Pagdikta (The Dictation): The Meanings In Filipino Mothers' Experience Of Using Herbal Plants In The Management Of Their Children's Fever

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ABSTRACT

One of the main indicators of an illness is fever and it is managed in different ways by mothers based on their existing culture. After a health diagnosis, dominant fever management of a certain community with inaccessible health center was the use of herbal plants despite easy access to relatively expensive over-the-counter medicine. Hence, we explored the meanings of using herbal plants in the management of children's fever by Filipino using qualitative-phenomenological research philosophy (Colaizzi,). Seven mothers were interviewed with the aid of recorders, journals, field notes and memos with the mothers' consents. The narrative data were analyzed using the Morse and Field process. Themes were discovered highlighting the process of how the mothers managed their children's fever through the utilization of herbal plants. Thematic variations in the use of herbal plants and their preparation, utilization and application were ascertained. From these thematic analysis emerged a cultural relationality which provided an integrated process of PAGDIKTA (Eng. dictation), the major theme of the experience. This summarized the selection, adoption and transfer of the herbal plants for management of fever with cultural involvement. PAGDIKTA [acronym which means PAG-pitas, DIK-dik, TA-pal] is the concept learned to present the views of cultural selection, adoption and transfer of fever management practice of motherinformants. PAGDIKTA can be further analyzed with the following subconcepts: Pagpitas (Eng. picking) is the process of choosing a culturally accepted herbal plant for their fever. Dikdik (Eng. pounding) is the progression of cultural adoptation and imbuement of practice by mother-informants. Tapal (Eng. application) is the application and transmission of the feverpractice based on the perceived and observed efficacy of practices directed to their children's fever. Cultural awareness, assessment and competence are needed to completely understand specific populations with special needs such as the mothers in a community in the Philippines.

INTRODUCTION

Fever is one of the most important vital signs especially for a child who has a limited way of expressing his discomfort. It is an immediate and obvious sign of an unlikely event or disturbances in the body. This is a symptom signifies a departure from normal function, sensation or appearance and might include physical aberrations⁽¹⁾. As a sign of inflammation and a vital sign requirement, temperature or heat may mean homeostatic imbalance in the body that should be arrested for prevention of further aggravation of one's condition. Fever as one of the most reliable indicators of illness or sickness, should be managed effectively in order to deter further bodily alterations.

Fever as an early sign of infection or imbalance can be managed by different techniques and procedures which can be traditional or scientific. Mothers in the Philippines render different fever management practices on their own unique ways. Being the first-line guardians who oversee the latter's general well-being, mothers can instinctively feel any variations from their children's normal temperature. Their general response to this situation is expected to reflect their cultural background and tradition⁽²⁾. Philippine strongly emphasizes caring values, behaviors and processes which tend to have more females than males doing caring roles⁽³⁾, at this instance, the Filipino mothers. In effect, there is a need for nurses to fully understand and respect their cultural context of beliefs, management and rituals off or the effective intervention to be rendered.

Concomitant with the acceptance that perceptions about health and illness vary widely across cultures, there is a growing public clamor for cultural understanding^(4; 5; 6). The search for cultural meaning in understanding symptoms involves a translation process that includes both the nurse's and the client's worldviews. There has been a rise in multicultural identities, with people expecting their cultural beliefs, values, and lifeways to be understood and respected by health

care providers⁽⁵⁾. Filipina mothers are able to provide diverse methods of controlling this vital sign to prevent aggravation of their child's condition. The various activities of the mother towards the said symptom can be considered both scientific and irrational. Nevertheless, setting aside culture, a mother's desire for her children to be healthy is universal⁽⁷⁾ so is the desire to prevent diseases and complications. Knowledge of the cultural expression and its traditional management of symptoms, just like fever, influence the decisions of the nurse who will facilitate the provision of culturally congruent competent nursing care. Because of the earnest aim of the profession to individualize nursing care, the research has been conceptualized with the end in view of providing a deeper understanding of the fever management practices of mothers.

In fine, this research further explored all possible fever management modalities of selected mothers in a particular community in the Philippines. However because of the broad context of the experience and limitations of the research⁽⁸⁾, we focused on the single most commonly used approach — the use of herbal plants. Herbal management is used by the mothers to routinely treat the fever of their children. Consequently, we wanted to understand the nuances of this choice, reasoning that a clearer picture of cultural involvement might emerge from the rich description of the experience of these mothers.

METHODOLOGY

In the search for the meanings of the lived experiences of the mother-informants who used herbal plants in the management of their child's fever, we found it deemed essential to utilize phenomenology as the research design. In dual perspective phenomenology anchored the study in two wars: as a philosophy and as a method, Phenomenology is a philosophy, is bracketed under empirical intuitions that refrains people from making judgments. It is an epoche, pertaining to suspension of inquiry and put emphasis on the essentials of discovering the true nature of reality. It is the study of consciousness that enable consciousness to refer to objects outside it. It is a philosophy of reflection on what is on mind to the exclusion of everything else. As a method, phenomenology is a poetizing activity, a study of essences. Phenomenology uncover the meanings of everyday existence and fulfilment of the human nature that is, to become fully aware of they really are. Through descriptive language, the subjects or participants perceived themselves in the given situation and understands their experiences and gain insights from them through a culture-specific assumptions and indigenous wisdom⁽⁹⁾.

With those, we believed that in the utilization of phenomenology we were able to

search for the meanings of the experiences of the mother-informants who used herbal plants in the management of their child's fever. Using phenomenology the meanings and interpretation of these practices can be viewed within the context of language, culture and social practices as handed down through generations of Filipino mothers^(8; 10). The discovery of meaning through this experience is the main aim of the study. This qualitative paradigm provided new ways of knowing and different ways to realize epistemic and ontological dimensions of human care transculturally⁽¹¹⁾.

Ethnography should have been blended with phenomenology as the research design but immersion, research instruments and contact to the mother-informants were not intensified and strengthened to make the study as such. We were only allowed by the local government unit to stay in the community for 6 months with 3 days per week contact. Nevertheless, we are aiming to verify the themes of the study using ethnography as a future research.

Phenomenological Sampling

This qualitative research deliberately selected the samples of the mother-informants of the study to fit between their experience and our research question and the presence of characteristics as a "good mother-informants". The mothers purposively chosen in the study were 30-50 years of age, married, with occupation not related in any field of medicine, who were born and permanently lived their entire life in the selected community, was not able to reach tertiary school and who rendered immediate care for a family member, particularly children with fever. The mothers were not related to any medical or allied health professional until the second degree of blood relations. No health centers were seen in the said community.

Locating the Informants

The research utilized intra-project sampling for research scope. This identified the boundaries of the phenomenon. It enabled us to determine what it is and what is not an example of phenomenon, what and why it is included and/or excluded⁽¹²⁾. Scoping is used to define a phenomenon very tightly and narrowly to saturate the data more rapidly. This is used because of the small sample size of the research – sevenmother-informants. The said intraproject sampling strategy guided us to use methods of unstructured interviews, asked a "grand tour question" and then provided motherinformants with space to tell their story with minimal interruption, at their own pace, starting whenever they wish to start. The evident fever management that we observed in the community focuses more on the use of herbal medicine, though some of the mothers used other practices. Hence, we the researchers fore shadowed the questions and