay cha uminum."

("Kafunyan, here is your share so let us drink (name of liquor), give us good luck so that we, who drink here, will have plenty of chickens and plenty of pigs so that we will progress.")

The f*un*i varies from person to person. When invoking, some use the term *'Man-uusun*' (One who is up above), some use '*Apo Dios'* (God), but I prefer *Kafunyan,* the Igorot term for Supreme Being. The specific requests in the prayer also vary depending on the occasion.

I learned the *fun*i from my grandfather, Tarukin.

CHAPTER 30

SAB-ONG

(TRADITIONAL SIGNAGE TO PREVENT BAD LUCK, ACCIDENTS, AND SICKNESS)

Story by Tito Alfonso
Documented by Sixto Talastas

Tito Cadalig Dogui-is Alfonso, 59, is a Bagbago, native of Dilong, Tubo, Abra and now resides in Quirino Hill Extension, Baguio City. Here he shares the "sab-ong", an indigenous practice of his people for health and wellness. "Sab-ong" is a Bagbago word.

On December 18, 2022, Tito conducted a bakid or indigenous house blessing, at their newly built house in East Quirino Hill Extension, Baguio City. The day before the blessing, he prepared the necessary items for the bakid. This included setting up a sab-ong, a traditional sign meant to prevent bad intentions and events from entering the house or in the village. The sab-ong was made from a pa'o or reed plant with its top leaves tied in a knot and attached to a long stake, which was placed beside the main door.

In the very early hours of the day of the bakid, Tito's younger male relatives arrived to help prepare and cook the pigs for the occasion. They tied up the three pigs, placed them beside each other, and positioned them to face east, where the sun would rise. A native chicken was also tied up and placed among the pigs. The bakid ritual began at 7 o'clock in the morning, with Tito reciting an indigenous prayer that invoked the blessing of Kabunyan, the Igorot supreme deity. After the prayer, the animals were butchered and cooked.

As the hours passed, more friends and relatives arrived to attend the occasion. One of them was a distant male relative who was 57 years old at that time. As he was about to enter the door, he suddenly backed away, shocked to see the *sab-ong* beside it. He complained to Tito that the *sab-ong* is never placed beside a door, at least according to the customs in their village in Patyakan, Quirino, Ilocos Sur. After a few minutes of complaining, the said man left despite Tito's invitation and insistence for him to enter the house.

According to Tito, other uses of the *sab-ong* include preventing people from entering prohibited places and taking things without permission. For example, when a hunter or food gatherer in Dilong sees a beehive in the forest, they select an area along or near the trail and clear it of plants so that it will be visible to passersby. They then plant a *sab-ong* in this area, with the *sab-ong* pointing to the beehive. It signifies that whoever placed the *sab-ong* has seen the beehive first and has a claim of ownership on the honey so no one else should take it. The penalty for taking honey claimed earlier by another person through a *sab-ong* can be one carabao.

Another important use of *sab-ong* is to prevent people from entering and leaving the village during community-wide rituals, such as the *mensangaili* or traditional community lockdown. People who do not respect the *sab-ong* in any instance may experience bad luck, such as sickness or accident.

To make a *sab-ong*, cut the reed plant about an arm's length from the top. The topmost leaves are then tied in a knot and attached to a stake. It is then place in a visible location so people can easily see it and act accordingly.

Editor's note: This is a common practice in the Cordillera. This signage is called "pachipad" in Bontok, "pochong" in Barlig and "pudong" in Kankanaey. Its main function is to prevent the entry and exit of people in a village. In some villages, if this is placed near the door of the house, it means "do not enter"

CHAPTER 31

TAAN SIN AFAT

(FOOD OFFERING FOR THE NATURE SPIRITS WHO LIVE IN THE FOREST AND OWN AND CARE FOR THE WILD ANIMALS)

Story by Robert 'Achinchang' Bocalan, Jr.
Documented by Sixto Talastas and Penny Domogo

"Robert "Achinchang" Bocalan, Jr., 67 years old, was born and raised in Lias, in the municipality of Barlig in eastern Mountain Province. Lias is a hunting-farming village, a small barangay nestled in a valley surrounded by thickly-forested mountains extending to the boundaries of Sadanga, Kalinga, and Natonin. In the past, these rainforests teemed with wildlife, including deer, wild pigs, wild chickens, monkeys, motit (civet), giant cloud rats and birds. One can still find the monkey-eating eagle, although Achinchang never hunted one.

Achinchang's father died in an accident when he was only a week old. He quit school when he was in Grade V so he emphasized the importance of education to his 8 children. He is happy that they all have finished college and are now on their own. When he was young, he accompanied his uncles on hunting trips where he learned to hunt.

He married at age 20 and turned to hunting to support his family. He would save the ham or legs to sell and the rest of the meat for his family and relatives. He would sell a kilo of venison or pork for P150 at that time.

In 2014, he relocated to La Trinidad to help care for his grandchildren. He now resides in Sitio Piripin Bato in barangay Pico, La Trinidad, Benguet. Occasionally, he

returns to Lias but no longer hunts as his hunting dog is gone, and training a new one would take long. Moreover, wildlife has become scarce.

He said, “Tatta, uray apan ka diay ammom nga disso nga adda ti maanop, awanen tatta ti mataulan ti aso. Madismaya ta. Mabannog ta laeng.” (“Nowadays, even if you go to known hunting grounds, there’s no animal that the dog will bark at. It’s disappointing. You will only get tired.”). Here is his story:

The people of Lias, in eastern Mountain Province, believe that there are *afat, nature spirits* who live in every mountain and forest and own and care for wild animals. To show respect to the *afat*, hunters perform the *taan*, or food offering, whenever they catch a deer or a wild pig.

It would take one to seven days for a hunter to make a catch. They used dogs and guns to hunt. After they catch a deer or a wild pig, the hunters butcher it in the forest. They cook the innards for their food during their stay in the forest, reserving the meat for their families back home. Before eating, they perform the *taan* – the hunter cuts a very small piece of the liver, places it on a leaf with a little rice, sets it on the ground, and says the *afuy* or prayer. The prayer includes thanksgiving for the *afat,* an invitation for it to partake in the meal, and a request for continuous bounty on future hunting trips. When calling on two or more *afat*, a set of small pieces of liver and rice is allotted to each *afat*.

There are specific names of the *afat*, just as there are specific names of each mountain. In earlier times, hunters knew the names of the *afat* of every forest and called on them by name during the *taan*. Achinchang’s generation know the names of the different mountains but hasn’t memorized the names of the *afat*, so they just say “*afat”* when performing the *taan*.

Achinchang would call on several *afat* - the *afat* of the forest and

mountain where they are cooking, and all the *afat* of nearby forests or mountains where they caught the wild animal. The *afuy* varies from hunter to hunter. Some just call on the *afat*, while others include *Kafunyan*, the Igorot Supreme Being.

The practice of *taan* is passed down through generations of hunters. According to older hunters, the *afat* would generously bless those who performed the *taan*, while neglecting this ritual could result in a 'no catch'. Even if the hunter scours the surrounding forests, he cannot catch anything and ends up very hungry and very tired.

Achinchang observed that younger hunters who don't believe in *afat* and don't practice the *taan* sometimes catch wild animals, while those who do always have successful hunts. He believes that because they respect the afat, the afat, in return, bless them with a continuous catch of wild animals.

Achinchang also noticed that many hunters of today's generation don't follow some other traditions. Besides not performing the taan, some hunt as many animals as possible to sell to outsiders. There is great demand from outside Lias for wild meat and live wild animals. Many hunters have learned to use the silo (a nylon net) to catch many animals. They line up many nets, leaving little chance for the animals to escape. What makes this situation even more disheartening is that the hunters leave after setting up the "silo" and return after some days, by which time the catch may already be rotten, resulting in a lot of waste. Achinchang observed that wildlife dwindled after this method of hunting was introduced.

Nowadays, hunters rarely share the meat with their *ib-a* (family and selected relatives and friends). Traditionally, when a hunter returned home, he shared his catch with his *ib-a*. He calls for his relatives and they gather in his house. The cooked meat is rationed – one small piece of meat for each member or 3 small pieces on a stick per person. They would shred the meat (kinkinitan) with their fingers, eating it bit by bit with rice and a lot of soup. It was enough and everyone was satisfied.

This celebration of the hunt also provided the opportunity to strengthen

interpersonal and interfamily ties, contributing to harmonious relationships within the family and community.

In the past, hunters who did not share their catch would be ridiculed. Now, people don't care if the hunter does not share.

"Anya ngay ket bannog na met piman." ("Well, it's his effort."), people would say. The opportunity for bonding, however, is lost now that this celebratory sharing is not practiced.

CHAPTER 32

TUGNU

(RITUAL FOR GOOD WEATHER)

Story by Rizaldo 'Kawelan' Amawan
Written and Documented by Sixto Talastas

Kawelan, 47, a traditional health practitioner, originally from Lias, Barlig, Mountain Province, now residing in Dontogan, Baguio City, shares the story of his grandfather Tarukin, who long ago had the ability to influence the weather to benefit their community activities in Lias.

Tugnu is a prayer ritual to either stop, weaken, or alter the course of a rain or a storm. It was commonly practiced during wakes but sometimes was also done in other occasions or events. It is also done to call for rains in times of drought. Usually, it is performed at home or in the *agkham*, the traditional socio – political structure of the community (*dap-ay* in Kankanaey) and the performer is prohibited from going outside his house or their *agkham* for the duration of the said bad weather. Violation of this would result to the prolonging of the bad weather. In some cases, though, *tugnu* may be performed outside when the need arises. For instance, while on travel and a storm is coming along the way, *tugnu* can be performed to stop or alter the course of the storm to ensure safe travel.

On the other hand, the dry season may sometimes cause drought that can negatively affect the crops and the people also use *tugnu* to call for rains. When calling for rain, the ritual is done in the *agkham* and the performer can go outside but only to spit, pee, or other physical relief.

In the history of Lias, a few people were known to practice *tugnu* and one of them was Tarukin who lived from the latter part of the 19th century until the third quarter of the 20th century even surviving the Second World War. It was said that other practitioners were not as

effective as Tarukin. He learned *tugnu* in the *agkham*. Many other rituals and prayers were also taught there.

Tarukin taught his sons how to perform *tugnu* and one of his sons, Likmutun, became a skilled *tugnu* practitioner who could also alter the course of a storm. Chimichim, one of his grandchildren, also practices *tugnu* at times but his ability is nothing compared to that of his uncle Likmutun and his grandfather Tarukin. Tarukin was said to have taught many other men in the way of the *tugnu* but none proved as effective.

When performing *tugnu*, Tarukin would remain indoors at home or at the *agkham* for a day or for the duration of the storm or heavy rain or of a certain community activity

The *tugnu* was practiced until the latter part the 20th century. Unfortunately, the entry of many outside influences such as religious denominations, western education, and technological advancement, discouraged many indigenous practices including the *tugnu.*

CHAPTER 33

GUISAD CENTRAL BARANGAY AND THEIR DAP-AY

Story by Elder Michael “Paksay” Tauli and Elder Simeon Takayeng
Documented by Sixto Talastas

Michael “Paksay” Tauli is an am-ama (an elder) and a barangay kagawad of Guisad Central Barangay. He is a native of Sagada, Mountain Province, and now a resident of Guisad Central. Simeon Takayeng is an elder from Bontoc, Mountain Province, an enkapya or traditional Bontoc prayer leader, and the Indigenous Peoples Mandatory Representative (IPMR) of Guisad Central Barangay.

Guisad Central Barangay is one of the 129 barangays of Baguio City. As the smallest government unit, the barangays implement programs mandated by the national government while innovating to meet the needs of the community. Here, Elder Paksay and Elder Simeon share their initiatives on indigenous health and wellness that they integrated into some programs of government like the Gulayan sa Barangay, the functions of the Indigenous Peoples’ Mandatory Representative (IPMR), and their *dap-ay.*

Gulayan sa Barangay

The Gulayan sa Barangay program is a program of national government which aims to promote organic vegetable farming among the residents for food security and alleviate poverty and malnutrition. In their home gardens, they include medicinal plants like kutsay and tawa-tawa, which, according to IPMR Simeon, are traditionally used by the community. Some seeds are sourced from the Bureau of Plant Industry – Department of Agriculture – CAR (BPI- DA – CAR) office nearby. Other seeds come from their home gardens. The home gardeners also practice seed sharing among themselves.

They have an idle lot adjacent to the barangay hall, which they converted into a garden many years ago. This garden has won numerous awards in city-wide competitions for barangay gardens.

Function of Indigenous Peoples' Mandatory Representative (IPMR

The IPMR has many functions and one of them is to promote and practice IKSPs including indigenous health and wellness. IPMR Simeon Takayeng is also a known indigenous healer in their community, so some sick constituents seek help from him. Some can be healed by him alone while others require a larger healing ritual for which he refers them to the barangay's *dap-ay*.

The Dap-ay (Kankanaey) or Ator (Bontoc)

The d*ap-ay* is an indigenous socio – political structure of the Igorots in Mountain Province, known by different names depending on the location. Traditionally, it is the venue for discussion of and decision-making on almost every concern in the barangay, including the agricultural cycle, peace and order, epidemics, family disputes and land disputes. In bringing their *dap-ay* system to Baguio City, the leaders of Guisad Central modified it to suit its urban setting.

The *dap-ay* in Guisad Central Barangay is situated beside the barangay hall of Guisad Central and features many structural similarities with the *dap-ay* of Sagada. It was built through the initiative of Elder Paksay with significant help from Fiscal Paul Dampac, Ferdie Bay-asen, Guisad Barangay Officials, and other people in the barangay. It was completed through *ub-ubbu* or community mutual help, in 2003.

Like the *dap-ay* in Sagada, it serves as a venue to discuss barangay concerns, especially since many *dap-ay* elders are barangay officials. It acts as an extension of the barangay hall. After office hours, many officials go to the *dap-ay* to warm up by the fireplace, cook meat for pulutan, talk about just anything, or simply pass the time before heading home.

It has also become a venue for many rituals for various occasions,

including celebrations and thanksgivings like *begnas,* and rituals for healing and wellness like the *daw-es*. After the COVID-19 pandemic, they held a *daw-es* to cleanse the community of the trauma brought about by the dreaded pandemic. Daw-es is a cleansing ritual to help heal a person, family, or organization from trauma and prevent similar experiences from recurring. Later, they held a begnas to thank the Lord for their survival, as there were fewer sicknesses and deaths in their community during the pandemic.

Each year in January, they hold an annual begnas in the dap-ay. While their original begnas in Sagada are held before rice planting and after rice harvesting, they modified their begnas in Guisad Central to thank the Lord for a bountiful life throughout the year, as they have no rice fields. They hold daw-es anytime someone requests it.

Any elder among their dap-ay members can perform a ritual as long as he knows how to do it. Among the knowledgeable elders are Elder Paksay who is also a barangay kagawad, Elder Simeon Takayeng, the Indigenous Peoples Mandatory Representative (IPMR), and Padi Francis Daoey, a retired Episcopal priest and currently the chieftain of the Dap-ay. Nowadays, however, Padi Daoey cannot perform many rituals due to weakened vision and hearing due to old age. When a Kankanaey-Applai person requests a daw-es, Elder Paksay can perform it as he is a Kankanaey-Applai from Sagada. When a Bontoc person requests a daw-es, Elder Simeon can perform it as he is from Bontoc.

The people who ask for help in performing daw-es are not always natives of Bontoc or Kankanaey-Applai. Some come from Sadanga and Benguet. Requests also come from other barangays and adjacent municipalities like La Trinidad and Sablan, Benguet. Sometimes the elders are called outside the barangay or even outside the city to perform rituals and they perform these as part of their moral obligation. There is a Dap-ay night every Thursday where interested elders and other constituents gather to share news, updates, and stories.

Naguilian Bus accident: A Story of Healing outside the Barangay

Sometime in 2008, a bus accident along the Naguilian Highway within the boundaries of Sablan, Benguet, claimed the lives of 44 people. No ritual was conducted at the accident site. In 2010, two years after the first accident, another bus had an accident at the same site, claiming 22 lives. Some relatives of the victims came to the *dap-ay* for help, suspecting that the second accident happened because no cleansing ritual was performed after the first one. Kagawad Paksay and Padi Daoey led the team to the accident site on the Naguilian Highway. Padi Daoey led the *daw-es,* calling the spirits of the fatalities and casualties to return to their respective bodies or homes. The logistics, including the pig butchered for offering, were provided by the Benguet Electric Cooperative (Beneco). Since the ritual, no vehicular accidents have occurred at that site.

Challenges

A majority of the youth today are not interested in the *dap-ay* and indigenous culture, including health and wellness. This disinterest is increasing as time goes by.

CHAPTER 34

LIWANAG-LOAKAN BARANGAY AND THEIR BAENG

Story by Joselito 'Boy' Shontogan
Documented by Sixto Talastas

Joselito 'Boy' Shontogan, 54, is an Ibaloy elder, a manmadmad or Ibaloy indigenous prayer leader, and the Indigenous People's Mandatory Representative (IPMR) of Liwanag-Loakan Barangay.

Barangay Liwanag-Loakan is one of the 129 barangays of Baguio City. As the smallest government unit, the barangays implement programs mandated by the national government, while also innovating to make these programs responsive to the needs of the community. In this story, Joselito "Boy" Shontogan shares their initiatives in two of these programs: the Gulayan sa Barangay and the IPMR.

Gulayan sa Barangay-Baeng Program

The Gulayan ng Barangay Program encourages individuals, families and communities to undertake community gardening activities to promote food security and alleviate poverty and malnutrition. In Barangay Liwanag-Loakan, they revived the indigenous practice of *baeng*. *Baeng* or home garden, is a traditional practice of the Ibaloy that has been preserved to this day. The program's main objective is the propagation of ***baeng*** among their constituents.

Traditionally, vegetables and medicinal plants are integrated in the gardens. So in this barangay, they include medicinal plants in their *baeng*. They prioritize medicinal plants that can be found in their surroundings.

There was once an idle lot that they made into a barangay vegetable garden for their 'Gulayan sa Barangay Program'. However, it is now being claimed by the Bases Conversion and Development Authority

(BCDA), which has fenced it off. Currently, they have no barangay lot for their Gulayan sa Barangay – Baeng program.

Indigenous Peoples Mandatory Representative (IPMR)

As the Indigenous Peoples Mandatory Representative, Boy sits in the Barangay Council. He shared that part of his function as the IPMR is to share and promote Ibaloy indigenous knowledge, systems, and practices (IKSPs). He does this through lectures upon invitation from interested groups, Ibaloy and non-Ibaloy. Many of these invitations for lectures come from the Department of Education as part of their Indigenous Peoples Education curriculum.

Boy's lectures include the use of medicinal plants and other healing and wellness practices of the Ibaloy. On medicinal plants, he focuses on those are used for common illnesses like cough and colds. These include paragis grass, shael leaves, sapang wood, makabuhay, and tagumbaw leaves. He also shares that the seeds of ripe papaya can relieve appendicitis and other stomachaches.

As a manmadmad, he also lectures about the madmad (traditional Ibaloy prayer) and other Ibaloy indigenous practices. If called upon, he performs madmad during activities both within and outside of the barangay.

CHAPTER 35

EMPOWERING COMMUNITIES FOR HOLISTIC HEALTH

Story by Jason Versola

Manang Margaret Taynan, 66 years old, residing in Springhills, Barangay Loakan-Apugan but with Bontoc origins, has suffered from asthma since her childhood. She has long depended on commercial drugs for her medication, which of course is expensive and sometimes even inaccessible. Hence, she eagerly participated in Training-seminar on Lagundi Syrup Preparation on August 15-16, 2023. This was organized by her local organization, LASLA (Loakan-Apugan Sustainable Livelihood Association) in partnership with PIKP (Partners for Indigenous Knowledge, Philippines).

In the morning of the first day of the training, volunteers from CHESTCORE (Center for Health Education, Services, and Training in the Cordillera Region) discussed the current health situation of Baguio City and the Cordillera region. They explained how socio-economic, political, cultural, and environmental factors impact largely on the health situation of an individual, a household, or a community. They emphasized that advocating for alternative health care modalities and systems could only do so much in improving the existing health system but is not the entire solution to the existing health problems. Individuals, households, and communities must continue to advocate for health as a basic human right.

The entire afternoon session was allotted to learning how to make *lagundi* syrup. *Lagundi* is a local medicinal plant in the Philippines widely known to treat common cough and colds, and even asthma. In Baguio City where infections of the upper respiratory tract are the most common illnesses, local residents like Manang Margaret find *lagundi syrup* is commercially available in drug stores as produced by pharmaceutical companies, it can be expensive and unaffordable for

locals, especially to those residing in the outlying areas of the city like Loakan-Apugan. With utmost enthusiasm, Manang Margarette joined her ka-barangays in preparing the syrup. Using stoves, cauldrons and wooden ladles to process the freshly picked *lagundi* leaves, they produced around 40 bottles of *lagundi* syrup which are ready for household consumption.

The next morning, LASLA members went to visit and inspect their local community gardens to assess the damage left by the recent typhoon Egay. Luckily, only a few crops were totally damaged. They planted a few cuttings of *lagundi*.

They started their community gardens in April 2023, planting them with local crops such as beans, okra, cucumber, spinach, corn, and a few banana trees. Among all of these crops, the pride of LASLA members comes from their *sayote*, which have been generous in producing *sayote* fruits that can be processed into a lot of food products. With their small bakery, they were able to produce boxes of *sayote* cupcakes. And now that they also know how to process *lagundi* syrup, they are confident that they will be able to produce *Lagundi* syrup for local consumption and as their additional source of income.

In the afternoon of the second day, the participants reviewed their knowledge on traditional home remedies such as sponge bath, steam inhalation, water saline gargle. They also learned the technique of moxibustion, another form of traditional therapy which involves the burning of rolled dried herbs like a cigar.

For Manang Margaret, these training-seminars are good forms of promoting health education and indigenous knowledge in urban communities. She found this training enjoyable yet informative and educational. She was also joyful that her co-participants were very cooperative during the learning sessions. Now, she and her co-LASLA members are planning to expand their skills and knowledge as advocates of community-based livelihood programs. They plan to conduct more trainings on health, food handling, finance, bookkeeping, and marketing. They also plan to improve and expand their local

gardens, learn more about organic and indigenous fertilizers, and grow a wide variety of plants. They hope that this training-seminar on alternative health care will just be the beginning of fruitful partnerships among Baguio City communities, government agencies, and non-government organizations in promoting indigenous knowledge and skills and establishing community-based sustainable livelihood programs. These, in turn, will be the key to empowering communities attain holistic health.

Discussion of Research Findings

A. Framing The Narrative: Key Findings from the Scoping Review

1. **Legal Basis**

There is enough legal basis for the recognition, protection and promotion of indigenous health and wellness systems, knowledge and practices as embodied in our Constitution, the Indigenous Peoples' Rights Act (IPRA) of 1997 and the Traditional and Alternative Medicine Act (TAMA) of 1997. To implement these laws, the government created the Philippine Institute of Traditional and Alternative Health Care (PITAHC) in 1997 and passed the Joint Memorandum Circular (JMC) 2013-01, the Indigenous Peoples' Health Policy and Administrative Order No. 2021-0034, the National Policy on Essential Intra-partum Care at Primary level Non-Specialist Birthing Centers.

The JMC 2013-01 gave birth to the Indigenous Peoples Strategic Plan for Health 2013 – 2022 which provided for the crafting by the ICCs/IPs of their own Ancestral Domain Investment Plan for Health (ADIPH) and be integrated into the Local Community Plan for Health (LCPH) of the municipalities. However, the ADIPH of the Cordillera was suspended indefinitely due to the duplication of work and resources. Furthermore, there is no updated national plan after 2022.

A study by Dr. Ryan Guinaran on the implementation of JMC 2013-01 at the regional level entitled "The Practice of Power by the Regional Health Managers in the Implementation of the Indigenous Peoples Health Policy in the Philippines" showed that "Subnational health managers are strategic actors in translating central policies and directions to operational action down to frontline." This study then recommends training of health managers on cultural competence, even if they are indigenous.

2. Initiatives

As an offshoot of IPRA, TAMA and policies on indigenous peoples'

health, initiatives from the government and private sector relevant to the Cordillera were scoped. The DOH established Herbal Processing Plants, 3 of which are operational, and endorsed ten medicinal plants proven to be effective remedies for various ailments. The PTKDL lists 9 researches in the Cordillera. NCIP and the city government of Baguio City have activities regarding indigenous health and wellness, but limited to medicinal plants.

The Cordillera-based non-government agency, CHESTCORE, has culture-sensitive community-based health programs and publications on medicinal plants. The organization of doctors, DITENG, advocates for a culture-sensitive health care system. However, many of the initiatives come in the form of researches by the academe, majority of which are by the University of the Philippines-Baguio, Benguet State University, the research consortiums PCHRD and CRHRDC, and PITAHC.

Of the thousands of health researches by these agencies scoped, only fifty-three (53) researches are related to IHW in the Cordillera. Most of these 53 researches are about medicinal plants and a few on the general beliefs and practices on indigenous health and wellness.

This research on the general beliefs and practices on IHW showed the holistic view of the IPs on health and wellness, involving not just physical and mental wellbeing but spiritual as well. It also involves a healthy lifestyle and a healthy environment. It also entails harmonious relationships of a person with the community, environment, and the unseen.

Other researches discuss the presence of various kinds of spirits inhabiting the earth among people - living in the mountains, forest, waters, and in the community. They also interact with people but sometimes, their interaction with people causes illness. Usually, appeasing the spirits through rituals involving offerings and prayers or by simple prayer can heal the illness.

Just like in the stories, one research on healing showed the traditional collective community action for healing that is part of a wider community support system - *binnadang* (Kankanaey) or *aduyonan* (Ibaloy).

This is the giving of material and moral support that usually happens in times of disasters or major family and community events. The people's act itself of helping already lessens the physical and mental burden and trauma on the victims and their families. Rituals are done to cleanse the victims or patients from mental and emotional trauma and invoking the spirits and the supreme deity for protection and prevention of a similar incidence in the future.

In general, the researches recommend the conduct of more research citing the need for the continuation and expansion of existing research and the need to study new subjects for the faster and greater development of medicines and other treatments.

B. THE NARRATIVES

1. Getting to know the Informants (Demographics)

Twenty-seven informants (27) shared thirty-five 35 stories. As shown in **Table 1** below, there are slightly more male informants, 59% (16), than female informants, 41% (11). Although all are presently residing in Baguio City or Benguet, they originally came from the different provinces of the Cordillera Administrative Region and are of various ethnicities, as shown in the same table. There are 7 informants from Lias, Barlig, Mountain Province, 6 are Ibaloy, 6 are Kanakanaey-Mountain Province, 2 are Itneg, 2 are Bontoc, and 1 each are Bagbago, Kankanaey-Benguet, Tuwali and Balangao.

Analyzing further the demographic data of the informants, **Table 2** shows that 67% (18) are either indigenous healers or health practitioners, prayer leaders and elders and 33% (9) are either patient, witnesses to the healing and 1 participant to a community initiative.

Of the 18 healers/prayer leaders and elder's group, almost all, 16 (89%), are aged 50 years old and above and only 11% (2) are below 50 years old. This is because half (9) of this group are elders/prayer leaders. Indigenous prayer leaders who lead rituals are, by tradition, elders and usually male. Table 2 shows that 72% (13) are male and 28% (5) are female. In indigenous communities, the practice of traditional healing is also typically done by older individuals, especially among women healers, as exemplified by Beatriz Aliwana in her story "Panggagamot sa Pamamagitan ng Pangitain at Ritwal".

There are 9 informants in the group of patients/ witnesses/ participants, 45% (4) of who are aged 40 years and below, 33% (3) are aged between 50-60 years and 22% (2) are above 60 years old. This shows that even the younger generation seek the help of indigenous healers or use indigenous healing. Majority (67%) of the informants are female and 33% are male. It is a common observation that women are more likely than men to seek help when they or members of their family are unwell.

Table 1: Ethnicity and Sex of the Informants:

Ethnicity	# Male	%	# Female	%	Total	%
Abra						
• Itneg	1		1		2	7.4%
• Bagbago	1				1	3.7%
Benguet						
• Ibaloy	3		3		6	22%
• Kankanaey-Baguet	1				1	3.7%
Ifugao						
• Tuwali			1		1	3.7%
Mountain Province						
• Balangao	1				1	3.7%
• Bontoc	1		1		2	7.4%
• Lias	6		1		7	26%
• Kankanaey-MP	2		4		6	22%
Total Informants	16	59%	11	41%	27	100%

Table 2: Age and Sex of the Informants:

Age of Informants	**# of Healers / Prayer / Leaders/ Elders /**	**%**	**# of Patients / Witnesses / Participants**	**%**	**Total**	**%**
Below 50 Years	2		4 (all aged 40 years & below)	45%	6	22%
50 - 60 Years	8		3	33%	11	41%
Above 60 Years	8		2	22%	10	3.7%
Total	18 = 67%	100%	9 = 33%	100%	27	100%
Sex of Informants						
Male	13	72%	3	33%	16	59%
Female	5	28%	6	67%	11	41%
Total	18		9		27	

2. The Stories: Journeys of Healing, Healers and Communities

Thirty-five (35) stories were related by the 27 informants. These stories chronicle journeys of healing experienced or witnessed, journeys of indigenous healers and their practice and a few community initiatives. The stories show various indigenous healing modalities, the healing process, and the ailments cured. Since time immemorial, these healing modalities have been practiced not only by the indigenous peoples in the Cordillera but throughout the world. Before the advent of western allopathic medicine, people had only these indigenous modalities to prevent and cure illness, in the holistic sense. At present, as shown by these stories, these indigenous healing modalities are used when western medicine fails or the patient or family or even the health professional discerns that the illness is something that indigenous healers can cure. Sometimes IHW practices are resorted to when the patient cannot afford the western allopathic treatment. Some of these traditional practices are also done to complement western allopathic medicine.

Because IHW is holistic, it is common in these stories that more than one healing modality is used, usually therapeutic massage with medicinal plants as poultice to affected body parts. Many indigenous health practitioners are gifted and skilled in more than one healing modality.

These stories also show how the healers acquired their knowledge and skill, their struggles in transmitting their knowledge to the next generation, and the challenges they face in practicing their crafts.

Through these personal stories related by both healers and those who have been healed, several themes emerge that characterize indigenous healing and wellness: a strong connection to nature, the importance of personal touch or interpersonal connection, the importance rituals and spirituality and connection with community and the unseen, and resilience and adaptation to changing times.

These stories are categorized according to the major healing modality

practiced or experienced. Some healers shared more than one story because they are skilled in more than one healing modality.

A. Nature's Healing Resources
B. Ilot/Hilot (Therapeutic Massage)
C. Clairvoyance and Indigenous Healing Rituals
D. Other Health & Wellness Approaches
E. Community Initiatives

A. Nature's Healing Resources

The original title of this section was "Medicinal Plants" but the stories tell us that nature not only provides plants for healing and wellness but also rocks, honey, phyton's bile, etc. Majority of the authors, though, share plants and plant products that made them or their family members recover from illness and maintain their well-being.

Use of medicinal plants for healing and wellness is a common indigenous practice worldwide. Before pharmaceuticals were manufactured, people all over the world depended on plants for wellness and healing. Many modern western medicines have been derived from plants like aspirin (originally from willow bark) and digoxin (from foxglove).

Indigenous peoples harnessed natural resources in their environment, whether they be plants, stones or forest products. They used what is abundant and accessible, considering that there were no motor vehicles or commerce then. For example, in the "Healing Stories in the Lubos-Tumpao-Tiotioen-Dulnuan Family", they discovered that rocks are healing because rocks are abundant in their immediate environment. In "Nature's Medicines in Abra", they discovered that honey is medicinal because Abra has a lot of forests where honey is found. From another perspective, this practice shows the abundance of and provision by nature. These stories tell us about medicinal plants that are freely growing in yards, um-a (swidden farms), waysides, canals, by the streams. They are also easy to grow. Many are considered weeds. Many are edible so they are examples of the saying "food as medicine".

In the Cordillera, there are no “herbolarios” or traditional health practitioners specializing in medicinal plants. Knowledge of these plants is commonly shared within indigenous communities. Even children are familiar with medicinal plants, such as those used for treating minor cuts and abrasions. As related in the stories, the authors had prior knowledge of medicinal plants from their family and community and enriched by experience and sharing with friends, relatives, other patients and healers. This is how indigenous knowledge and wisdom is passed on through generations- it is freely and commonly shared. This is one manifestation of the indigenous value of sharing anything that is good to the community. There is no patent in indigenous communities.

Most medicinal plants have multiple uses or indications depending on the experience of the author. These uses are learned through generations of experience and orally transmitted through families and communities. One person experiments and finds it effective, shares it to another and gets the same effect and so on until it becomes a common community and multi-community experience. This is native science. This kind of science continues as more medicinal plants which are not indigenous to the Cordillera, like aloe vera and cactus, are introduced, especially with the rapid and free exchange of ideas in cyberspace. Thus the use of medicinal plants, like any other healing modality, is constantly evolving.

Traditionally, most medicinal plants are used as tea to cure or alleviate symptoms of common illnesses in the past to the present, while a few are used for steam inhalation, for bath, and as poultice for skin problems or bruises. The most commonly used part is the leaves but all other parts like roots, stems, flowers, and fruits can be used depending on the plant and the illness.

In the traditional preparation of herbal medicine, measurements are usually not exact, like “a handful of leaves” and they may vary from one health practitioner to another or from one patient to another. This variability is acceptable. Medicinal plants are used either as whole plants or specific parts, and their healing ingredients are not

concentrated. This contrasts with modern biomedical medicine, where active ingredients are extracted and concentrated into tablet or liquid so they have to be taken in their exact dose. The use of medicinal plants requires the user's participation and discernment to determine the appropriate dose. Thus in indigenous healing, the patient takes an active role in her/his healing.

For these medicinal plants to be effective, they have to be taken regularly for some time. As Cora Loste says in "The Jungle Garden in the City", "The effect of using herbal medicinal plants is not a 'one time – big time' event, so I used them regularly."

Medicinal plants can either be used singly or in combination with many plants, or incorporated with therapeutic healing massage or in rituals.

B. Ilot/Hilot – Therapeutic Massage

The stories in this section relate the journeys and practice of some therapeutic massage practitioners and some healing journeys. The terms "*ilot*", "*hilot*", "indigenous massage practitioner", "traditional massage practitioner", "indigenous healer," "mangilot/mangelot" will be used interchangeably to mean one who practices indigenous therapeutic massage, referring to soft tissue manipulation. In some areas like Besao, *mang-ngilot* would also refer to a bone setter. In Lias, Barlig, the term "*man-uyad*" refers to a traditional healer who is skilled in both soft tissue manipulation and bone setting. There is one story by a man-uyad and all the other stories here are by mangilot.

Ilot or *hilot* is not specific to the Cordillera but a traditional Filipino healing practice that involves touch diagnosis and therapeutic massage and is deeply rooted in indigenous culture. It is holistic as it focuses on restoring balance and harmony in the body, addressing physical, emotional, and spiritual aspects of health. One specific example is the case of a child with *pilay* who presents with recurring fever and it is not treated by western allopathic medicine and who gets well after the *mangilot* does therapeutic massage for the soft tissue injury (in "Natural Healing Massage" by Alvin Puyao). Its holistic approach explains the rested and rejuvenated feeling of a tired person who had "ilot".

Ilot highlights the importance of energy flow in the body. Through soft tissue manipulation, employing various techniques such as kneading, stretching, pulling and pressing, *ilot* is able to alleviate tension, improve circulation of blood and energy, and promote relaxation and healing. The *mangilot* diagnoses or assesses energy blockages and works to restore the proper flow and balance and thus restore health and wholeness and maintain well-being. Thus, as shown in the stories, *ilot* is sought after even at present, usually by patients who had stroke or had injuries and by stressed or tired individuals.

As mentioned earlier in the section “Nature’s Healing Resources”, *ilot* incorporates natural elements like coconut oil, or in some cases, stones and other remedies derived from local plants like ginger patches, to enhance the healing process.

All the indigenous massage health practitioners who shared their stories here come from families of *mangilot*. As Alvin Puyao says in “Natural Healing Massage”, “He also has the natural healing ability that runs in the family.” (referring to his brothers). It is common for them to have one parent who is also a *mangilot*. As such, these healers observe and learn while still young and they draw on generations of indigenous knowledge about anatomy, energy flow, and herbal remedies. While recognizing that their healing ability is inherited, they also believe that healing comes from God. As Julio Coyasan said, “We are only instruments of healing. It is God who heals.”

The practice of *ilot* has also adapted over time. As they practice their craft, the therapeutic massage practitioners study their clients, read books, get information in the internet, learn from other massage practitioners and develop their own style of healing. Therapeutic massage is also a worldwide tradition and with easier access to information, trainings and travel, these indigenous healers enrich their craft with experiences of others round the globe. Local trainings are provided by government like the Baguio City government, as part of the government accreditation of massage clinics in the city.

“Aside from the above-mentioned techniques (Shiatsu, Swedish and Thai), I developed other ways of healing like walking on pebbles…”,

says Julio Coyasan in “Blending Indigenous Wisdom and Modern Healing Massage.”

The therapeutic massage practitioners integrate elements and techniques from indigenous traditions of other cultures and also modernized techniques while maintaining traditional roots.

In the indigenous communities, *ilot* is traditionally done as free service for those in need. However, at present that the practitioners have relocated to Baguio and nearby areas, they practice their craft to make a living to feed their family, except for one who has another source of livelihood.

C. Clairvoyance and Indigenous Healing Rituals

Just like the use of medicinal plants and therapeutic massage, clairvoyance and indigenous healing rituals are deeply rooted in the cultural, spiritual and ecological context of indigenous communities. In indigenous healing rituals, the diagnosis of illnesses is by clairvoyance where the clairvoyant is able to see the cause of the illness and prescribes the corresponding ritual to heal. Thus, in this book when we say, “indigenous healing rituals”, we mean it to include clairvoyance because one cannot heal without first diagnosing. “Clairvoyance is the ability to gain information about an object, person or event through extrasensory perception (ESP), rather than through the known human senses”. (Wikipedia). In indigenous communities and as reflected in the stories in this section, there are local shamans who have clairvoyant abilities. In this book, we define “shaman” as a spiritual healer found in many indigenous cultures and who is believed to have the ability to gain insight into the past, present or future and is able to mediate between the physical world and the spiritual realm. These indigenous healers believe that such healing abilities are gifts from God. “All I know and can do are gifts from God,” says Beatriz Aliwana.

This healing modality offers holistic healing, addressing not just physical ailments but also emotional, spiritual and community health. This modality is usually resorted to when western allopathic medicine fails to diagnose or explain and cure the illness and/or the cause is

discerned to be connected to the unseen forces. “Unseen forces” could mean ancestor spirits, nature spirits, strong or negative energies. These illnesses could present in varied ways like pains, untreatable infection, loss of appetite and withdrawal.

Various kinds of healing rituals are mentioned in the stories such as rituals to call back the spirit of the person, rituals to counter negative energies such as a grudge or envy, rituals to communicate with ancestor and nature spirits. There is one cleansing ritual to cleanse the patient and family from trauma. Some healers are able to do distant healing.

These healing rituals incorporate spiritual practices such as prayer, ceremonies and involvement of healers or shamans who facilitate connection to the spirit world. Depending on the occasion or the type of ailment, some of the prayers include calling on the nature spirits or on the spirits of the dead, but what they have in common is that they all call upon the Supreme Deity. Beatriz Aliwana said, “What is important is hilingin natin sa Dios ang pagpapagaling kasi siya rin ang nakakagamot. Ipagkatiwala natin lahat sa Apo. Kung naniwala ka, gagaling ka.”

Aside from prayers, these rituals involve symbolic acts like offering a slice of meat and rice or a few drops of wine inviting the unseen to partake of these, maintaining harmony and peace among them and restoring peace and harmony when it is disturbed. This act recognizes the connectedness of the seen and the unseen which is characteristic of indigenous worldview. Further, this act creates a sacred space and thus help individuals or group to focus their intentions and feelings as they also invite spiritual guidance. Some rituals include only a healing prayer, and no offering is required.

In these rituals, the use of plants and plant by-products like wine, and animals that are present in the locality signifies and ensures the connectedness of people and the environment.

Participating in these rituals can also be empowering as it allows the individual to take an active role in their recovery and well-being, rather

than feeling passive and helpless. These rituals also often are a community effort, emphasizing the role of family and community support in the healing process. As such, these practices are passed down through generations, reinforcing cultural identity and community bonds, contributing greatly to mental health.

With the influence of foreign cultures through colonization and mass media, these indigenous healing rituals are adapting over time. With the introduction of Christianity, the Unseen Supreme Being is now called "God" or "Dios" or "Jesus". The traditional rice wine, *tapey*/*tapuy*, is often replaced by gin which is cheaper and more available. Native black pigs are preferred over others but now can be replaced by hybrid ones as these are more available. Native free-range chickens can also be replaced by commercially grown ones. The number of animals to be butchered in certain rituals is lessened to ease the financial burden of the host family. However, some families even add more animals to be butchered to provide sufficient meat for a bigger family and more guests. Still, these healing rituals maintain the core cultural elements, showcasing resilience in the face of change.

D. Other Wellness and Healing Modalities

In this section are six stories that don't quite fit the previous categories. One story is about the journey of a *manmadmad*, an indigenous prayer leader, one story is about strong *agasang* (life energy), two stories dwell on practices for protection from any illness/harm, accident, bad luck or bad energies. There is one ritual to invite catch in hunting and one ritual for good weather.

Just like the *mangilot,* the *manmadmad* comes from a family of indigenous healers. She also adapts to changing times, incorporating Christian prayers with the traditional ones. The story on Agasang highlights the presence of unseen energies around us which western science cannot measure as of the moment but which are present anyway. The rest of the stories are proactive practices. As part of community traditions, these rituals create a sense of order and predictability and offer a way for individuals to connect with the divine, seek guidance and help in maintaining wellness and well-being or

whatever is asked for.

E. Community Initiatives

There are three stories here- two from two barangays, Guisad Central and Liwanag-Loakan, and one from a non-government organization, CHESTCORE. These stories show that there are initiatives in the grassroots level, although limited.

C. THREATS AND CHALLENGES TO INDIGENOUS HEALTH AND WELLNESS

Generally, for all the healing modalities, there are two major challenges– one is the negative perception of people and health agencies of IHW practices and two is the dwindling transmission of knowledge and skills. According to informants, many people see IHW practices, especially healing rituals, as backward, pagan, and unscientific/superstitious. This is mainly due to colonization and the influence of religion, formal education. This is also because, although there are enough legal basis for the promotion and practice of IHW, the concerned government agencies are not fully supporting this. There are many researches, especially on medicinal plants, but the research outputs have still to be translated to benefits to the communities where the information came from, even if just to make them understand and appreciate the research output and for them to utilize it and gain from it.

As shown in Table 2, most of the healers are above 50 years old. They say that only a few of the younger generation are interested in learning the craft and continue the healing tradition. Even among the healer-informants, some are not keen on passing down the trade to the next generation because they think that their children should finish their studies first. This is related to the first challenge. Because of the negative perception of the general public on IHW practices and because of their nature as service, it is not a reliable source of livelihood and young people need a good source of livelihood for their future. In Baguio City where there are many indigenous peoples, there are those seeking indigenous healers, especially therapeutic massage practitioners but there is also stiff competition from many massage clinics and on-call practitioners. As for shamans and other healers, they do not ask for a service fee.

Another challenge in knowledge transmission is that healing rituals can only be learned through observation and actual practice and not through formal school.

Aside from the general negative perception of the public, these IHW practices require more time and effort compared to western allopathic medicine. In these fast-paced, convenient modern society, time and effort are precious. Many people find it too cumbersome to prepare and process medicinal plants into teas or even putting a teabag in hot water and they would prefer the convenience of just swallowing tablets and capsules, many of which can be bought over-the-counter.

With the high cost of land and proliferation of buildings in the city, there is little space left to grow medicinal plants for the community, family and friends. Pollution, forest denudation and climate change also adversely affect the survival and quality of medicinal plants and other healing substances.

D. CONCLUSION

There is enough legal basis for the recognition and promotion and development of indigenous health and wellness knowledge, systems and practices through the Indigenous Peoples' Rights Act (IPRA) of 1997 and the Traditional and Alternative Medicine Act (TAMA) of 1997. To implement these laws, the Philippine Institute of Traditional and Alternative Health Care (PITAHC) was created in 1997 and the Joint Memorandum Circular 2013-01 was passed in 2013. Since then, there have been plans, programs and initiatives, notably the numerous researches mostly by academe and research consortiums, the approval by the Department of Health of ten medicinal plants as contained in the pamphlet Sampung Halamang Gamot, the establishment by the Department of Health of herbal processing plants in strategic parts of the country, the commercial production of some herbal medicines by some Filipino pharmaceutical companies and the program on Gulayan sa Barangay. However, IHW still has to be mainstreamed into the formal health care system.

At the grassroots level, the stories of indigenous healers and patients show that IHW practices are being practiced in Baguio City and nearby Benguet, despite being urbanized communities and despite the fact that there are many non-indigenous peoples in the city. Some have massage clinics and some are on-call and some even travel to other places to help people. Thus, IHW is informally integrated in the health system.

The indigenous health practitioners are of various ethnicities, with roots from Abra, Benguet, Ifugao and Mountain Province. There are men and women healers and most of them are above 50 years old.

The three major indigenous healing modalities being practiced are use of medicinal plants, therapeutic massage and healing rituals, sometimes used alone or mixed. These modalities showcase the interconnectedness of people, nature and the general environment and the unseen and their spirituality. The use of medicinal plants and stones

and other natural resources show the interconnectedness with nature, the use of the hands for healing show the interconnectedness between people, and the recognition and respect of unseen spirits, including an Unseen Being higher than people, show the interconnectedness with the unseen and indigenous peoples' spirituality. The healers recognize that they are just instruments of healing and God is really the one who heals.

These indigenous modalities are deeply rooted in tradition and thus they also connect people to heritage and identity. Such nuances of healing are crucial for mental and emotional health.

Although not as widely practiced as western allopathic medicine, these IHW practices are sought after and have greatly helped many people in preventing and healing various ailments, especially those who cannot afford high prices of modern medicines and service fees of health professionals. Indigenous healing services are free or usually cheaper than western medicines. There are accounts of patients whose sickness cannot be determined and be cured by health professionals but were healed by indigenous healers. Some patients also integrated IHW practices with western medicines and were cured. Although these are anecdotal accounts, the healing that occurred meant life to the patient.

Propagation and use of medicinal plants is practiced for family members and friends, although some healers use it in combination with therapeutic massage for their patients.
The main challenge that indigenous healers face is the difficulty of transmitting the knowledge and skills, especially regarding rituals as these are learned mostly through observation. There is also a declining interest of younger generation to learn about IHW as there is the general perception that IHW is backward and unscientific, and its practice is not lucrative.

Overall, IHW practices are vital for the well-being of not only indigenous communities but the wider worldwide community, offering holistic healing and providing a sense of identity, belonging and connection to roots and environment.

Diagram on Indigenous Health and Wellness

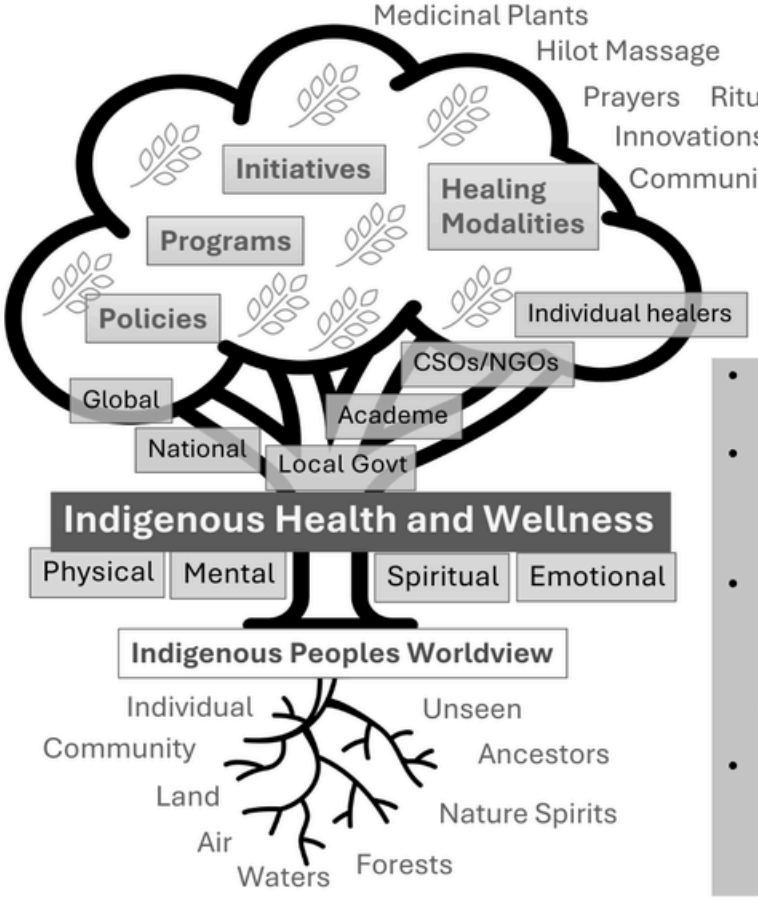
This diagram is an illustration of the contents of this book. The indigenous worldview of health and wellness, as represented by the roots of the tree, believes in the interconnectedness of the individual to the community, and to all things around, including the land, waters, air, and forests, the unseen spirits of nature and our ancestors who guide us in our daily lives. This holistic view of health and wellness also includes the belief that the physical, mental, biological, emotional and spiritual wellbeing of a person need to be addressed, to be able to live in harmony with nature and the environment.

Such an understanding is held, not only by indigenous healers who practice various healing modalities as seen in the stories included in this book, but by various entities whether they be from the academe, government, civil society or communities. They have particular laws, policies, programs and initiatives on indigenous health and wellness.

This body of knowledge and praxis on indigenous health and wellness emerged through time in response to the real health challenges we face, i.e., health inequity as seen in the lack of resources, services and urban centeredness of basic health care for the people, which is aggravated by the dominance of western curative medicine and pharmaceuticals in the prevailing health system in the country. Despite such great need for adequate holistic health services for the people, there is still a lack of appreciation for indigenous knowledge and practices, which people resort to for their own health and wellness, while threatened by the continuing loss of biodiversity, e.g. medicinal plants, forests, safe and nutritious food crops, that support such practice.

Diagram on Indigenous Health and Wellness

SYNTHESIS



Challenges

- Health inequity, lack of resources, health services, urban-centeredness of health care
- Dominance of western curative medicine, pharmaceuticals
- Lack of appreciation, non-recognition, discrimination of indigenous knowledge on health and wellness
- Lack of documentation, transmission of indigenous knowledge
- Loss of biodiversity necessary for health and wellbeing
- Poor cascading, non-implementation of particular policies on indigenous health

Key Messages

- Indigenous knowledge on health and biodiversity are closely linked.
- Indigenous knowledge and practices on health and wellness are effective and commonly used and resorted to by Indigenous communities
- Indigenous Health and Wellness is holistic, involving physical, mental, emotional and spiritual health, requiring harmony between community, the environment and the Unseen
- Indigenous knowledge should be recognized, supported, mainstreamed and transmitted as a valuable contribution to the health care system.

As a result of this research, some key messages are being forwarded: One, that Indigenous knowledge on health and biodiversity are closely linked; two, that indigenous knowledge and practices on health and wellness are effective and still commonly used by indigenous communities; three, that such knowledge and practices need to be documented, strengthened, promoted and transmitted as an essential component of indigenous peoples' cultural identity; and four, that indigenous health and wellness knowledge and practices are valuable resources that should be recognized, supported, and mainstreamed as an important contribution of indigenous peoples to the country's health care system.

Ways Forward: Key Advocacy Messages on Indigenous Health and Wellness (IHW)

KEY MESSAGE: Recognize and appreciate indigenous health and wellness (IHW) beliefs and practices and **promote their utilization**. IHW is holistic, transformative, relevant and has been effective for generations. IHW contributes to and is an integral part of the survival and development of people.

1. I**mplement existing national and regional health policies.**

There are existing national health policies related to IHW, but their implementation is slow, and it has not yet been adopted by the city of Baguio and other LGUs in the Cordillera Administrative Region. These need to be adapted to the local situation.

2. Recognize the efficacy of IHW and integrate these into the mainstream health care system.

Majority of the population view IHW negatively due to various influences that started during the time of the colonization that consciously pictured IHW as backward and unchristian. So instead of benefitting from it, people are shying away from it. Fortunately, many IHW beliefs and practices survived. This shows that IHW has been effective for generations, even before the coming of the colonizers. The fact that many people still practice it and patronize it in this modern times also helps to show its efficacy. Patients keep coming back to their indigenous healers because it has helped in their health problems, otherwise, they won't come back. IHW and modern medicine can be complementary to each other thereby greatly improving the health care system.

There is a need, therefore, to provide spaces where the practice of IHW can flourish. For example, government hospitals should continue or establish traditional medicine clinics in their premises and integrate it into mainstream medical care. These spaces where IHW can be practiced are venues to show the public the effectiveness, relevance,

and importance of IHW to an individual and to the whole population.

3. Appreciate the unseen and the holistic nature of IHW practices

Indigenous peoples recognize the interconnectedness of people and environment including the unseen as exemplified by rituals and sacred sites, interconnectedness with the land as shown by dependence for food, medicinal plants and other natural healing substances, and interconnectedness among people as shown by indigenous healing rituals. This shows the holistic nature of IHW which not only focuses of physical well-being but includes spiritual, emotional and mental well-being. This holistic approach to health is what gives IHW the edge over modern medicine which treats sickness through different fragmented specializations.

4. Conduct more research and documentation on IHW. Research on IHW is mostly limited to identification of medicinal plants and ethnographies. More research and documentation are needed to cover more areas in IHW beliefs and practices and to show the science behind these beliefs and practices. Aside from these, there is a need to **translate research output** to concrete benefits to the communities where the research was conducted like increase in the propagation and use of medicinal plants.

5. Conduct more educational activities on IHW. Transmission of indigenous knowledge and wisdom is badly needed as there is a negative perception of the general public on IHW and knowledge holders and indigenous health practitioners dying out. IHW practice is declining. IHW should be integrated in the IPED curriculum and in medical and allied medical curriculum to help ensure its continuity. This should be supported by everyone including the government, the academe, and the private sector. Utilize modern platforms for knowledge transmission like social media.

6. Promote Community and Home Gardens. The drastic change of diet from traditional slow food from organic farms to highly processed and chemicalized fast food from the market has created a wide array of diseases. The swine and poultry industry and the food industry in

general extensively uses chemicals and drugs to boost production, to preserve these foods for a long period of time, and to make them tastier. As a consequence, there is excessive and continuous consumption of sugar, salt, other flavor enhancers, and preservatives damage and animal products damaging the internal organs. It is high time to revert to the indigenous food production practices to prevent disease and maintain health and well-being. Aggressively implement the Gulayan sa Barangay and Gulayan sa Paaralan programs, utilizing organic food production methods.

7. Recognize sacred sites and promote indigenous environmental conservation practices. Indigenous peoples' worldview recognizes the need to protect and preserve the integrity and wholeness of the environment to promote and maintain health and well-being. Many development projects and other human activities in forests and mountains have polluted or taken over sacred sites resulting in impediment of health rituals and other indigenous activities. Promoting traditional environmental conservation practices shall ensure that the wholeness and integrity of the environment is maintained, properly protected, and its biodiversity maintained.

8. Support indigenous peoples' right to practice their IHW particularly home birthing and traditional birth attendants by crafting policies that support home birthing instead of discouraging or disincentivizing home births and incentivizing facility births. Home birthing has been discouraged due to various reasons, one of which is high infant and mother mortality rate during birthing process but there are many factors contributing to mortality like lifestyle, environment, food, stress, among others. Indigenous home birthing, like other IHW, has been effective for generations. It has much less cost. The important family and community support is there which is lacking in facility births. Traditional birth attendants just need support like trainings and providing them with necessary supplies.

9. Recognize indigenous ownership of the resources and knowledge over medicinal plants and other natural health products and share the benefits. Many pharmaceutical and drug

companies, health researchers, and the health business sector have, in general, exploited indigenous peoples by obtaining different knowledge on medicinal plants and minerals and other medicinal products, claiming intellectual property rights over them, and making profits out of them. And yet indigenous peoples have never been fully acknowledged as the real owners of this knowledge. It is high time to acknowledge the ownership of indigenous peoples to this vast knowledge on IHW and return to them the benefits that are due them. One concrete form of acknowledgement is to include this in the labeling and promotion of the medicinal plant or natural resource that is commercially produced.

10. Prioritize preventive and promotive community – based health care system instead of focusing on curative and hospital – centered one. The current health care system is more focused on treating illnesses instead of preventing them. This type of system makes the people reliant on western medicines and expensive gadgets and medical professionals which are costly and unaffordable by the poor. Government should focus more on educating the community that illnesses are preventable if they care of themselves, integrating indigenous health and wellness beliefs and practices. Government should implement existing structures in the barangay and municipalities that fully involve the residents in planning and implementing programs that address the socio-political factors that determine health and well-being.

The indigenous worldview of health and wellness believes in the interconnectedness of the individual to the community, and to all things around, including the land, waters, air, and forests, the unseen spirits of nature and our ancestors who guide us in our daily lives. This holistic view of health and wellness includes the belief that the physical, mental, biological, emotional and spiritual wellbeing of a person need to be addressed, to be able to live in harmony with nature and the environment.

Indigenous health and wellness knowledge and practices are effective and still commonly used by indigenous communities. These are valuable resources that should be recognized, supported and mainstreamed as an important contribution of indigenous peoples to the country's health care system.

PARTNERS FOR INDIGENOUS KNOWLEDGE PHILIPPINES

Transformative Pathways