

Bridging Tradition and Modern Medicine: Health Beliefs and Practices of Meranaw Faith Healers Toward Vaccination Against Preventable Communicable Diseases

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ABSTRACT

Background: The study explores the health beliefs and practices of Meranaw faith healers in Marawi City, Lanao del Sur, regarding vaccination against preventable communicable diseases. The cultural and religious values of the Meranaw community significantly influence the acceptance and integration of modern medical practices, including vaccination.

Objectives: To understand how cultural and religious values affect the acceptance of vaccination among Meranaw faith healers and to identify barriers and facilitators in integrating vaccination with traditional healing practices.

Methods: This qualitative study employed one-on-one interviews with five Meranaw faith healers in Marawi City, Lanao Del Sur. The study aimed to explore their beliefs and practices regarding vaccination, as well as how these are influenced by their religious and cultural backgrounds. The data were analyzed thematically to identify common patterns and unique insights.

Results: Findings indicate general support for vaccination among faith healers, driven by Islamic teachings on disease prevention. However, barriers such as mistrust in modern medicine, fear of adverse effects, and misinformation hinder full acceptance. Religious leaders significantly influence public perceptions and vaccine acceptance.

Conclusion: Strengthening culturally sensitive health education and fostering collaboration between healthcare professionals and faith healers are essential for improving vaccination uptake. Integrating traditional healing practices with modern medical interventions can bridge gaps in healthcare delivery and enhance public health outcomes in the Meranaw community.

Keywords: Traditional Faith Healers, Vaccination, Transcultural Nursing, Communicable Disease, Muslim Community Health Practices

INTRODUCTION

Vaccination has been instrumental in reducing the global burden of communicable diseases, preventing an estimated 2 to 3 million deaths annually (Carter et al., 2024; Montero et al., 2024). Despite this success, vaccine hesitancy remains a significant public health challenge worldwide (Dubé et al., 2021; Galagali et al., 2022; Nuwarda et al., 2022). The World Health Organization (WHO) identified vaccine hesitancy as one of the top ten global health threats in 2019 (Galagali et al., 2022; Nuwarda et al., 2022). This reluctance or refusal to vaccinate, despite the availability of vaccines, threatens to reverse progress made in combating vaccine-preventable

In the Philippines, vaccine hesitancy has been a growing concern. A 2020 survey revealed that only 32% of Filipinos were willing to get vaccinated against COVID-19, citing safety concerns and mistrust in vaccines (Jhoys et al., 2021; Migrño et al., 2020; Yu et al., 2021). This skepticism is not limited to new vaccines; routine immunization programs have also faced challenges, leading to outbreaks of diseases such as measles (Carter et al., 2024; Kennedy et al., 2020). The situation is particularly complex in regions with diverse cultural and religious landscapes, where traditional beliefs and practices significantly influence health behaviors (Migrño et al., 2020; Nuwarda et al., 2022).

The Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) has the lowest vaccination rate among all regions in the Philippines, partly attributed to beliefs and misconceptions about vaccines (Agojo & Teehankee, 2023). Engaging with Muslim religious leaders has been identified as a crucial strategy in clarifying these misconceptions and improving vaccine acceptance (Dubé et al., 2021; Suryadevara, 2021). Religious perspectives significantly shape community responses to vaccination, making it essential to address cultural and faith-based concerns (Pangandaman et al., 2021; Yu et al., 2021).

Faith healers among the Meranaw people of Lanao del Sur, play a pivotal role in the community's health-seeking behaviors. They are often the first point of contact for health issues and are deeply respected for their spiritual and healing practices. Their influence extends beyond health to various aspects of daily life, making them key stakeholders in public health initiatives (Cerio, 2020; Kisa & Kisa, 2024; Sadang et al., 2021). The intersection of religious beliefs and vaccine acceptance is complex. While Islamic teachings emphasize the preservation of life and can support vaccination, misconceptions persist (Kisa & Kisa, 2024). Some individuals believe that vaccines contain haram (forbidden) substances or that reliance on vaccination contradicts faith in divine protection. These beliefs contribute to vaccine hesitancy within Muslim communities (Agojo & Teehankee, 2023; Kisa & Kisa, 2024).

Studies have shown that collaboration with faith-based organizations can enhance vaccine acceptance (Dubé et al., 2021; Suryadevara, 2021). Religious leaders possess the cultural competencies and trust to foster open dialogue about vaccines, dispel myths, and promote uptake (UNICEF-Philippines, 2022). In various communities, such collaborations have built confidence in public health systems and increased vaccination rates (Agojo & Teehankee, 2023).

Understanding the health beliefs and practices of Meranaw faith healers toward vaccination is essential for developing culturally sensitive health interventions. By acknowledging and integrating traditional healing practices with modern medicine, public health programs can become more effective and acceptable to the community (Migrño et al., 2020). This approach not only addresses vaccine hesitancy but also strengthens the overall health system by building trust and cooperation between healthcare providers and the community (Jhoys et al., 2021; Yu et al., 2021). Thus, this study aimed to explore the perspectives of Meranaw faith healers on vaccination against preventable communicable diseases.

METHODS

Study Design

This study employed a qualitative descriptive research design to explore the health beliefs and practices of Meranaw faith healers toward vaccination against preventable communicable diseases. This design was chosen to provide a comprehensive understanding of how cultural and religious factors influence vaccination decisions among Meranaw faith healers. This approach allowed for an in-depth exploration of how deeply rooted beliefs shape health behaviors, providing meaningful insights into how vaccine hesitancy can be addressed within this cultural context.

Participants and Study Setting

The study was conducted in four selected barangays in Marawi City, Lanao del Sur: Barangay Bangon, Barangay Sarimanok, Barangay Lancaf, and Barangay Basak Malutlut. These areas were chosen due to their dense Meranaw populations and the presence of known faith healers actively engaged in traditional healing practices. Five Meranaw faith healers were selected through purposive sampling based on the following criteria: (1) they must identify as Meranaw, (2) have received Islamic education, (3) be recognized in the community for practicing faith healing, and (4) have been performing healing practices for at least ten years. All participants were male, aged between 41 and 60 years, and were known for their influence in their respective communities. The selection ensured that the participants had extensive experience and cultural authority to provide meaningful insights into their health beliefs and practices.

Instruments or Tool

Data were collected using a semi-structured interview guide specifically developed for this study. The guide consisted of open-ended questions designed to explore the participants' beliefs about vaccination, their healing practices, and the barriers they perceive in complying with vaccination programs. The interview questions focused

on understanding how religious teachings influence their views on vaccination, how they perceive modern medical practices, and how they reconcile these with their traditional healing methods. The interviews were conducted in the Meranaw language to ensure comfort and authenticity in responses. All interviews were audio-recorded, with the participants' consent, and later transcribed and translated into English for analysis.

Data Collection

The data collection process took place over a one-month period. Each participant was interviewed individually in a private and comfortable setting, typically at their residence or a quiet community space to ensure privacy and openness. Each interview lasted between 30 minutes to an hour, allowing participants ample time to share their thoughts and experiences. The researchers built rapport with the participants to foster a sense of trust, ensuring that the discussions were genuine and reflective of their true beliefs and practices. Verbal and written informed consent was obtained from each participant before the interview commenced, and they were assured that their responses would remain confidential and solely used for academic purposes.

Data Analysis

Thematic analysis was utilized to interpret the data, following Braun and Clarke's (2006) six-phase framework. The process began with the researchers familiarizing themselves with the transcribed interviews through repeated readings. Initial codes were then generated by identifying significant phrases and statements related to the participants' beliefs and practices toward vaccination. These codes were reviewed and clustered into broader themes, reflecting recurring patterns and insights. The themes were refined and validated to ensure they accurately represented the participants' views. This iterative process allowed the researchers to capture the complex interplay between traditional healing practices and vaccination acceptance within the Meranaw community.

Ethical Consideration

Ethical approval for this study was secured from the Ethics Review Committee of the College of Health Sciences at Mindanao State University, following the guidelines outlined in the Philippine National Ethical Guidelines for Health and Health-Related Research (PNHRS, 2017). Before data collection, participants were fully informed about the study's objectives, procedures, potential risks, and benefits. Informed consent was obtained in both verbal and written forms, ensuring that participants understood their right to withdraw from the study at any point without facing any consequences. Confidentiality was strictly maintained by assigning pseudonyms to participants and securely storing all data, including audio recordings and transcripts. This study strictly adhered to the ethical principles of respect for persons, beneficence, and justice as outlined in the Declaration of Helsinki and the Philippine Health Research Ethics Code (PHREC).

RESULTS

There were five Meranaw faith healers participated in this study (Table 1), all of whom were male, married, and aged between 41 and 60 years old. Their professional backgrounds included Islamic education, with most serving as Shari'ah lawyers or graduates of Islamic colleges, and their length of practice ranged from 11 years to over 31 years. Through in-depth interviews, four key themes emerged: Acceptance and Support for Vaccination, Barriers to Vaccination Compliance, Integration of Traditional and Modern Healing Practices, and The Role of Religious Influence in Health Decision-Making.

Table 1. Profile of Faith Healers as Participants of the Study

ID/ Code	Gender	Age (years)	Civil Status	Educational Attainment	Lenth of Practice
P 1	Male	51	Married	Shari'ah Lawyer	31 years beyond
P 2	Male	43	Married	Shari'ah Lawyer	21 - 30 years
P 3	Male	45	Married	Shari'ah Lawyer	11 - 20 years
P 4	Male	48	Married	Islamic College Graduate	21 - 30 years
P 5	Male	46	Married	College Graduate	31 years beyond

Table 2. Summary of Themes, Subthemes, and Categories

Theme	Subtheme	Categories
Acceptance and Support for Vaccination	a. Vaccination as a Form of Disease Prevention	Vaccines prevent diseases and align with Islamic principles
	b. Alignment of Vaccination with Islamic Teachings	Islamic teachings support the use of vaccines for health protection
Barriers to Vaccination Compliance	a. Misinformation and Myths About Vaccines	Belief that vaccines cause infertility and other myths
	b. Religious Misinterpretations and Fear of Haram Substances	Concerns over haram ingredients in vaccines
Integration of Traditional and Modern Healing Practices	a. Complementary Use of Traditional Healing and Modern Medicine	Traditional remedies used alongside modern medicine
	b. Acknowledgement of Medical Advice for Preventive Health	Faith healers encourage adherence to medical advice
Role of Religious Influence in Health Decision-Making	a. Influence of Religious Leaders in Vaccine Promotion	Faith healers influence public health decisions
	b. Integration of Religious Teachings with Public Health Messages	Combining religious teachings with health campaigns

THEME 1: ACCEPTANCE AND SUPPORT FOR VACCINATION

This theme reflects the overall positive perception of Meranaw faith healers toward vaccination. Participants acknowledged that vaccination aligns with Islamic teachings and serves as an essential preventive measure for health protection.

Subtheme 1.1: Vaccination as a Form of Disease Prevention

Meranaw faith healers recognized vaccination as a valuable tool in preventing diseases. Their support is grounded in the belief that Islam encourages the preservation of life and health. They viewed vaccines as a means to protect the body from illnesses, aligning with the Islamic principle of safeguarding life.

"Daa marata san ko Islam. Sii ko Islam na okay anan, daa marataon. Ugop anan sii ko p'kasakit." (*There is nothing wrong with it in Islam. That is okay with Islam, there is nothing wrong with it. That can help those who are sick.*) – P1

This statement reflects the belief that vaccination is not contradictory to Islamic teachings but rather a form of support for health and well-being.

Subtheme 1.2: Alignment of Vaccination with Islamic Teachings

Participants highlighted how Islamic teachings support medical interventions like vaccination. They believe that the Qur'an promotes health and healing, making vaccination acceptable within their faith.

"Lagid uto o myangauuna myangangaaloy akn, isa pn a kataro o Allah a gyoto a pitaro iyan sa Qur'an a aya maana iyan gyoto a ayat na inituron ami so Qur'an ka bulong sii ko langonglangonan a myamaratiyaya." (*As mentioned in the Qur'an, it is a healing for those who believe. Similarly, vaccines can be seen as a form of protection.*) – P2

This perspective reinforces the belief that vaccines, much like spiritual healing, are tools for preserving health and are consistent with Islamic teachings.

Theme 2: Barriers to Vaccination Compliance

Despite overall support, several barriers hinder vaccine compliance among Meranaw faith healers and their

communities. These barriers include misinformation, religious misconceptions, and fear of side effects.

Subtheme 2.1: Misinformation and Myths About Vaccines

Some participants reported that false beliefs and misinformation about vaccines contribute to hesitancy. Misconceptions about vaccines causing infertility or severe health issues create fear and resistance.

"Aya pinakamyanug akun ron na gyoto a pakaito so kuwan nga, so kambabawata. Ka tig iran a mapakaito iyan ka so bakuna." (*One common belief I've heard is that the vaccine might reduce the ability to have children.*) – P3

This statement highlights how misinformation spreads within the community, resulting in fear and reluctance to get vaccinated.

Subtheme 2.2: Religious Misinterpretations and Fear of Haram Substances

Concerns about the permissibility of vaccine ingredients, specifically whether they contain haram substances, also hinder vaccination.

"Pakaalangan sa na barang-barang. Paganay a pakaalang san na gyoto a mga tao a di iran sasarigan so bolong. Ikaduwa a kasabapan, na gyoto a pkalk ba kasuldi a haram so lawas iyan." (*There are different barriers. The first is people who don't trust the medicine. The second is the fear that something haram might enter their bodies.*) – P1

This reflects the need for better communication about vaccine safety and its alignment with Islamic dietary and health laws.

Theme 3: Integration of Traditional and Modern Healing Practices

Participants showed a willingness to integrate traditional healing methods with modern medical practices, including vaccination, recognizing that both serve to promote health.

Subtheme 3.1: Complementary Use of Traditional Healing and Modern Medicine

Faith healers continue to practice traditional remedies for certain ailments but recognize the limitations of these methods and the importance of modern treatments like vaccines.

"Na kay geto a pkabulongan amie na datar opama o inbot, inbot a old, layopan o di na so scorpion na geto na pmbulongan amie oto na pndudaan amie." (*Our treatments are only for those bitten by snakes, centipedes, or scorpions, which we treat by spitting on the bite.*) – P5

This shows how traditional methods are still used for certain conditions, but modern medicine is also accepted for more severe health issues.

Subtheme 3.2: Acknowledgement of Medical Advice for Preventive Health

Participants emphasized the importance of following medical advice, particularly from Muslim doctors, for preventive care such as vaccination.

"Gyanan eh ipsampay ami ko pagtaw sabap sa so mga doctor na piresearchan iran ah gyanan ah mga vaccine na okay kamidn sa andamanaya eh kabakunae ko mga wata ka para an di pkaadn so mga sakit ah pakawma." (*We convey to the people that these vaccines have been studied by doctors, which is why we agree with vaccinating children to protect them from diseases.*) – P4

This illustrates how faith healers trust scientifically researched medical advice and advocate for community vaccination.

Theme 4: The Role of Religious Influence in Health Decision-Making

Faith healers acknowledged their influential role in guiding health behaviors in their communities, recognizing that their endorsements significantly impact vaccine acceptance.

Subtheme 4.1: Influence of Religious Leaders in Vaccine Promotion

Faith healers understand that their words and actions can heavily influence the community's decision-making regarding health interventions.

"Paganay ron na skami a mga ulama na kapakay a so tharoon amie kagya paparatiyayaan kami o tao, kapakay a so adna paratiyaya niyan na paratiyaa kami o tao." (*As scholars, what we say can be believed by people. Our words carry weight in the community.*) – P4

This underscores the responsibility of religious leaders to use their influence to encourage health-positive behaviors like vaccination.

Subtheme 4.2: Integration of Religious Teachings with Public Health Messages

Religious teachings can be effectively integrated with public health campaigns to increase vaccine acceptance.

"Sii ko Islam, na da ba ron pakaalang, ka kagya knaba anan haram, ka halal anan." (*In Islam, nothing can be a barrier because it is not haram; it is halal.*) – P1

This emphasizes that vaccination, when deemed halal, does not conflict with Islamic beliefs and should be supported as a public health measure.

DISCUSSION

Muslim faith healers, known for their deep-rooted influence within their communities, play a pivotal role in shaping health behaviors, including the acceptance of vaccines. Their endorsement of vaccination is often grounded in Islamic teachings that prioritize the preservation of life and the prevention of harm. For instance, the principle of "preservation of life" (hifz al-nafs) in Islamic jurisprudence underscores the importance of safeguarding human health, thereby supporting preventive measures like vaccination. Engaging these religious leaders in public health initiatives has been shown to enhance vaccine uptake among Muslim populations, as their guidance can effectively address religious concerns and dispel misconceptions related to vaccine safety and permissibility.

This study emphasized the significant role of religious beliefs and leaders in influencing vaccine acceptance among Muslim communities. Faith healers, as respected figures, can either facilitate or hinder vaccination efforts based on their interpretations of Islamic teachings. Their endorsement of vaccines, grounded in the Islamic principle of preserving life, can enhance public health initiatives (Cerio, 2020; Kawi et al., 2024; Sadang et al., 2021).

However, challenges persist due to vaccine hesitancy stemming from religious concerns. Misconceptions about vaccine ingredients, particularly fears of haram substances, contribute to reluctance. Addressing these concerns requires clear communication about vaccine composition and endorsements from Islamic scholars affirming vaccine permissibility (Alsuwaidi et al., 2023; Mardian et al., 2021). The integration of traditional healing practices with modern medicine among Meranaw faith healers reflects a broader trend in various cultures where both systems are used complementarily to address health concerns. This practice acknowledges the value of both traditional and modern medicine in promoting health (Kisa & Kisa, 2024; Samsudin et al., 2023).

Engaging faith-based organizations (FBOs) in vaccination campaigns has been recognized as a powerful strategy to improve vaccine uptake, particularly in communities where religious beliefs strongly influence health behaviors. FBOs effectively address the "Three Cs" of vaccine acceptance—confidence, complacency, and convenience—by leveraging their established trust within communities. By disseminating accurate health information and addressing vaccine-related concerns, they help build public confidence in vaccine safety and efficacy. Also, FBOs emphasize the moral and communal responsibility of vaccination, reducing complacency by reinforcing the importance of preventive health measures. Their involvement also improves convenience by providing accessible vaccination sites, organizing transportation, and assisting with appointments, effectively removing logistical barriers to vaccine access (Alsuwaidi et al., 2023; Soni et al., 2023; Syed et al., 2023).

Numerous studies have highlighted the success of partnerships between public health agencies and FBOs in increasing vaccination rates. For instance, faith-based initiatives have been crucial in combating vaccine hesitancy during the COVID-19 pandemic by tailoring health messages to align with religious values and community norms (Jhoys et al., 2021; Mardian et al., 2021; Yu et al., 2021). The World Health Organization also acknowledges that addressing confidence, complacency, and convenience through culturally sensitive approaches can significantly enhance vaccine acceptance (Dubé et al., 2021; Kisa & Kisa, 2024). Moreso, hosting vaccination drives in religious venues has proven effective in improving access and reassuring hesitant individuals (Datukali & Pangandaman, 2024; Kisa & Kisa, 2024; Samsudin et al., 2023).

Educational initiatives that are culturally sensitive and respect religious beliefs are essential for improving vaccine acceptance, particularly in Muslim communities where faith significantly influences health decisions. Providing accurate, science-based information in a manner that aligns with religious values helps build trust and reduces vaccine hesitancy. Collaborations between public health authorities and religious leaders are especially effective in addressing misconceptions about vaccines, as religious leaders hold significant influence and credibility within their communities (Carter et al., 2024; Kawi et al., 2024). By engaging these leaders in health campaigns, public health messages can be framed in ways that resonate with religious teachings, making them more relatable and acceptable to the community. This partnership fosters informed decision-making, empowering individuals to prioritize their health without feeling that their religious beliefs are being compromised.

Furthermore, integrating religious perspectives into educational campaigns creates opportunities to correct misinformation and clarify misconceptions about vaccine safety and permissibility. Studies have shown that when health education is delivered through trusted religious figures, communities are more receptive to public health interventions (Soni et al., 2023; Syed et al., 2023). Faith-based messages that emphasize the compatibility of vaccination with Islamic principles, such as the duty to preserve life, can encourage greater acceptance and participation in vaccination programs (Soni et al., 2023). This collaborative approach not only addresses scientific concerns but also alleviates religious doubts, ultimately leading to more informed and confident health decisions. By bridging the gap between science and faith, educational initiatives can significantly contribute to the success

of vaccination campaigns and overall community health.

CONCLUSION

In conclusion, the interplay between Islamic faith and vaccine acceptance is complex, necessitating culturally sensitive approaches that involve religious leaders in public health strategies. Well-known and influential faith healers are part of biggest players to improve vaccination acceptance and contribute to the success of immunization program in the country. With it, acknowledging and addressing religious concerns, it is possible to enhance vaccine acceptance and improve health outcomes in Muslim communities.

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Conflict of Interest

The authors declare that they have no competing interests.

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