



Exploring Local Wisdom: The Experience of Using Traditional Herbal Medicine in Treating Diseases among Rural Communities

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ABSTRACT

The study explores the intersection of traditional medicinal practices and the use of herbal medicine in rural communities, focusing on its integration with modern healthcare systems. It identifies a gap in understanding the subjective experiences of rural populations in using herbal treatments and their influence on health decisions. This research adopts a phenomenological approach to investigate these lived experiences. In-depth interviews with 10-15 participants were conducted, and thematic analysis revealed that herbal medicine is perceived as a natural, accessible, and culturally embedded treatment option. The findings underscore the complex interplay between traditional healing and modern healthcare systems, offering valuable insights for their integration. The study highlights the importance of further research to bridge traditional and modern healing practices in rural areas, addressing healthcare disparities more effectively.



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INTRODUCTION

The use of herbal medicine has been a longstanding tradition in many cultures, especially in rural areas, where it often represents a primary form of healthcare (Ahmad, 2007). These practices are deeply rooted in local knowledge and cultural heritage, often passed down through generations. Herbal remedies are typically derived from plants, and their use ranges from treating common ailments such as colds, digestive issues, and minor infections, to more chronic conditions (Ajewole dkk., 2001). Despite the rapid advancements in modern medicine, many communities continue to rely on herbal medicine due to its perceived safety, accessibility, and alignment with cultural beliefs and values.

In the context of rural communities, the use of herbal medicine is often intertwined with traditional knowledge systems, social networks, and community practices (Anwar dkk., 2024). This connection is not merely a matter of health but is also a reflection of cultural identity and a way of maintaining continuity with ancestral practices (Basuki dkk., 2004). Such communities often prefer herbal treatments over conventional medical care, partly due to mistrust or limited access to modern healthcare facilities. In many cases, the use of herbal remedies is also influenced by the belief that they are less harmful, more natural, and spiritually grounded in ways that modern medicine does not address.

While the prevalence of herbal medicine use is well-documented, there is limited understanding of the subjective experiences of those who rely on it (de Wet & Ngubane, 2014). Previous research on herbal medicine has primarily focused on its medicinal properties, efficacy, and potential risks. However, few studies have explored the lived experiences of individuals who use these remedies regularly. The significance of exploring these experiences is vital, as it reveals the personal and cultural meanings associated with herbal medicine and its integration into daily life. This

gap in the literature highlights the importance of a phenomenological approach, which centers on understanding individuals' experiences and the meanings they assign to their practices.

Phenomenology, as an approach, allows for a deep exploration of these lived experiences by capturing the personal, subjective dimensions of health practices (Donno dkk., 2021). By focusing on how individuals perceive and interpret their use of herbal medicine, the study aims to provide a richer understanding of the phenomenon that goes beyond its mere functional use. This perspective is essential for addressing the broader questions of how traditional healing practices can be integrated into modern healthcare systems in ways that respect cultural values while ensuring safety and efficacy.

Research into individuals' subjective experiences has become an increasingly important field, especially when seeking to understand complex cultural and health-related phenomena, such as the use of herbal medicine (Ghosh dkk., 2013). The experiences of individuals within rural communities—shaped by personal, social, and cultural contexts—carry significant value in understanding why and how certain health practices, such as herbal remedies, are maintained over time. These experiences are more than just behavioral patterns; they are embedded in meaning systems that shape and inform the choices people make regarding their health and wellbeing.

However, capturing the depth of these lived experiences presents significant methodological challenges. Traditional quantitative methods, which often rely on surveys or numerical data, fall short of capturing the nuances of individuals' personal experiences. While quantitative approaches are effective for generalizing trends, they fail to address the underlying meanings, beliefs, and cultural influences that shape health practices like the use of herbal medicine (Gobvu dkk., 2023). This is particularly true in rural settings, where the socio-cultural factors influencing health decisions are deeply personal and context-dependent. Quantitative methods, therefore, cannot fully explore the subjective dimensions of these practices—such as the emotional and spiritual connections individuals have with herbal remedies or the role of community traditions in shaping health decisions.

Qualitative approaches, particularly phenomenology, are better suited for exploring these deep, subjective experiences. However, even within qualitative research, capturing the essence of individual experiences requires careful attention to detail and method. Phenomenological research, which seeks to uncover the meaning and essence of lived experiences, can face challenges in ensuring that the interpretations remain true to the participants' voices. The risk lies in imposing researcher biases or assumptions, which can distort the participants' lived realities. Additionally, the richness of personal experience is often difficult to convey in ways that fully encapsulate the complexity of the phenomenon. These challenges highlight the limitations of previous research methodologies, which may overlook or inadequately address the intricate, lived experiences of individuals using herbal remedies.

As such, despite the increasing interest in ethnopharmacology and traditional medicine, there remains a critical need for research that not only documents the use of herbal medicine but also thoroughly examines the meanings attached to these practices. This gap necessitates a phenomenological approach, which can provide insights into how these practices are experienced, understood, and valued by individuals within their specific socio-cultural contexts.

Although much research on herbal medicine focuses on scientific aspects, such as effectiveness, active ingredients, or risks associated with use, this approach often overlooks the subjective experiences and deeper meanings experienced by individuals using it. The commonly used approach tends to be more practical and based on quantitative data, such as surveys or clinical trials, which provide information on the prevalence or effects of herbal medicine, but fail to explore in depth the reasons, beliefs, and personal experiences behind the choice of treatment. As a result, many important aspects of herbal use, such as emotional relationships, spirituality, or cultural influences in health decision-making, remain inadequately uncovered.

This limitation highlights the need for a more holistic and in-depth approach to understanding this phenomenon. Quantitative or analytical approaches, while useful for understanding the bigger picture, cannot capture the complexity and diversity of individual experiences in detail. Therefore, to

gain a richer understanding of how rural communities experience and interpret the use of herbal medicine, a method is required that can directly and authentically explore the essence of these experiences.

One solution to bridge this gap is to adopt a phenomenological approach. Phenomenology allows researchers to uncover individuals' subjective experiences in depth, focusing on how they feel, interpret, and ascribe meaning to the use of herbal remedies in their everyday lives. Through phenomenology, we can explore aspects often overlooked in conventional research, such as the influence of family traditions, spiritual beliefs, and social factors that shape decisions regarding herbal medicine. With this approach, research can provide a more holistic insight into the phenomenon of herbal medicine, as well as open the door to integrating this traditional knowledge into broader healthcare systems.

Research on the use of herbal medicine and traditional healing has rapidly developed, particularly in the context of ethnopharmacology and health sciences. Most previous studies have focused on the identification of active ingredients and the therapeutic potential of medicinal plants. However, few have explored the subjective experiences of individuals who use herbal medicine in their daily lives. Existing studies tend to rely on quantitative or experimental approaches that assess the effectiveness and risks of herbal medicines objectively, without delving deeper into the meanings attached to these practices by individuals and communities. Phenomenology offers a framework for exploring these subjective experiences, with an emphasis on how individuals understand and ascribe meaning to the traditional treatments they choose.

In this study, a phenomenological approach is used to explore the profound meanings associated with the use of herbal medicine among rural communities. This method was chosen for its ability to uncover the personal experiences and perceptions of participants regarding herbal medicine, which are often difficult to explain through quantitative approaches. The phenomenological approach enables researchers to understand how herbal use is perceived by individuals within their social and cultural contexts. By exploring these experiences, this research aims to address gaps identified in previous literature, namely the lack of understanding of the subjective and cultural dimensions that shape herbal medicine decisions in rural communities.

This article is structured in an organized manner to facilitate reader comprehension. After an introduction outlining the context of the phenomenon of herbal medicine use, the article will discuss the phenomenological methodology employed in the study. The data collection process, including in-depth interviews and observations, will be detailed, followed by data analysis through a thematic approach. Next, the results of the analysis will be discussed, followed by a discussion of the implications of the findings for traditional medicine and the integration of herbal remedies into modern healthcare systems. The article concludes with a summary of the key findings and the contribution of the research to the fields of ethnopharmacology and traditional medicine.

RESEARCH METHODS

Study Design

This study utilized a phenomenological approach to explore the lived experiences and perceptions of rural communities regarding the use of herbal medicine for health treatment (Hughes dkk., 2021). Phenomenology was chosen as the research design due to its emphasis on understanding individuals' subjective experiences and the meanings they attribute to those experiences. This approach is particularly well-suited for capturing the deep, personal insights of participants, allowing for an in-depth exploration of their perceptions, beliefs, and practices surrounding herbal medicine.

The study adopted a descriptive phenomenological framework, focusing on the direct descriptions of participants' lived experiences without seeking to interpret or explain them prematurely. This approach enables a clear understanding of how participants perceive the phenomenon in question and the meanings they attach to their practices, which aligns with the study's aim to uncover the deeper cultural, social, and individual dimensions of herbal medicine use.

Participants

Participants were selected using purposive sampling, focusing on individuals who could provide rich, relevant insights into the phenomenon of herbal medicine use. The inclusion criteria required participants to be members of rural communities aged between 30 and 70 years, with at least one year of experience using herbal medicine for health purposes. Participants who routinely used herbal medicine, but did not engage in conventional medical treatments, were prioritized to ensure the focus on traditional healing practices.

A total of 12 participants were initially involved in the study. To address concerns regarding the sample size and enhance the generalizability of the findings, additional participants were recruited, increasing the total sample to 20 individuals. The sample now includes a balance of genders, with ten male and ten female participants, representing diverse rural backgrounds. The average age of participants is 53 years, with the age range spanning from 30 to 70 years. All participants were selected based on their direct involvement with herbal remedies, either through personal use or family practices, making them well-suited to offer insights into the cultural and experiential aspects of herbal medicine. Exclusion criteria included individuals who had no experience using herbal medicine or those who primarily relied on modern medical treatments for managing health issues. Additionally, participants with cognitive impairments or difficulties in communication were excluded to ensure clear and reliable data collection.

Data Collection

Data were collected through in-depth, semi-structured interviews, designed to encourage open and reflective responses from participants about their experiences with herbal medicine (Ishtiaq dkk., 2021). The interviews were conducted face-to-face in participants' homes or local community settings, ensuring a comfortable and familiar environment to facilitate candid conversations. Each interview lasted between 45 to 60 minutes, allowing for thorough exploration of participants' views and experiences.

The interview guide was developed to explore various dimensions of the phenomenon, including participants' personal experiences with herbal medicine, the cultural and social influences on their practices, and their perceptions of its effectiveness and safety. Questions were open-ended, such as "Can you tell me about the first time you used herbal medicine?" and "How do you decide which herbs to use for specific health issues?"

To further enrich the data, informal observations were made during the interviews. These observations helped contextualize the participants' responses and provided insight into the social dynamics of herbal medicine use in the community, including the exchange of information and practices among family and friends.

Data Analysis

The collected data were analyzed using thematic analysis, a common method in phenomenological research. Data were transcribed verbatim, and the transcripts were read multiple times to immerse in the content and identify recurring themes and patterns related to participants' experiences with herbal medicine. Three main themes were identified and are defined as follows:

Cultural Embeddedness: This theme captures the deep integration of herbal medicine into participants' cultural traditions and practices. It reflects how herbal remedies are passed down through generations and are viewed as an essential part of rural heritage.

Accessibility and Affordability: This theme highlights the perception of herbal medicine as a readily available and cost-effective treatment option, especially in contexts where modern healthcare facilities are limited or unaffordable.

Perceived Effectiveness and Safety: This theme focuses on participants' belief in the efficacy and safety of herbal remedies compared to modern pharmaceuticals. It includes personal experiences and anecdotal evidence of successful treatments. Themes were developed inductively,

focusing on the meaning-making processes behind the use of herbal remedies and the cultural, social, and individual factors that shaped these practices.

Thematic analysis followed a systematic process, starting with the identification of initial codes from the data, followed by the grouping of similar codes into broader themes. These themes were refined and reviewed to ensure they accurately represented the data and aligned with the research questions. NVivo software was used to assist with organizing and coding the data, though the focus remained on the qualitative interpretation of the themes.

The analysis process aimed to uncover the essential meanings of the participants' lived experiences and to reveal the broader cultural and social implications of using herbal medicine within rural communities. The final themes were reviewed in relation to the literature on ethnopharmacology and traditional medicine, providing a deeper understanding of the integration of herbal medicine in contemporary health systems.

Ethical Considerations

Ethical approval for the study was obtained from the relevant ethics committee, ensuring adherence to ethical standards for research involving human participants. Informed consent was obtained from all participants prior to data collection. Participants were provided with detailed information about the study's purpose, procedures, and potential risks, and were assured of their right to withdraw at any time without consequence.

To maintain confidentiality, participants' identities were anonymized in all reports and publications. Personal details were securely stored and only accessible to the research team. Additionally, all data were stored in password-protected files to ensure privacy and data security. Participants provided written consent for their participation and for the use of their interview data in the research.

The study complied with international ethical standards for qualitative research, prioritizing the well-being and autonomy of the participants while ensuring that their perspectives were represented authentically.

RESULTS

Understanding of Herbal Medicine

The participants consistently described herbal medicine as a more natural, cost-effective, and safer alternative to modern medical treatments. Many emphasized the absence of side effects commonly associated with pharmaceutical drugs. As one participant (P3, aged 52) expressed, "Herbal medicine, it's from nature. It doesn't have chemicals like those tablets. It's better for your body. I trust it more." For most participants, herbal remedies were perceived as gentle on the body and effective for managing common ailments like coughs, fevers, and stomachaches.

However, their understanding of herbal medicine was not solely rooted in scientific knowledge but also in deep cultural beliefs. Many participants, particularly the elderly, associated herbal medicine with familial and community traditions, passed down through generations. For example, Participant 7 (aged 60) shared, "My grandmother used to say, this herb has been used by our ancestors. I trust it because it's been working for many years." This generational trust in herbal medicine reinforced its cultural significance and its perceived efficacy.

The experience of using herbal medicine was deeply tied to these traditions and the personal connection participants felt with their cultural heritage. Herbal remedies were seen not only as health tools but also as symbols of continuity, tradition, and cultural identity.

Cultural and Social Influence on Herbal Use

A prominent theme emerging from the data was the influence of cultural values and social networks on the use of herbal medicine. Participants reported that their decisions to use herbal medicine were often shaped by family traditions and local community practices. The social aspect of

herbal medicine use was evident in community interactions, where individuals shared knowledge and experiences. One participant, P2 (aged 43), recalled, “We gather and talk about herbs at the market. My friends and I exchange tips about what works best for a cold or a stomach ache.”

The practice of using herbal medicine was thus not merely an individual decision but a communal activity, woven into the fabric of social life. This sense of community reinforced the belief that herbal medicine was not only a personal remedy but also a communal heritage. Observations also showed that in local markets, people were often seen discussing remedies and seeking advice from others, reflecting the collaborative nature of herbal practice in rural areas.

Moreover, there was a sense of trust and reassurance in the shared knowledge. Participants expressed confidence in the effectiveness of certain herbs because they had witnessed their positive results in the lives of family members or neighbors. As Participant 5 (aged 55) explained, “I’ve seen my sister’s family use it, and they’ve all been healthy. So, I believe in it.”

Perception of Efficacy and Safety of Herbal Medicine

Participants were largely optimistic about the efficacy of herbal remedies, often attributing them to better long-term health benefits compared to modern medicine. Many respondents shared that while herbal treatments might take longer to show results, they were often perceived as more sustainable and holistic. “It takes a little longer, but I feel like the herbal treatment works deeper, not just to stop the pain but to heal the body,” noted Participant 9 (aged 67).

However, while confidence in herbal medicine was high, some participants expressed concerns regarding the lack of standardization and possible risks involved in its preparation. Issues such as inconsistent dosage and improper handling of herbs were highlighted as potential drawbacks. Participant 4 (aged 59) commented, “Sometimes, we don’t know how much of the herb to use. It’s hard to know what’s too much or too little.” This uncertainty about dosage and the potential for misidentification of plants led some to feel uneasy about the long-term safety of herbal use.

Despite these concerns, the majority of participants seemed willing to accept the inherent risks of using unregulated herbal remedies, primarily due to the perceived benefits and cultural importance they attached to the practice.

Integration with Modern Medicine

While many participants preferred herbal remedies, several also acknowledged the potential value of modern medical treatments. Interestingly, there was an openness to combining both systems in a complementary way. Some participants mentioned that they would consult modern medical professionals if the herbal treatment did not work, but they would continue using herbs alongside conventional medicine. As P6 (aged 48) explained, “If the herbal medicine doesn’t work, I’ll go to the clinic. But I still prefer herbal first, because it’s more natural.”

This dual approach highlights a pragmatic view toward healthcare, where traditional and modern practices coexist. The integration of herbal medicine into the formal healthcare system was seen as beneficial, but some participants noted that they were not fully sure how such an integration could be implemented due to a lack of support from medical institutions. Participant 1 (aged 62) said, “I heard that doctors don’t really understand herbs. Maybe it would be good if they did, so we could use both in the right way.”

The findings reveal that herbal medicine remains deeply embedded in the lives of rural communities, shaped by cultural traditions, social networks, and personal experiences. While participants expressed confidence in the effectiveness of herbal remedies, there were concerns regarding their safety and standardization. Despite these concerns, the practice of herbal medicine is often seen as a valuable and integral part of local health practices, with many participants open to the idea of integrating it with modern medicine in a complementary manner.

DISCUSSION

This study reveals that the use of herbal medicine among rural communities is far more complex than merely an alternative treatment option (Kaur dkk., 2024). The key findings indicate that herbal medicine is not only viewed as a physical therapy but also imbued with cultural, emotional, and spiritual meanings deeply connected to community traditions and identity. The profound significance of herbal use reflects the community's closeness to nature, cultural heritage, and beliefs that shape their healthcare decisions.

The findings of this study provide significant insights into how rural communities experience and ascribe meaning to the use of herbal medicine in their lives (Lone & Bhardwaj, 2013). The community views herbal medicine not only as a practical solution for health issues but also as a way to maintain spiritual and cultural connections with ancestors and the surrounding environment. This experience leads to the choice of herbal remedies not only because of their proven effectiveness within tradition but also due to the influence of deep cultural values. These findings address the central question posed in the study, which is how rural communities integrate their beliefs and subjective experiences into herbal medicine practices, and how this influences their decision to use herbal treatments over modern medicine.

This study enriches the existing literature on herbal medicine and ethnopharmacology by offering a new perspective on how social and cultural meanings shape the understanding and experience of herbal medicine use (Mailu dkk., 2020). Several previous studies have highlighted the clinical effectiveness of herbal therapies (Kamat et al., 2013), but this research shows that the selection of herbal treatments is driven not only by scientific evidence but also by beliefs rooted in family and community experiences. This aligns with the views expressed by Heinrich et al. (2018), who argued that traditional and herbal medicine are often better understood within a broader social and cultural context, rather than purely as medical treatments. The findings also support the argument put forward by Winkelmann (2012), who contended that traditional medicine and community culture often integrate with conventional medical practices in a more holistic manner, despite ongoing challenges related to standardization and medical recognition.

Explanation of the Implications of the Findings

The findings of this study have significant implications, both practically and theoretically, regarding the understanding and integration of herbal medicine into public healthcare systems (Nabulo dkk., 2021). Scientifically, the findings indicate that herbal medicine not only serves as a physical therapy but also has strong social and cultural dimensions that could enrich modern medical approaches. The subjective experiences of rural communities suggest that herbal medicine is chosen not only for its proven effectiveness but also because of the cultural values it embodies, which shape their views on health and healing. From a practical perspective, integrating herbal medicine with conventional healthcare systems could offer a more holistic and effective strategy for health management in rural communities. Therefore, these findings are highly relevant to health policies in developing countries, where the use of herbal medicine remains widespread and plays a crucial role in public access to healthcare.

Study Limitations

While this study provides in-depth insights into the experience of using herbal medicine among rural communities, several limitations need to be considered. First, the study involved a limited sample size (10-15 participants), which may not fully represent the entire rural population in Indonesia or other developing countries. Second, data collection was carried out solely through in-depth interviews and observations, which, although offering a deep subjective understanding, could not encompass the full spectrum of experiences or perspectives from the broader community (Phondani dkk., 2011). Third, since this research focuses on a specific region, the results may not be generalizable to other areas with different social or cultural contexts. Therefore, further research with a larger and more diverse sample is needed to expand upon these findings and enhance understanding of herbal medicine use in various contexts.

Prospective Statement for Future Research

The findings of this study open up opportunities for further exploration in the fields of ethnopharmacology and the integration of traditional medicine into modern medical systems (Umeh dkk., 2014). Broader social, cultural, and economic contexts significantly shape participants' experiences with herbal medicine. For instance, rural communities often rely on herbal remedies due to limited access to modern healthcare facilities, economic constraints, and cultural beliefs that emphasize the value of natural and ancestral practices. These factors not only influence the acceptance and continued use of herbal medicine but also highlight the importance of addressing systemic healthcare disparities in rural settings. Future research could broaden the understanding of how herbal medicine is accepted in a wider context, such as by examining regional or social group differences in herbal medicine use. Additionally, it is important to explore in greater depth how herbal medicine can be integrated with more conventional medical practices, considering both the effectiveness of herbal therapies and potential risks or challenges related to standardization. In this way, further research could make meaningful contributions to advancing a more inclusive, holistic, and community-based approach to healthcare.

CONCLUSION

This study explored the use of traditional herbal medicine in rural communities, focusing on the subjective experiences and perceptions of its effectiveness and safety. The findings highlight that herbal medicine is deeply intertwined with cultural values and traditions, with participants often viewing it as a natural, effective, and safe alternative to modern medical treatments. While herbal remedies were perceived as beneficial, concerns about standardization and safety were also evident, indicating the need for further investigation into their regulated use. This research contributes to the growing body of knowledge on ethnopharmacology by offering insights into how traditional healing practices could be integrated into modern healthcare systems. Additionally, it addresses gaps in existing literature, particularly regarding the subjective experiences of rural populations. Future studies could expand on these findings by exploring larger, more diverse populations and examining the potential for formal integration of herbal medicine into public health frameworks.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

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