Itneg Mother’s Concessions: Perinatal Beliefs and Practices Unwrapped

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ABSTRACT

This study unwrapped and discussed the beliefs and practices of Itnegs during the perinatal period, particularly in the pregnancy, postpartum, and infant care phases. A descriptive phenomenology type of qualitative study was utilized to explore the beliefs and practices of the Itnegs in Barangay Cadanglaan, Magsingal, Ilocos Sur. With all the revelations of the participants, the following conclusions were coiled: The first central theme is Neonatal and Intrapartal Care with two categories, Superstitious Beliefs and Practices, Multivitamin Supplementation, and Safety Measures; under this theme highlighted the beliefs and practices that they follow to attain good delivery of fetus and practices that may lessen the jeopardy of complications that may lead to abortion and other complications of the mother and the fetus. The second theme is postpartum care, which has two categories: scientific and indigenous approaches. This portion revealed that Itnegs have different beliefs and practices that focus on faster healing of the mother and prevention of post-delivery complications of the fetus; all are anchored to the inherited knowledge from their predecessors. The third theme is Neonatal Care, with three categories, Protection Feeding Approaches and Home Remedies, which lean on protecting against harm to the infant, both physiologic and superstitious claims. Lastly, the fourth theme is Introspections with two categories: Culture Adaptation and Culture Preservation, wherein these folks showed how worried they are about possibly eliminating these native practices and beliefs and how they adapted new practices. Itnegs are one of the IP groups with gazillions of practices and beliefs that are fascinating and tested over time. However, as days go on, these ancestral concepts weren’t transmitted to the present generation, which gives an increased possibility of being covered up by modern approaches. The revelation of these tribal concepts is essential because they are not just considered manna but treasures sharpened by time and challenged by the dynamic world.
INTRODUCTION

Itnegs possess a pivotal role in preserving native norms and practices to maintain the origin and the genuineness of Filipino culture in our nation. They are responsible for promoting native customs that shall be transmitted to generations for the preponderance of heritage. As they feature their unique beliefs and practices, it is exhibited how the diversity of tribes in our archipelago creates a synergy that tries to elevate our native identity not only among us Filipinos but also in the global arena for greater appreciation, hence the manifestation of patriotism, nationalism, and love of country. One of the distinguishing identities between the Indigenous Community and the Non-Ethnolinguistic Groups is their unique beliefs and practices on the different walks of life. Having these beliefs and practices coil their hallmarks that put a stamp on their group, making them identify as what they are today. Nowadays, it is undeniable that they are not just encapsulated in a particular chamber. Rather, their diaspora from one place to another is evident --- an indication of increasing the array of influence, thus fortifying their native traditions.

In the Philippines, many pregnancy, birth, postpartum, and infant care practices are rooted in traditional beliefs. These practices have been made known from generation to generation and are mainly from older persons; there is no doubt that people have been accustomed to these and continue to observe these practices despite the presence of modern medicine. These traditional beliefs live on because the Philippines is a diverse country with an estimated 17 million Indigenous Peoples (IPs) belonging to 110 ethno-linguistic groups in 2010 (Hirai, 2015). Most of these groups are living in Luzon (33%), most especially in the Cordillera Administrative Region and Mindanao (61%), with some groups in the Visayas area (International Work Group for Indigenous Affairs, 2011).

The traditions and beliefs of the Itnegs have essentially remained the same but somewhat varied; some of these traditions are potentially harmful to the human body, and it is the same regarding their tradition regarding pregnancy and postpartum care. Some of these are, if a pregnant woman is sick, they utilize herbal medicines such as a combination of buyo (betel leaf), tabako (tobacco), bunga (betel nut sap), and slightly soaked apog (lime) applied on the stomach for stomach ache/dyspepsia. Additionally, postpartum mothers are not allowed to drink cold water and eat sweets and sour food because this may affect the breastmilk and can cause stomach aches in the baby. Another post-labor tradition is the burial of the placenta, which is believed to signify the end of pain and blood loss for the mother. Traditions and Beliefs. (De Grama, 2022).

According to Bardsley et. al. (2021), Cultural beliefs and practices can markedly influence a woman’s pregnancy and childbirth experiences and may shape her
mothering behavior. These practices have lived on for so many years that even without scientific explanation or relevance, this tribe continues to do these because they are accustomed to them and respect their elders' advice. Moreover, there is no denying that some Filipinos have a mentality that there is nothing to lose in using superstitious or traditional health practices during pregnancy and giving birth (Siojo, 2016). As a result, Indigenous populations tend to have poorer health outcomes compared to their non-Indigenous counterparts (Harfield et al., 2018).

The literature and studies embedded in this portion are pertinent to the study at hand. These will help the researchers to justify the totality of the research study. Article 24 of the United Nations Declaration on the Rights of Indigenous Peoples (2008) states that "Indigenous peoples have the right to continue using their traditional medicines and to maintain their health practices. This is to say that healthcare delivery must consider culture as a vital influencer of indigenous people's concepts of corporeality, the function of the human body, and how the body should be cared for throughout a person's lifespan (Naidu & Nqila, 2013). Up to this day, it remains a challenge for healthcare workers to provide culturally sensitive care because the present healthcare delivery systems tend to be biased towards Western medicine (United Nations Inter-Agency Support Group on Indigenous Issues, 2014).

Pagalanas (2016) mentioned that for maternal and newborn care to be more effective, biomedical science, indigenous knowledge, culture, and context should be considered. Understanding indigenous people's worldviews, beliefs, and practices and examining the safety and clinical appropriateness of these practices is essential.

The Ayangans in Aguinaldo, Ifugao, Philippines, define care during childbirth into three (3) unique but interrelated attributes: the women's right to autonomy and empowerment, the active involvement of the family and the community, and the protection of women and their offspring. It is worth mentioning that for this tribe, respect for the body's natural processes is highly valued during childbirth. Pregnant women are encouraged to 'listen to their bodies' and are seen as the most influential decision-makers for matters concerning their birthing experience. Just like Itnegs, for the Ayangans, respecting women's choices is crucial in providing care during childbirth. Traditionally, Ayangan women can choose any position comfortable during labor and delivery (Rio, 2018).

In the Itneg tribe, they also observe similar practices to that of the Ayangans; elders or the "manghihilot" are the only ones permitted to massage the
abdomen of a pregnant woman to set the fetal position and prepare it for delivery. Just like the Ayangans, the “manghiholot” and an optional assistant are the only persons allowed to be with the mother during childbirth; usually, only a female assistant is chosen by the mother (Ethnic Groups of the Philippines, n.d.).

According to Gavino (2016), generally, mothers have an easy time giving birth to igorots. When a pregnant mother starts to feel labor pains, “etag” (salted meat) is boiled and kept boiling to allow the smell to circulate within the surroundings. The smell of the boiling pork is meant to announce to the spirits within the environment to come and assist in delivering the baby.

In a study entitled "Cultural Beliefs and Practices of Ethnic Filipinos: An Ethnographic Study," it was explained Grey (2016) that at the moment of conception, Tingguians (Itnegs) believe that supernatural beings are involved in the whole process of pregnancy and childbirth. As a continuation, several beliefs by the pregnant woman are needed to follow to ensure the safety of the child. A ritual is performed by a medium who offers rice and a pig to the spirits in the pre-stage of delivery, for it is believed to result in easier childbirth and to predict the future of the child from the position of the liver of the sacrificed pig (Vega et al., 2020).

According to Jose et al. (2019), Aeta mothers have no dietary restrictions, but they believe that sense of smell is essential during pregnancy. Smelling and ingesting vinegar or pepper is restricted because they are taught that it can develop mental health problems. They also believe that eating uncooked whole native eggs can make childbirth easier. Superstitious beliefs still abound, such as massaging their abdomen in the river in the early morning so that the baby's head comes out first. In child delivery, “banigan” is still performed in some areas. This is known as a mat where all needed materials for childbirth is placed such as “buho” or skin of bamboo with sharp edge for cutting the umbilical cord, warm water put in a container for cleaning the infant and clean clothes and dried grounded coconut mixed with alcohol to apply in the umbilicus.

As for the Itneg tribe, Vega et al. (2020) reiterated that during delivery, the woman gives birth in a kneeling position and with a mushroom for good luck and to ensure a safe and successful delivery. Afterward, the umbilical cord is cut by a “partner” with a bamboo blade, tied with ginger and herbs, and buried under the house in a coconut shell.

In a study entitled "Healthcare Practices of Yapayao-Isneg Tribe: An Ethnographic Study in Contemporary World" (2020), mothers could not bathe or
drink cold water three months after giving birth and could only go back to their daily chores once they were already sufficiently ready. However, even if the people in this tribe continue to adhere to the abovementioned practices, the local government encourages them to have a weekly check-up at the health center.

As observed by the Ayangans, during the postpartum period, women are encouraged to "listen to their bodies" to know their readiness to get back to their daily activities, such as eating, bathing, and doing chores (Rio, 2018). On an identical note, the Panay Bukidnon tribe focuses on restoring the mothers to strength and good health after birth; in other words, it is centered on preventing bughat (a kind of sickness that results from leaving a sickbed or rising from childbirth too early, or from the return of a disease; have a relapse) in postpartum mothers (Bonifacio, 2015).

Subagan (2009) further stressed that the upbringing of a Kankanaey baby starts with the proper disposal of the umbilical cord, which is believed to be the beginning of real life. An elder called man-ilot, who knows about delivering a child, is responsible for caring for both the mother and the child (Florentino, 2020). The baby's umbilical cord is cut, placed in a container covered with soil, and put on top of a bush.

In a different study, Guidangen (2021), discussed a ritual called “Gobgobbaw” performed for a couple’s first baby. Upon the baby’s birth, the parents and the relatives celebrate a brief ceremony upon removing the cord, at which they butcher chickens mixed with salted meat or etag. An old man (called “amam-a”) immediately prays the kidlos to Lumawig. It is a prayer done for the average growth of the infant. A broided cloth is burned continuously upon the birth of the baby to prevent evil spirits from coming near to harm them.

Vega et al. (2020), have gathered information about how Isneg women care for their infants, one of them is when an infant has fever or is not comfortable and keeps crying, they use vinegar as oil and applies “hilot” or massage to the child. As explained in the same study, “hilot” or “ablion” is a well-known technique in Asia, it is often mistaken as massage. Secondly, they highly believe in “albularyo,” or a folk healer; when a child has a severe illness, the “albularyo” prays and uses banana leaves to be wrapped around the chest and back of the child. Isneg mothers also wrap the black thread around their children to cast away any form of illness.

On a different note, as mentioned by Smith (2012), indigenous people and some Filipino women, in general, may not consider colostrum a suitable first food for the newborn, for they believe that it is "dirty milk" because it is more yellow
than mature milk. It has "lain in the breast too long." However, some indigenous people, such as the Itnegs, practice the opposite; they let the infant drink the colostrum because it is full of nutrition that will be helpful for the growth and development of the baby. For Jose et al. (2019) Breastfeeding for Aetas is expected because they believe that it promotes emotional and physical bond between the mother and the baby. In addition, they breastfeed their newborns for six months or until they eventually wean themselves. Weaning is done by using chili on her breast to wean her child. For the Itnegs, the postpartum mothers prefer to eat soup when breastfeeding to replenish themselves and avoid spicy food because according to them, this can affect the breast milk.

The study fills a gap in academic literature by providing original research on a relatively underexplored topic. The study offers valuable insights for scholars in anthropology, sociology, cultural studies, and public health. It creates opportunities for additional study and promotes a more thorough comprehension of prenatal beliefs in various cultural contexts.

Analyzing prenatal beliefs offers information about customary medical procedures among the Itneg people. This knowledge is priceless for healthcare professionals and legislators looking to create culturally competent healthcare initiatives. Understanding and honoring customs can help contemporary healthcare institutions and traditional beliefs work together more effectively, which will eventually improve the health of mothers and their children. It is essential not only for maintaining the distinctive customs of the Itneg people but also for offering policymakers and medical experts helpful information. In addition, it deepens anthropological research and sparks more extensive conversations on gender roles and societal systems.

Objectives of the Study

This study aims to determine the beliefs and practices of Itnegs during the perinatal period, particularly in the pregnancy, postpartum, and infant care phases.

METHODOLOGY

This portion includes the research design, population, instrument, procedure and data analysis of the study.

Research Design

A descriptive phenomenology type of qualitative study was utilized to explore the beliefs and practices of the Itnegs in Barangay Cadanglaan, Magsingal, Ilocos Sur. Phenomenology shares some features with grounded theory (such as exploring
participants' behavior). It uses similar techniques to collect data but focuses on understanding how human beings experience their world. It allows researchers to put themselves in another person's shoes and understand participants' subjective experiences (Austin & Sutton, 2015). In addition, Avila (2020) stated that the researchers employed the qualitative research method as it investigates a human or social problem or phenomenon. It builds a complex, holistic picture; it analyses words, reports details of informants, and conducts the study in a natural setting.

Participants of the Study
The study consists of eight participants who are mothers and have the bloodline of being Itnegs chosen purposely.

Data Collection and Instrument
This study underwent the process prescribed by the National Commission on Indigenous Peoples. Semi-structured interview guide questions allowed the participants to voice their experiences and stories and stand through open-ended interview techniques that were done face-to-face.

Analysis of Data
Data were analyzed using Colaizzi’s method. The following steps represent Collaizi’s process for phenomenological data analysis: Each transcript was read and reread to obtain a general sense of the whole content. Significant statements pertaining to the phenomenon under study were extracted for each transcript. These statements were recorded on a separate sheet, noting their pages and line numbers. Meanings were formulated from the significant statements. The formulated meanings were sorted into categories, clusters, and themes. The study's findings were integrated into a detailed description of the phenomenon under future study. The fundamental structure of the phenomenon was described. Finally, validation of the findings was sought from the research elderlies to compare the researchers' descriptive results with their experience. Transcribing all the subject's descriptions gathered through interviews.

Ethical Considerations
The primary informants received assurances of anonymity, privacy, and confidentiality, as well as information on the study's purpose and potential hazards. The individuals gave informed consent to the researchers. There was a thematic content analysis. Ethical concerns may always arise during data collection. To ensure the highest integrity in safeguarding study participants' rights and maintaining the veracity of the data collected, several ethical considerations are taken into consideration. The researchers considered the necessary ethical protocols for this
study at every stage of the investigation. Therefore, before the study was conducted, ethical concerns were followed. The University of Northern Philippines Ethics Committee reviewed this study. The study adhered to ethical guidelines, which include respecting the subjects' potential vulnerability, informed permission, privacy and confidentiality, recruiting, benefits, and community considerations. As mentioned by Gorospe, BM (2017), the researcher was also aware of each interview's distressing and sensitive content and that informants may withdraw from the interview without repercussions anytime.

RESULTS AND DISCUSSIONS

The pillar themes were reflected in the transcribed responses of the eight participants in the research study. All the themes in this study were the expressive parts of the participants' backgrounds and histories that portrayed the understanding. The thorough evaluation of the themes that emerged from the participants' stories helped unfold the beliefs and practices of this group of Indigenous People. The patterns or themes developed from the thematic analysis were combined and cataloged to give different meanings. The themes and categories infused and are discussed comprehensively and in detail, which include Perinatal to Intrapartal Care comprises Superstitious Beliefs and Practices, Multivitamin Supplementation and Safety Measures; Postpartum Care includes Scientific Approaches and Indigenous Approaches; Neonatal Care: Protection, Feeding Approaches, and Home Remedies; and Introspections: Culture Adaptation and Culture Preservation.

On Prenatal to Intrapartal Care

This presents the beliefs and practices of the Itneg Mothers from conception to delivery time. It exhibited the featured norms that they followed, such as the following categories: Superstitious Beliefs and Practices, Multivitamin Supplementation, and Safety Measures.

Superstitious Beliefs and Practices

Superstitious Beliefs and Practices refer to the various norms and traditions they adhere to and utilize during prenatal to Intrapartal Care.

These are strategies and superstitious beliefs that are for easier delivery of the fetus and avoidance of further complications.

Participant 4 stated “Idi no dokami ti agsiksikog, nakkong, no madama kami agin-inaw, ammom ti babbaket idi, haan kami agsara ti ruangan ken no rumuarkami iti malem, haankami rumuar no awan ti kallogongmi wenno panio ditoy ulomi tapno daydiay ubing kano, no masikogka, maang-angotka ta adu ti al-alia ken tapno haan maan-annongan ti ubbing.” (When we were
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pregnant, while we have pregnancy cravings, you know, the elderly, we do not close the door, we do not go out without a cap or handkerchief for the baby's head, so the ghosts will not smell you and protect the baby.) (545-552)

Participant 7 eloquently stated “Idi madamanak pay lang nga agsiksikog, kunada aganib ti bawang asin.” (When during my pregnancy they told me to bring garlic and salt with me as my protection)

The participants clearly show that they need to wear a cap or hat and socks and bring garlic and salt to protect against the unknown.

Participant 1 stated “Haan ka mapan tumantan-aw diay natay, dakes kano. Ken no masikogak no kuma mapan tumulong ti lakayko mapan agaramid ti pantion madi kano, baka maalisan diay baketna, napigsa kano daydiay a pammati.” (Do not look at the dead because it is prohibited, and during pregnancy, my husband is not allowed to make tomb. The elders say that I will have a miscarriage and that said belief is strong according to them.) (31-36)

According to an article by Makati Medical Center (2021), there is a superstition that pregnant women should avoid attending funerals. Elders say that when looking at dead people, it can lead to miscarriage or stillborn. Some also say that it can attract vengeful spirits that will try to take the baby away.

**Multivitamin Supplementation**

Modern knowledge and advancement of technology have created an impact on the traditional beliefs and practices of this tribe; some members have learned to adapt to these modalities and continue to do so as modernity perseveres to progress.

As participant 2 stated “Daydiay lattan a ferrous, masikog ken makaanak, daydiay isu ti imbaga ni midwife kanyak idi nakkong” (419-421) (Just the ferrous, during pregnancy and after giving birth, that’s what the midwife told me).

Participants stated that the midwife taught her that vitamins are essential for her pregnancy and are needed to boost immunity. This then interprets that Itnegs or Tinguianis are open to accepting modern medicines as part of their health treatment.

**Safety Measures**

Safety Measures include the different ways to secure pregnancy from abortion or any pre-natal complications. With this, it features the fascinating beliefs and practices that Itneg Mothers adhere to to prevent untoward events.
Participant 6 claimed “No agsikogka, dagidiy agbagkatka nadagsen.” (If you're pregnant when you carry heavy things) (947-949).

On Prenatal to Intrapartal Care, the Itneg mothers are careful when caring for themselves and their babies throughout the pregnancy. With all the prohibitions mandated by their Indigenous knowledge, they still adhere to these and accept the intent that these are for their betterment and stability.

On Postpartum Care
Postpartum pertains to the period after birth. During this phase, it emphasizes the importance of proper hygiene, sensitive communication, and restoration of health. This portion presents the different approaches that the Itneg mothers use and follow during postpartum to eliminate complications and achieve faster health recovery.

Scientific Approaches
The postpartum period begins soon after the baby's delivery, usually lasts six to eight weeks, and ends when the mother's body has nearly returned to its pre-pregnant state.

During “tanggad” participant 4 verbalized, “Dakami, agdigoskami iti napudot, diay sakto lang ken adda daydiy laokna nga bulbulong, kasla bulong ti sagat, kanyak a nakkong, isu daydiy yangermi ta isu ti pagdigosmi” (We used to take a bath with warm water mixed with leaves, like leaves of “sagat” we used to boil this leaves in hot water and used it to take a bath) (690-693).

Furthermore, participant 7 also said that “Tapos no dadduma no kaan-anakmo koma, daydiy agtangtanggadka agbuggoka iti bayabas” (Then after you give birth, during postpartum you will bathe everyday with boiled guava leaves) (1370-1373).

As the participants stated, this medicinal plant known and used by the community is guava plants. It is more convenient, accessible, and free to use. It is a variety of phytochemical components that can be used as antioxidants, anti-diarrhea, anti-inflammatory, and anti-dengue fever. Inflammatory compounds in guava leaves include essential oils, tannins, and flavonoids.

Having said that, participant 3 uttered, “Madi ka makakaan ti kumpurmi, dagiti naalsem kada nasam-it madi mabolin ta makasarot kunada met” (I cannot just only eat any foods because my pregnancy is delicate, I cannot eat sour and sweet foods) (521-525).

Moreover, as Participant 5 verbalized, “Idi madamaak met nga agtangtanggad ket dagidiy nabudo sir, haanak pay idi nga uminom ti nalamiis nga danum napudot lang” (While having my postpartum period, irritating foods are
disallowed, I'm also not allowed to drink cold water, only lukewarm water) (1070-1073), she also included that “Ti lang masidami idi, sir, ket agdengdengda ti kamotit ken parya. Ngem haan mabagoongan, maasinan lang nga talago” (The only foods I used to eat were bitter gourd and sweet potato only without anchovies they only put salt in them) (1076-1079)

The participants know it is essential to adopt healthy habits for a solid postpartum recovery to get back into the swing of things as soon as possible.

Same time, during “tanggad,” Participant 4 shared, “adda barikesmi nakkong, kanyak 3 months daydiay barikes, haanko ik-ikkaten tapno haankami agbuy-ong” (I have a belly wrapped back then, I used that for almost three months, I didn't remove it as my elders said for us not to have a big belly) (694-696), also added that “Dagidiayen a, maiparit ti makinaig iti lakay inggana 5 months nakkong, sa lang mabalin makinaigen no naikkat diay barikes mon” (Do not have sex until the belly binder is removed) (788-791).

Studies show that wraps or binders help with pain and healing. It also helps support the organs and muscles as they move back into place after having a baby, according to WebMD Editorial Contributors (2021). Studies show that wraps or binders might help with pain and healing after a C-section (cesarean section). The gentle compression on the abs may help the uterus return to its standard size quicker, so new moms may get rid of their still-pregnant-looking belly quicker.

On the other hand, Kingsberg (2022) mentioned that there are currently no evidence-based policies about the ideal amount of time postpartum to abstain from sexual activity. It is routinely recommended to avoid sex for about four to six weeks postpartum, mainly to prevent uterine infection or to disrupt any stitches from an episiotomy and to give the body some time to heal.

**Indigenous Approaches**

This category introduces the various indigenous approaches during the postpartum period. These approaches were inherited by the IP mothers from their foremothers and forefathers, which until now they still follow.

The term "tanggad" is an Ilokano word in English that means confinement after birth. During "tanggad", Itneg mothers practice traditional cultures and beliefs that are believed to aid in the restoration of their overall health.

Participant 1 said, “Daydiay agtanggad idi agdadamo ket nagtanggadak iti 25 days.” (When it was my first time, I confined myself for 25 days) (45-46), she also added, “Nakakulongak lang diay uneg ti balay. Rumuarak lang no malpas tanggadko.” (I was just staying at home; I only went outside after my confinement.) (4951).
Like the Itneg’s tradition, Malays, Chinese, and Indians also practice maternity confinement. It is one of the traditional treatments which has become a tradition for women who have given birth to a baby. As elaborated in the study of Yusoff et al. (2018), confinement is to heal and restore energy and health within a specified period. During “tanggad”, participant 3 stated, “adda daydiay vino de quina nga in-inomek, ta namaymayat diay bagik idi agkalkaling-etannakto.” (There is this “vino de quina” that I drink so that I will heal faster, I sweat profusely after taking it.) (52-54).

Participant 3 said, “Ammom diay biggang, kayangem daydiay, nakasansaniit idtoy a. Ngem nakapadyamaak, nakkong, uray nakapadyama a ket sarutenna met latta diay pudot.” (You know the heat of charcoal? I spread my legs in front of it; it is so hot here (talking about the genital area). But I wear a pajama, but even so, the heat still reaches my genital area.) (482-485).

Additionally, she also mentioned, “Napadasak pay diay kua, nakkong, ngem dingdinggek, itunoyo diay kadkaduana ta yangeryo ta inumen, naib-ibtur ti lamis kada trabaho, kunkunada met. Agpayso sa met.” (I have also tried the...you roast the placenta, boil it, then drink it, your body will be more substantial during the cold and during work, that is what they say. I think it is true.) (566-570).

Not many sources show the health benefits of “vino de quina,” but as mentioned by Participant 1, it was used to restore her health after birth.

Moreover, the practice of women eating their placentas after giving birth is known as placentophagia. It is often practiced in home births and alternative health communities. The first scientific study of human maternal placentophagia dates back to 1917; it was noted that there was an increase in protein and lactose in the milk of lactating women who consumed their dry placenta (Rojas et al., 2020).

With the richness of the Itnegs’ culture and traditions, another unique practice was mentioned: using a tree bark as a sanitary napkin after giving birth.

Participant 4 stated “Dagidiay babbaket, nakkong, no naganakdan, adda daydiay ukis ti kayo, ikabilda ditoy tapno kasta kano aqsubli daydiay” (562-564) (The elders suggest that after birth, you use tree bark as a sanitary napkin for the vagina to heal.) (562-564)

Birch bark has a long-lasting history as a traditional medicinal remedy to accelerate wound healing. Recently, the efficacy of birch bark preparations has also been proven clinically. As an active principle, pentacyclic triterpenes are generally accepted (Ebeling et al., 2014).

Culturally determined food restrictions are common among pregnant and postpartum women in the Philippines. Despite the lack of scientific explanation as to why particular food must be avoided, mothers continue to follow these customs
because they believe their elders know more about what is good for them than they do.

Participant 3 stated, "Sardinas, madika agsidida. Agkuttongka nga kua, kunada met, nakkong, no agsidakay ti uong kunada, dagiti naalsem kada nasam-it, madi mabalin ta makasarot kunada met" (You are not allowed to eat sardines, mushrooms because you will lose weight and, we are not allowed to eat sweet and sour food) (380-410). Participant 4 stated, “Kasla koma dadiay langka, daydiay ikan nga aggapu iti baybay, nakkong. Bangus laeng ken tilapia ti aggapu ti karayan, tarong pay, dikami agsidida tarong no kaan-anakmi” (We are not allowed to eat jackfruit, fishes that caught in the sea. We are only allowed to eat milkfish and tilapia from forest water. We also don’t eat eggplant after birth) (602605).

While the Itneg mothers have a negative perception about the consumption of mushrooms after birth, studies show that even if mushrooms are low in dietary fats and calories, they are rich in B vitamins and minerals, are an antioxidant, and have anti-inflammatory properties (Hodgson, 2021).

On Postpartum Care, it is evident here how compliant Itneg Mothers are mainly during the so-called "Tanggad". They believe in its significance on their well-being and the restoration of their health. It also reflected their practices to maintain good hygiene and sanitation, which manifests their eagerness to promote faster recovery and avoid complications. This theme also reiterated a unique way to restore the perineum's physiologic function by applying birch tree bark as a sanitary napkin. Other than that, two distinct practices were also observed to strengthen the immune system: drinking boiled grilled placenta and vino de quina.

**On Neonatal Care**

This segment highlights the infant care strategies of the Itneg Mothers. Beliefs and practices that aim to aggravate the good health of the infants are embedded here. This theme exhibits the caring mechanisms of Itneg Mothers to their child through various ways such as Protection, Feeding Approaches, and Home Remedies.

**Protection**

This category reflects the different ways the mothers protect the infant from spiritual creates perceived to be causes of illnesses and untoward events to the child.
There are beliefs that after giving birth to Itneg's mother, the mother will be given a tradition protection charm or also known “an-anib” because they believe that this charm will protect the child from evil entities.

Participant 4 also stated, “Wen, adda anibmi, haan makaruar ti ubbing no awan kasdiayda. Inggana tatta adda pay lang agan-anib. Ti anibmi idi ket bawang ken asin ken no maan-anongan, ti pangkuami idi ket kua bulong ti atis ken bayabas. Isapli-saplitmi. Marungi kasdiay.” (Yes, we also have charm, our baby can’t go out if he doesn’t have one up until now my child still have his charm. In the past our charm is garlic and salt and must be care it carefully) (768-771)

The participants have this charm or “an-anib” to protect their child from unseen forces or entities. The An-anib contains salt and garlic and is made by the parents or the elderlies of the tribe.

According to Philippine Alternative Fringe Therapy (2020), the unton is used for those who have suffered several episodes of "bales." It is worn as a preventive accessory, usually pinned on the back of the child's upper clothing. Although colors may vary, red is the preferred color, it is believed to be more effective in preventing "bales" or "bati."

Participant 1 stated, “Wen, ken idiay indayonna, adda ti buneng, tapno saan nga umasideg iti saantayo makitkita lalo no aqsgit-sangit, saan a makaasideg kano” (Yes, underneath of the swing of the baby putting our machete, in order the evil entities not to go near to the baby especially if the baby is crying, they will not go near to the baby that’s what they said) (89-92).

The itneg mothers and elderlies state that putting buneng underneath the baby crib and pinning a bullet on the cloth of the baby will make the unseen entities not approach and not harm because they believe these two are protecting the baby from unseen harm.

**Feeding Approaches**

Breast milk is an essential nutrition to the newborn as it provides critical importance to the child's growth and development including brain development, improves the immune system because it has antibodies present, and modifies the function of intestinal function.

Participant 4 states, “Dakami nga agtagtagibi, pabaawanmi daytoy dedemi tapos pespesenmi tapno rumuar daytay nabangles kunada, sakaminto agpasuson, nakkong no nakainnanakamin ken tapno haan nga agburis diay ubing.” (When we feed the baby, I squeeze my breast to drain the spoiled milk out then that is the time we feed the baby to prevent
diarrhea) (580584). She added, “Wen a, nakkong, agas daydiay ti ubing. Di ba awan pay laeng daytay tubbog no damo, pilitenmi nakkong, no haanmi piliten, dalusanmi ti napudot nga danum. Daydiay agbalin nga suso daydiayen nakkong. Agas daydiay yellow.” (Yes, the colostrum provides immunity to the child. At first, there is still no milk coming out, but we do our best to release it, if not, we clean our nipples with lukewarm water and that is when the milk lets down. Yes, that’s like medicine to us, the yellow (colostrum) one.) (727-732)

As Cleveland Clinic (2022) explained, colostrum is high in protein and low in fat and sugar. It is known to be full of white blood cells that produce antibodies. These antibodies strengthen the baby's immune system, protecting them from infection. Colostrum is highly concentrated and nutrient-dense even in tiny doses, with this, the baby's tummy does not need much to reap its benefits.

One of the remarkable milestones of a baby is their first intake of solid food. The first solid food varies from mother to mother, depending on their preference or what the baby wants.

Participant 1 mentioned, “Kuna ti bakbaket, diay makadamo nga itlog, diay yellow na. Diay daduma met ibagada diay dalag.” (Elders taught us to introduce egg yolk of the chicken who lay egg for the first time.) (215-217)

Participant 4 stated, “No damomi agpakan ti ubing, daydiay itlog wenno dalem ti dalag.” (The first food we are going to introduce is egg and mudfish's liver.) (751-752)

The participants’ practices were passed to them from generation to generation. The common answers were, “itlog ti agdadamo nga manok” and “dalem ti dalag.” Egg yolk is rich in protein, which is responsible for a bunch of beneficial effects, including preventing malnutrition, potentially refining skeletal muscle, averting the occurrence of muscle function, and protecting the child from cancer (Puglisi et al., 2022).

On the other hand, as they explained, catfishes live in muddy environments, making them adaptable to the wet season. Scientifically, Synder (2021) discussed that catfishes are packed with lean protein, omega-3 fatty acids and a good source of vitamin B12 – all of which are essential nutrients for the growth and development of the baby.

One of the unique practices of this tribe is giving fat meat to the baby to prevent them from drooling excessively. This lacks scientific studies up to this day, but
they continue to observe this because as what the participant said, it was what her elderlies suggested.

Participant 5 states that, “Siak idi ket kuan, ni katugangak idi, sir, mahilig gamin ti, tapno kano haan nga agkatay diay ubbing panamnamam kano ti taba. Kasdiay met ti ubra ni katugangak” (To prevent the baby from drooling, have him/her taste the fat meat.) (1009-1013)

**Home Remedies**

Due to inaccessibility of health facilities and inadequacy of medical support to root communities, particularly the IP, they have learned to use environmental treasures such as leaves, roots, and other crafts that they believed with their medical implications for faster healing and elimination of illnesses.

The Itneg Mothers alleviate their infants' fever by applying achiote leaves or “atswete” in the forehead of the baby.

Participant 2 verbalized “Diay kua met, sir, bulong ti atswete. Itapalmi diay ayan iti uloda no aggurigorda” (356-357) (we use achiote leaves to alleviate the infant’s fever).

This statement shows how they patronize and believe herbal medicines' ability to treat their illnesses. In his article, Outrimm (2019) wrote that achiote is a common ingredient in southern Mexican cooking and is often used in traditional medicine across Latin America. The leaves can be boiled to make a gargle that's supposed to help relieve a sore throat. The heated leaves themselves can be applied to the skin to alleviate fever. Advocates also say the seeds can be ground and used in baths to ease symptoms of measles and sores.

Moreover, one of the most frequent diseases infants suffer from is cough. Hence, they always focus and try to find home remedies to this, and one of the Itneg Mothers' remedies is the extracting “bugbugayong” leaves.

Participant 2 stated “bugbugayong, sir, no aguyekda. Pitpitekmi sami laakan ti tubbog ti suso, no aguyek ken itakkida pay plemasda”. (358-362) (we use bugbugayong to relieve their cough and so that they could eliminate the phlegm. We mix it with breastmilk).

Philippine Traditional Knowledge Digital Library on Health (2016) mentioned that bugbugayong extract is used to treat cough and for faster expulsion of phlegm.

Meanwhile, in the Philippines, it was always heard about the power of “Manzanilla” (for they believed that this essential oil relives different infant ailments.
Hence, participant 3 claimed that “manzanilla aprusanmi diay tiyanna” (580) (I apply manzanilla oil to the stomach of the infant).

However, Eusebio (2016) contradicted this norm as she expressed that despite the enormous anecdotal claims about the effectiveness of this oil to treat "kabag," the doctors are still not inclined to this for it gives allergies to the babies. There is no direct evidence that this oil relieves diseases.

**On Introspection**

This theme focuses on how Itneg Mothers coped with modern medical approaches and their sentiments on its influences. Herein, it presents the cry of the Itnegs for preserving and conserving this heritage. It includes two sub-themes: Culture Adaptation and Culture Preservation.

**Culture Adaptation**

Culture Adaptation proves how flexible and adaptive folks are with the changes in the environment and societal systems. Herein, it elaborates on the modern practices that Itneg Mothers are utilizing.

The Itnegs have eventually been impacted by contemporary methods as the years and generations have passed. The traditional beliefs and practices of this tribe have been influenced by modern knowledge and technology.

As participant 2 stated “Daydiay lattan a ferrous, masikog ken makaanak, daydiay isu ti imbag a diay midwife kanyak idi, nakkong” (410-412) (Just the ferrous, during pregnancy and after giving birth, that’s what the midwife told me).

As published in Drug.com (2021), randomized trials have been done and showed that adequate Ferrous Sulfate supplementation can aid in preventing iron deficiency anemia and related adverse consequences to the infant.

Participant 4 also uttered “Daydiay laeng inaunak, nakkong, nagpadoktor idi diay Narvacan naminsan, uso ti injection ti bakuna idi nakkong, naminsan nga nainjectionan idi naggurigor, lima ti tawenna idi.” (872-876) (My eldest child only, he had his checkup at Narvacan just once, vaccination started to be known at that time and so he was vaccinated when he got a fever, the one who's 51 years old).

The majority of the participants believe in the efficacy of vaccinations as modern medicines have now caught up with the indigenous world and are still pursuing further to include them in more medical programs, as most of the problems that lead to low vaccination coverage in children depend on the lack of knowledge of
vaccines of healthcare providers and parents, educational programs should be specifically aimed at each of these groups. It is also essential that all physicians providing immunization develop approaches that acknowledge parental concerns and respectfully try to correct any misconceptions (Esposito, Principi, and Cornaglia, 2014).

While Participant 7 implied “Wen ah, agpanatengda lang bassit mapankam diay Cuta, Tamag. Asidegkami met lang ti hospital diay ayanmi. Isu a kinanayonkam a mapan agpacheck-up.” (15081512) (Yes, whenever they have colds, we go to Cuta in Tamag, we live near the hospital that’s why we always go there for a checkup.)

Checkups or appointments for the mother and child also play a crucial role during pregnancy up to infant care. Aniz (2018) discussed the importance of prenatal care and said that it is the foundation of a healthy pregnancy, labor, and delivery.

**Culture Preservation**

Cultural preservation comprises means that shall encapsulate the treasures of one's heritage for its furtherance and continuous practical influence amidst adversaries of times.

Many beliefs and practices of Itnegs are widely passed from generation to generation in defiance of the advancing modern technology. The preservation of these cultures is the foremost concern as it gives the tribe's people a connection to the past and a sense of identity.

Participant 1 stated, “Sa pay la koma ta haanto latta maikkat dagitoy naipatawid tapno agbiag latta ti ala-ala dagiti naggapuanmi, nakkong” (245 – 248) (I just hope that these beliefs and practices of our parents will remain on use as it will honor our ancestors from where it came from).

Participant 4 also stated, “Kua koma nakkong, surotenda latta koma ta haan matay ti tradisyonmi lalo ket awan met dakesna no surotenda dagitoy. Awan met ti makitak a madi a napasamak koma.” (896 – 900) (I trust that may these beliefs and practices will remain dominantly used by our tribe because there is no harm in doing so and I have never seen one).

Traditions and beliefs of Itnegs in perinatal care provide irrefutable connections from the past. It embodies practices that are widely used from generation to generation. These practices serve as a basis for maternal and infant care to the tribe's people. Promoting the preservation through this study will be much appreciated by people as they will gain respect and a sense of belongingness (Saboga & Rodriguez, 2019)

Under Introspections, the itnegs are open regarding modern medical approaches. They comply with the different traditional modalities with a touch of modern medicine. They take Ferrous Sulfate, get their children vaccinated and immunized, and attend medical appointments. This proved their adaptability and
flexibility in embracing different and new means of health promotion. The elderly Itneg Mothers also expressed their hope for a future generation that continues to advocate this ancestral knowledge.

CONCLUSIONS

It is unwrapped in this study the fascinating beliefs and practices of the Itneg Mothers which cascaded from their ancestral roots. These beliefs and practices they adhere to play a significant role in the holistic foundation of the infant and the well-being of the mothers. It also featured in this study that Itneg Mothers are compliant with these inherited beliefs as manifested in their continuous practice. Additionally, it is underlined in this study the perceived threats brought about by the modern approaches causing gradual fading of the Indigenous Knowledge. Hence, it reveals the vital function of the younger generations in partaking in the quest for cultural preservation and conservation. The synthesis of findings on "Itneg Mother’s Concessions: Perinatal Beliefs and Practices Unwrapped" reveals a tapestry of culturally embedded practices spanning pregnancy, intrapartum care, postpartum care, and infant care. The nuanced exploration of these domains offers a holistic understanding of the Itneg perinatal journey. The study contributes to the academic understanding of Itneg perinatal beliefs. It provides a nuanced lens through which to appreciate the interconnectedness of pregnancy, intrapartum care, postpartum care, and infant care within the rich cultural fabric of the Itneg community.

RECOMMENDATIONS

The Department of Health, through the Local Government Unit and Rural Health Unit, should conduct frequent health education and monitoring to Indigenous Communities, the pregnant mothers. It should also be emphasized to the IP community the importance of medical check-ups, hospitalization, and avoidance of over-the-counter medications. It should also be instilled to them about the vitality of hospital-based delivery; Studies align to this should be undertaken to discover the exciting features of the group further and for more profound understanding to the benefits of these beliefs and practices; The Local Government Units with IP communities within their jurisdiction should monitor the functioning of their Barangay Health Centers, Botika ng Barangay and the activeness of their Barangay Health Workers; To further preserve and conserve their distinct cultures and traditions, it should be taught to the members of the IP community about the essence of proactiveness thus becoming advocates of their heritage.
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