Attitude of Rural Dwellers to the Use of Ethno-Medicinal Practices (EMPs) in Osun State, Nigeria

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ABSTRACT

The use of EMPs among rural dwellers cannot be overemphasized. People use Ethno-Medicinal Practices (EMPs) in their quest for good health, which is basic to economic productivity. The study determined the attitude of rural dwellers with a view to describing respondents' perceived relative advantage of EMPs over the orthodox alternative. Multi-stage sampling procedure was used to select 270 respondents from 27 farming communities in 9 Local Government Areas of the state. Structured interview schedule, Focus Group Discussion (FGD) sessions and Key Informant Interviews (KII) were appropriately used for data collection. Suitable descriptive and inferential statistics were used to analyze the data. Results showed that majority (78.90%) of the respondents were male with a mean age of 51.8 years ±14.1, average farm size was 3.14 hectares ± 1.5 with majority being poorly educated. Majority (90%) of the respondents had positive predisposition to EMPs. Ease of meeting herbal experts (99.6%), ease of communicating knowledge of herbal preparations (99.3%), low cost of herbal preparations (98.9%), availability of needed herbs (98.5%), and root cure effect (complete removal of the ailment cause and not just its symptoms or effects) of herbal preparations (98.1%) were some of the respondents' perceived relative advantages of EMPs over the Orthodox alternatives. Findings from FGDs and KII consolidated the qualitative data and exposed the preventive and curative dimensions of EMPs. Results further showed that respondents' had high attitude to EMPs which showed a significant relationship with their use of EMPs at ($p < 0.05$). Thus, EMP has notably contributed to the enduring livelihood of rural dwellers and it should be properly recognized and promoted.

Key words: Attitude, Rural dwellers, Ethno - Medicinal Practice

INTRODUCTION

Being healthy is a necessary requirement for economic productivity of any individual. Nigeria, like other typical African countries, is an agrarian economy in which agriculture and other agro-allied enterprises are the most popular income-generating activities, providing employment for up to 90 per cent of the rural dwellers (World Bank,1993). The rural populace, which constitutes about 70 per cent of the total population in Nigeria, provides virtually all the nation's home-produced food, though, without adequate and timely responsiveness to their healthcare needs from the government relative to what operates in the urban centers (Mafimisebi and Oguntade, 2010). Oye (2011) further reported low patronage to hospitals in the few rural communities where government's hospitals are built. It is

also observed that private hospital and reliable pharmaceutical shops are rarely found in many Nigerian rural communities as it obtains in the urban communities. However,in order to remain economically active, rural dwellers are noted to rely almost exclusively on the use of EMPs for meeting their healthcare needs as an alternative to orthodox care which is popular among the urban dwellers (Olayide, 1980; Olayemi, 1999; Ajani and Ugwu,2008).Some of the questions this study sought to answer include: Why has it been fairly difficult to wholly embrace orthodox medicare among rural dwellers? What attitude do they hold for the EMPs that they practice and what are their perceived relative advantages of EMPs over the orthodox alternative?

Thus, the objectives of the study are to:

1. determine the attitude of rural dwellers to the use of EMPs, and
2. describe respondents' perceived relative advantages of EMPs over the orthodox alternative.

Hypothesis of the study

One hypothesis was stated in null form for the study:

H_o: There is no significant relationship between attitude of farmers to ethno-medicinal practices and their level of use of EMPs.

Methodology

Farmers in Osun state was the target population for this study. The State has three Agricultural zones which are Iwo, Ife/Ijesa and Osogbo, having seven, ten and thirteen Local Government Areas (LGAs), respectively. Using a multistage and proportionate sampling procedure, a total of 9 LGAs were selected. At the second stage, 3 farming communities were randomly selected from the list of farming communities in the selected LGAs, making a total of 27 communities. At the third stage, 10 respondents (farmers) were randomly interviewed from each community, making a total of 270. Structured interview schedule, Focus Group Discussion (FGD)sessions and Key Informant Interviews(KII) were appropriately used to collect data. Frequency counts, per centages, mean, standard deviation, chi-square, correlation and regression analyses were used to analyze the data. Mean ± standard deviation was used to rank respondents' attitude and use of herbs into high, medium and low levels. Ten positive and ten negative attitudinal questions were used on a five point Likert scale. Respondents' identification, medicinal awareness, and their use of twenty listed plants as well as the means of treatment administered in the times of ailment were used to quantify the use of EMPs among the farmers.

Results and Discussion

Socio – economic characteristics:

Results in Table 1 show that about 79 per cent of the respondents were male while 21.1 per cent were female. Most rural women showed high reluctance to welcoming strangers in the absence of their husbands. The mean age of the respondents was 51.8 years with standard deviation of 14.1. This shows that youths are no longer involved in agriculture as it used to be. More

than half of the respondents (56.7%) were Muslims with 43.3 per cent being Christians. Majority (87.8%) of the respondents were married with only 8.9 per cent being single as at the time of this survey. Results in Table 1 further show that the mean household size was 7.1 people with standard deviation of 2.3. Also, only 20.4 per cent of the respondents never attended formal educational institutions. This implies that majority (79.6%) of the respondents had some taste of formal education that suggests modernity and civilization. However, only 4.4 per cent acquired tertiary education.

Table 1: Distribution of respondents by some socio economic characteristics N = 270

Variables	Frequency	Percentage	Mean	Standard Deviation
Sex				
Male	213	78.9		
Female	57	21.1		
Age				
≤ 30	22	8.2		
31 – 40	43	15.9		
41 - 50	63	23.3		
51 - 60	71	26.3		
61 - 70	44	16.3		
≥ 70	27	10.0	51.8 years	14.1
Religion				
Christian	117	43.3		
Islam	153	56.7		
Marital status				
Married	237	87.8		
Separated	2	0.7		
Widowed	7	2.6		
Single	24	8.9		
Household size				
1 – 4	43	15.9		
5 – 8	153	56.7		
9 – 12	70	25.9		
≥ 13	4	1.5	7.1	2.3
Years of education				
No formal education	59	20.3		
1 – 3	34	12.6		
4 – 6	72	28.2		
7 – 9	32	11.9		
10 – 12	61	22.6		
< 12	12	4.4	6.2	4.4

Source: Field survey, 2012

Respondents' attitude to using herbs:

Results in Table 2 show that all the respondents (100%) agreed that herbs are natural gift from God for food and medicine; herbs can be used alone to treat different ailments; herbs work effectively if rightly used; herbs cure ailments from the "root"; and that children nurtured with herbal medicine are observed to be stronger than those grown with orthodox medicine. Almost all the respondents agreed that procedure to meeting herbal experts is easier than meeting biomedical doctors or pharmacists (99.6%); natural things are better for the body than the artificial alternatives (98.5%); herbs can treat some ailments that orthodox drugs cannot treat (98.5%); Herbal medicine includes eating vegetables and fresh fruits (98.5%); while 97.0% believed that each community is naturally blessed by God with herbal resources to meeting their various health needs.

"*Se bi ola Oloun la n je, ewe igbo lo yi wa ka yii fun lilo wa*" meaning "we are just enjoying the grace of God, we are surrounded with these herbs for our use".

FGD report from Itagunmodi, Atakunmosa West LGA

"*Ki le ro, omo ta a fa gbo to gbodo san n gun ju awon omo ajebota lo*" meaning " what do you think, a child raised with herbal concoction must by stronger than the butter eating children". "Butter eating children" was used to refer to children raised with orthodox medicine and different modern exposures.

FGD report from Igbokiti, Egbedore LGA

All the respondents disagreed to the statements that "using herbs is against their religious doctrines" and that "herbs alone cannot cure ailments except when used with OM". They believed that herbs alone had been effectively used long before the introduction of the orthodox alternatives as they frequently said "*ki agbado to de aye, ki ni kan ni adie n je"* which means before maize became popular, chicken had been eating something. Majority of elderly respondents said they were brought up with herbal concoctions alone which they took daily either sick or not. Furthermore, almost all the respondents disagreed with the statements that "herbs as drugs are meant for poor people" (97.8%), "herbs as drugs will never work without incantations" (97.0%), "orthodox medicines are much more effective than herbal alternatives" (97.0%), and that "dosages in herbal medicine are very difficult to estimate" (91.1%). Majority also disagreed that "herbal preparations are always associated with unhygienic procedures" (88.2%), and that "using herbs as drug is very stressful to prepare" (71.1%). About half of the respondents disagreed that "seasonal changes adversely affect availability of medicinal herbs" (52.6%) and that most herbs are very dangerous to use (50.8%). It was commonly reported that alternative herbs do grow per season and that herbs are very safe to use when one has a good knowledge of what he is using. However, a respondent in **Itagunmodi (Atakumosa LGA)** expressed his present discontinuance with the use of herbal medications in favour of faith healing. Ekong (2010), however described this faith healing as part of traditional medicine since it predated orthodox medications.

Table 2: Distribution of the respondents by their attitude to using herbs

S/N	Attitudinal questions	Strongly Agreed	Agreed	Undecided	Disagreed	Strongly Disagreed
1.	Herbs are natural gift from God for food and medicine	209 (77.40%)	61 (22.60%)	0	0	0
2.	Natural things are better for the body than the artificial alternatives	198 (73.30%)	68 (25.20%)	4 (1.50%)	0	0
3.	Herbs can be used alone to treat different ailments	145 (53.70%)	125 (46.30%)	0	0	0
4.	Herbs work effectively if rightly used	169 (62.60%)	101 (37.40%)	0	0	0
5.	Herbs cure ailments from the root	250 (93.0%)	20 (7.0%)	0	0	0
6.	Herbs can treat some ailments that orthodox drugs cannot treat	143 (53.0%)	123 (45.60%)	0	4 (1.50%)	0
7.	HM includes eating vegetables and fresh fruits	207 (76.70%)	59 (21.90%)	0	4 (1.50%)	0
8.	Children grown with herbal medicine are stronger than those grown with OM	168 (62.20%)	102 (37.80%)	0	0	0
9.	Each community is naturally blessed by God with herbal resources to meet their various health needs	58 (21.50%)	204 (75.60%)	8 (3.0%)	0	0
10.	Procedure to meeting Herbal experts is easier than meeting Biomedical Doctors or pharmacists.	83 (30.70%)	186 (68.90%)	1 (0.40%)	0	0
11.	Most herbs are very dangerous to use	0	8 (3.0%)	125 (46.30%)	129 (47.80%)	8 (3.0%)
12.	Dosages in Herbal medicine are very difficult to estimate	0	0	24 (8.90%)	225 (83.30%)	21 (7.80%)
13.	Herbal preparations are always associated with unhygienic procedures	0	1 (0.40%)	31 (11.50%)	206 (76.30%)	32 (11.9%)
14.	Herbs as drugs are meant for poor people	0	0	6 (2.22%)	104 (38.50%)	160 (59.30%)
15.	Herbs as drugs will never work without Incantations	4 (1.50%)	2 (0.70%)	2 (0.70%)	70 (25.90%)	192 (71.10%)
16.	Using herbs as drug is very stressful to Prepare	0	32 (11.90%)	46 (17.0%)	180 (66.70%)	12 (4.44%)
17.	Using herbs is against my religious doctrines	0	0	0	74 (27.40%)	196 (72.60%)
18.	Herbs alone cannot cure ailments except when used with OM	0	0	0	179 (66.30%)	91 (33.70%)
19.	Orthodox medicines are much more effective than Herbal alternatives	0	0	8 (3.0%)	233 (86.30%)	29 (10.70%)
20	Seasonal changes adversely affect availability of medicinal herbs	0	43 (15.90%)	85 (31.50%)	129 (47.80%)	13 (4.80%)

Source: Field survey, 2012

The respondents were grouped into three categories based on their attitude about the use of herbs. Though almost all the respondents had attitudinal scores well above the mid score of the maximum obtainable score for attitude, the statistical information (Mean ± S.D) from the data shows that only 10 per cent had 'unfavourable' attitude towards herbal use, majority (82.6%) had 'neutral' attitude while 7.4 per cent had favourable attitude towards the use of herbs. However, qualitative information from FGDs and Key informants unveiled that the responsiveness of the majority of the farmers to the use of herbs as medicine was well above average but not opposed to the usage of the orthodox especially when speedy relief is aspired. The possession of a positive attitude to using herbs by the majority was also a motivating factor to using of herbs as alternative to orthodox medicine.

Perceived relative advantage of ethno-medicinal practices over the orthodox equivalent

Results in Table 3 show the respondents' perceived relative advantages of herbs over the conventional orthodox medicines.

Table 3: Distribution of respondents by the perceived relative advantages of ethno-medicinal practices over the orthodox equivalent

S/N	Relative advantages	High	Average	Low
1.	Ease of meeting herbal experts	269 (99.6%)	1 (0.4%)	0
2.	Low cost of herbal preparations	267 (98.9%)	3 (1.1%)	0
3.	Root cure effect of herbal preparations	265 (98.1%)	5 (1.9%)	
4.	Availability of needed herbs	266 (98.5%)	4 (1.5%)	0
5.	Safety of herbal preparations	245 (90.7%)	25 (9.3%)	0
6.	Flexibility of resources for herbal preparations	266 (98.5%)	0	4 (1.5%)
7.	Effective self medication with herbal preparations	215 (79.6%)	54 (20.0%)	1 (0.4%)
8.	Easy communication of knowledge of herbal preparations	268 (99.3%)	2 (0.7%)	0
9.	Compatibility with culture	270 (100%)	0	0
10.	Multiple means of herbal administration	258 (95.6%)	10 (3.7%)	2 (0.7%)
11.	Body friendliness of herbal medication	208 (77.0%)	62 (23.0%)	
12	Repeatability of herbal effectiveness	250 (92.6%)	16 (5.9%)	4 (1.5%)
13.	Multi-functional nature of herbs	197 (73.0%)	43 (15.9%)	26 (9.6%)

Source: Field survey, 2012

Ease of meeting herbal experts: Almost all (99.6%) the respondents described the ease of meeting herbal experts as a relative advantage over the orthodox alternative. They believed that no one is an epitome of herbal knowledge as various effective prescriptions could be described by same or different people for a particular ailment. However, respondents generally referred to most village elders as herbal experts. This finding is in line with the WHO's (2010) declaration that most rural dwellers in the developing countries of the world have greater access to using HM.

Low cost of herbal preparations: About 99 per cent of the respondents described herbal medications cheaper than the orthodox alternatives. This conformed to the WHO's (2010) declaration that HM are more affordable to most rural dwellers in the developing countries of the world than the orthodox alternatives. This conforms to Mafimisebi and Oguntade (2010), who compared the average cost of malaria treatment, based on Atesunate Combination Therapy (ACT) and herbal medication to be ₦1,500 and ₦200 respectively or free when sourced and prepared personally. This must have probably aided better saving or investments among the respondents.

***Root cure* effect of herbal preparations:** This described herbs' ability to completely remove the ailment cause and not just the symptoms or effects of the ailment. About 98 per cent of the respondents perceived the *root cure* ability of herbal preparation as another relative advantage of herbal medications over the orthodox alternatives. This is in line with Oye (2011) while reporting respondents' opinion on herbal efficacy.

It was opined that a*wo iwotan ogun oyinbo gan lo mu ki aisan po ngboro*. This means that the incomplete healing from the orthodox drugs have made sicknesses more in the cities.

FGD report from Ojeyemi village, Orolu LGA

Availability of needed herbs: Most (98.5%) of the respondents perceived the availability of herbs as an advantage of herbs medication over the orthodox medicines that used to be occasionally hawked in their villages or sought for from towns. Many respondents actually noted that most herbs that naturally grow around the immediate house environs are sufficient to managing the very common ailments of man, only if one has a good knowledge of their various uses.

Safety of herbal preparations: About 92 per cent of the respondents considered the safety of herbal preparations as another relative advantage. Apart from few side effects and the superficial healing of orthodox medication that were described, the availability and accessibility of herbal experts were central to their higher safety perception of herbal medicine. This is in line with Prov.11:14 injunctions: Where no counsel is, the people fall: but in the multitude of counsellors there is safety.

Flexibility of herbal preparations: Most (98.5%) of the respondents also regarded herbal medications as more flexible than the orthodox alternative with reference to the possibility of using many alternative herbs to treating a particular ailment and also the

ability to use a particular herb in many alternative ways to treating various diseases.

Effective self medication with herbal preparations: Also, about 80 per cent of the respondents considered their ability for effective self medication with herbs as an advantage over the orthodox alternative. Their age long exposures to using herbs were considered enough to fall on whenever the needs arise. A consensus summation in Ekusa FGD actually described that "*ominira ni fun eni to ba mo lilo ewe ati egbo*" meaning it is freedom for those who know how to use herbs as medicines.

Easy communication of knowledge of herbal preparations: Almost all (99.3%) the respondents considered the ease in communicating the knowledge of herbal medicine among the rural community dwellers as a notable relative advantage of herbal medicines over the orthodox. This was mostly done through the free flow of informal communications among rural dwellers. Certified professionals like pharmacists and medical doctors have no such communication with the rural dwellers. It could also be inferred from respondents' general comments that the slavery of the majority without knowledge is not far from any system where knowledge is locked up among a minority sect who have the knowledge.

Referring to his children, a key informant said;

"*Ki won mo ba di eru oyinbo, gbogbo won ni mo ko ni ohun ti mo mo"* meaning " that they may not become slaves to the white, I taught all of them what I know" in the use of herbs.

A key informant in Aruosa, Olaoluwa LGA.

Compatibility with culture: Results in Table 3 show that all the respondents declared that the use of herbs as medicine is more culture compatible than the orthodox. The use of herbs is therefore described as part of respondents' way of life, which they traditionally live by in meeting their health care needs in their various communities.

Multiple means of herbal administration: Most respondents (95.6%) also noted this feature of herbal medication as posing a relative advantage on the use of orthodox medication. Herbs are said to be used internally and externally while treating many ailments. With respect to Malaria, which was generally regarded as the most common ailment among the farmers, respondents described that they had herbal preparation for drinking and another for bathing. A key informant in **Aruosa, Olaoluwa LGA**, described that this bathing essentially takes off the surface oil on the body, kill some body micro-organisms and also allow a better exchange of air across the body environment. He further described this to aid sweating. Respondents described concoction, infusions, decoction and tinctures are the major forms for oral use while poultices and local ointments are used externally. Instillations are said to be alongside used in the treatment of eyes, nose and ears. Also, suppositories and local enema were said to be occasionally used especially among children.

Body friendliness of herbal medication: Majority of the respondents (77.0%) described the body friendliness of herbal medication as another relative advantage. Some of the respondents particularly described the occasional body weakness and itches that they experienced while using orthodox medication as very unpleasant especially in the sun, which they cannot but go into.

Repeatability of herbal effectiveness: About 93 per cent of the respondents perceived the repeatability of herbal effectiveness as a relative advantage over the orthodox alternatives. Some respondents particularly made reference to some herbal malaria medication that they used as children, and yet, remained effective and sure till date. This suggests that disease causing organisms are less likely to develop resistance or tolerance to herbal drugs as they do to some orthodox antibiotics. WHO (1992) reported that malaria is now resistant to Chloroquine therapy. **Multi-functional nature of herbs:** About 73 per cent of the respondents perceived this as a relative advantage of herbal preparations on the orthodox alternatives. Orthodox medicines were regarded to have straight focus and faster but superficial effect on ailments while herbal medicines have multiple focuses and slower but sustainable effects on ailment. A key informant in **Aruosa (Olaoluwa LGA)** concluded by saying 'orthodox focuses on getting to the destination quick without minding the things on the road while herbal focuses the destination with a careful consciousness of what things are on the road. Truly, herbal medications may be slower but would surely execute a more detailed work'.

Test of Hypothesis

Results of correlation analysis in Table 4 showed that farmers' attitude to EMPs has a positively significantly relationship with the use of EMPs among them.

Table 4: Summary of correlation analysis between attitude and the use of EMPs

Variables	Correlation Coefficient (r)	Coefficient of determination (r2)	Per centage Contribution
Constant			
Attitude	0.295**	0.0870	8.70

Source: Field survey, 2012.
**Significant at 0.05 (95%)
Dependent Variable: Use of Herbs

Table 5: Summary of regression analysis between the attitude and the use of EMPs

Variables	Standardizes Regression Coefficient (b)	T-value	P-value
Constant		3.998	0.000
Attitude	0.075	1.696***	0.091

Source: Field survey, 2012
***Significant at 0.1 (90%)
Dependent Variable: Use of Herb

Conclusion

Rural dwellers, most of whom are farmers, practically depend so much on EMPs to meet their health care needs and have formed positive attitude that favours the survival and continuity of practices among them. The perceived relative advantages of EMPs over the orthodox has somewhat influenced the farmer's attitude formation. The use of EMPs among farmers can not be despised as it plays notable roles towards their health maintenance and agricultural productivity.

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