

## Study of Factors Influencing of Traditional Medicines In Community Hae-Coni, Post Administrative Baguia, Baucau Municipality 2025

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### ABSTRACT

Timor-Leste has a rich culture and traditional knowledge related to the use of medicinal plants for treating illnesses. Although the government provides free access to modern medical services, many communities continue to rely on traditional medicine, particularly in rural areas with limited healthcare access. In the Hae-Coni community of Baguia Administrative Post, traditional medicine remains widely used due to cultural beliefs, accessibility issues, and socioeconomic factors. This study aimed to identify the factors influencing the use of traditional medicine among the Hae-Coni community. A quantitative descriptive cross-sectional design was employed, using structured interviews and questionnaires administered to community residents. The results showed that cultural factors such as intergenerational transmission (15.1% use) and spiritual-symbolic values (23.2% use), access factors including availability of medicinal plants (23.5% use) and time required to access traditional remedies (15.4% use), experiential factors such as perceived effectiveness (18% use) and sources of information (20.5% use), as well as economic factors including average income (18.2% use) and lower income levels (20.2% use), were associated with the use of traditional medicine. The analysis indicates that cultural values and access to healthcare services have a significant relationship with traditional medicine utilization. In the Timor-Leste context, particularly in Baguia Administrative Post, social and cultural factors play a fundamental role in shaping preferences for traditional treatments. The continued use of medicinal plants as an alternative therapy is deeply rooted historically and predates the establishment of formal modern health services, reinforced by limited access to healthcare and insufficient health education related to traditional medicine.

**Keywords:** *Traditional Medicine; Medicinal Plants; Cultural Factors; Healthcare Access; Timor-Leste*

### INTRODUCTION

Timor-Leste is a country in Southeast Asia, between Australia and Indonesia, with a total population of 1.342 million in 2022 and an area of 14,950 km<sup>2</sup>. The government provides free public health services to all Timorese, including medicines. The Ministry of Health established the Medicines Law on 26 May 2010,

which includes complete regulations on medicines. In 2021, the National Directorate of Medicines Pharmacy (DNFM) revised the new medicines law. However, this law has not been approved in parliament and will await approval from the Ministry of Health. Therefore, full implementation by the Medicines Regulatory Authority is required. DNFM is a national regulatory authority, divided into three departments: Pharmaceutical Planning and Acquisition Management, Market Authorization and Pharmacovigilance Drug Control.

Pharmacovigilance is a part of Government to attending and services activity related to the detection, evaluation, understanding and prevention of adverse effects or other problems related to medicines. Currently Timor-Leste adopted the practice of pharmacovigilance in 2020, with regulations from the DNFM. basic pharmacovigilance and Adverse Drug Reaction (ADR) monitoring and reporting. In 2019, Timor-Leste's pharmacovigilance became an associate member of WHO's International Drug Monitoring Program at the Uppsala Monitoring Centre. From 2019 to 2023, the total number of individual case safety reports available in the pharmacovigilance department was 4 cases reported in 2019 (September–November), followed by 4 cases in 2020 (October), and the last case in April 2023.

After the withdrawal of Indonesian forces in 1999, state-supported public health was almost completely destroyed. Since 1999, modern health services have gradually improved. However, this does not mean that traditional medicine has been replaced. Price and colleagues in a 2020 survey found that “the majority (of patients) consider traditional medicine to be an easily accessible, available and acceptable substitute for hospital care”. Furthermore, little is said about health in Timor-Leste and there are no current data on rates or patterns of traditional medicine use. Other authors also proved that factors such as education, income level and place of residence have an impact on the rate of traditional medicine use.

This study seeks to explore issues in Timor-Leste: such as how living in rural and urban areas differs in the rate of use of traditional medicine, or the level of education may impact the rate of use of traditional medicine, and whenever possible, identify the names of plants used in traditional medicine in Timor-Leste. In addition, it also sought to see the overall prevalence, satisfaction, costs and demographic factors associated with the use of traditional medicines among patients, staff and visitors in a large reference hospital in Timor-Leste, the Guido Valadares National Hospital. Historically, communities have developed ways to deal with illness, using traditional knowledge passed down from generation to generation. This knowledge, based on medicinal plants and popular practices, is an important cultural heritage, especially in regions where access to modern medicine is limited or new. With scientific advances and modern medicine become a major part of the health system, providing standardized, safe and effective treatment.

Although conventional medicine is gaining popularity, traditional medicine has not disappeared, and many communities do use it as a traditional and complementary medicines. The coexistence between traditional and modern

medicine shows the cultural, social, economic and spiritual value of a community. The objective of this study is to understand how the community perceives and uses these two approaches, looking at factors such as trust, effectiveness, easy access and cultural influence. From this analysis, it is possible to increase the understanding of the interaction between popular and scientific knowledge in the context of collective health, and to value the dialogue between the two.

The use of traditional medicine has been practiced for many years in all cultures of the world. Based on experience and passed from language to generation, this practice is continuous in the relationship between the community and the environment. In Brazil, for example, the use of medicinal plants, tea, kaeruma ointment and religious or spiritual practices are common in rural areas, indigenous and kilonda communities. With the development of modern medicine (especially from the 19th century), great changes were made in the treatment of disease. Industrialized medicine, based on scientific evidence, became the mainstream treatment in the biomedical model. They make traditional knowledge marginalized or undervalued in the formal health system.

The use of traditional medicine in Timor-Leste is a very famous, and it is a part of cultural norms. The factors can be encourage the use of traditional medicines is cost, limited access to other medical services and the perception that traditional medicines is less of side effects. From the several users, said they used traditional medicine for some illness they feel, and many used it for chronic illness along with conventional medicine. Futher, Health professionals need to be aware of the common use and possibility of using traditional and conventional medicines together when treating patients.

### **Problem Formulation**

How is the relationship between the factors to influence community perceptions of preference for using traditional medicine, related with the aspects of access, culture, individual experience and economic income?

### **Objective**

To know the factors can be influence of traditional medicine using in the community, Hae-coni sub-district, Baguia Post; To understand the public perception of using traditional medicine as an alternative treatment.

## **LITERATUR REVIEW**

### **Definition**

Research by Bimo Walgito (2020) states that perception is a process used by the five senses. This process involves receiving stimuli from an individual through receptors and then transmitting them to the brain's central nervous system. Perception occurs through the functioning of the human senses. Perception is the human experience using the five senses, which is processed by the human change in the information received from an object through experiences, giving a meaning or image to the object (Imam Muchoyar, 2020). Perception is a process in which

sensations received and selected within an individual are then organized and interpreted (Prasetijo & Ilhallauw, 2020).

Perception is the process of selecting, organizing, and resolving an individual's interpretation of information into meaningful and logical pictures. Perception occurs when an individual imitates external stimuli, which are captured by other organs and then enter the brain. Perception is the process of using the sensory organs to seek information in order to understand (Listyana, R, Hartono, Y, 2023). Perception is the process of identifying something using the five senses. The impressions an individual receives are highly dependent on experiences gained through thinking and learning, and are influenced by factors that originate within the individual (Hidayati and Perwitasari, 2020). Human perception involves different perspectives on sensation that may result in positive or negative interpretations, which subsequently influence actual human actions. Perception is shaped by various factors, including functional factors that originate from individual needs, past experiences, and personal characteristics, as well as structural factors that arise from the physical nature of stimuli and their neural effects on the nervous system. According to Irwanto et al. (2023:96), as cited in Fitria A. and Sukma D. (2023), perception is influenced by selective attention, stimulus characteristics, individual values and needs, and previous experiences. Similarly, Restiyanti Prasetijo (2023) categorizes perception-influencing factors into internal factors – such as experiences, needs, evaluations, and expectations – and external factors, which include stimulus characteristics, external appearance, and environmental conditions.

### **Medicinal Plants**

Plants are formed by leaves, roots, fruits, flowers and tubers, which have long been used by the community as an alternative treatment option. To this day, people still believe in plants, which are known to be used for the treatment of diseases or we call "Back to Nature" The use of traditional plants as an alternative treatment exists widely today. Therefore, there will be dissemination and demonstration of the use and processing of traditional plants as an alternative treatment, as well as business potential. Herbs are plants that can be used for healing, whether they are leaves, stems, or roots. Some people use these herbs for traditional or alternative medicine.

In addition, herbal plants have the advantage of having no side effects or lower side effects, and treatment can be carried out by family members. Herbal plants are an alternative treatment that Timorese have been practicing for a long time as traditionally (Based on empirical data). The successful use of these medicinal plants is greatly influenced by public knowledge of the benefits of each type of plant with medicinal properties. In addition, the use of each medicinal plant for various diseases is also influenced by different methods of use. Herbal plants are plants that are effective or have the potential to cure or prevent various diseases. Use of traditional plants in the family such as herbs and spices for cooking. Using herbs can also be satisfying and can even help support the family economy.

Herbal plants are a type of plant that has medicinal functions and is used to cure or prevent various diseases. Medicinal properties, by themselves, mean containing active substances that can treat certain diseases, or may not contain specific active substances but contain the resultant or synergistic effect of several substances that have a therapeutic effect.

Alternative medicine Is a traditional healing method that is being revived as an alternative to conventional medicine. Many alternative treatments are effective and safe, as long as they meet medical requirements ( Yanti and Hengky, 2021 ). According to Savitri (2022), alternative medicine is non-medical treatment, where the materials and equipment used do not meet medical standards and are not administered by healthcare professionals. Traditional medicines are materials or mixtures of materials in the form of plant materials, animal materials, mineral materials, extract preparations, or mixtures of these, which have been used for treatment over generations, and can be applied according to prevailing norms in society.

Types of alternative medicine still used by the public include herbal medicines and jamu, cupping, acupuncture, reflexology, hypnosis, gurah (acupuncture), Ceragem (jade massage), and aura therapy (Savitri, 2022).

Traditional medicine is divided based on efficacy claims in the three allowed as follows:

- a. Traditional healthuse claim Claims of efficacy in traditional medicines must meet the general and medium level of evidence-based claims of use of herbal medicines must begin with the words "Traditionally used for" or as approved in the registry.
- b. Traditional treatment claims; (traditional treatment) A Standardized Herbal Medicine (SHT) is a product containing ingredients or mixtures of ingredients in the form of plant materials, animal materials, mineral materials, galenic preparations, or mixtures of these ingredients that are traditionally used for medicinal purposes and may be applied according to community norms prevailing.
- c. Scientifically established treatment claim. (scientifically established treatment). Phytopharmaceuticals are natural medicines whose safety and efficacy have been scientifically proven through preclinical testing (in experimental animals) and clinical testing (in humans). Both raw materials and final products are standardized.

## METHOD

This study used a cross sectional quantitative analytical descriptive research design, conducted using interviews with respondents to distribute questionnaires to respondents in Hae-Coni country. According to Resseffendi (2020), descriptive research is research that uses observations, interviews, or questionnaires to investigate the current situation of the issue being studied. Through this descriptive research, the researchers will describe what actually happened regarding the current



situation being studied. Quantitative methods, is a set of strategies for obtaining and processing information that uses numerical magnitudes and formal or statistical techniques to analyze, always in a cause and effect relationship. In other styles, quantitative methods are the use of numerical values to study phenomena.

## RESULT AND DISCUSSION

### RESULT

General Data Respondent Characteristics Results for this research respondent "Study of Factors That Influence the Use of Traditional Medicine for the Community in Hae-Coni District, Baguia Administrative Post, Baucau Municipality in 2025". The characteristics of the respondents to this research are the communities' sex, age, profession and level of education. The following are the results of the research on the characteristics of the communities that have been described or filled out in the research questionnaire.

**Table 1. Frequency distribution by respondent characteristics**

Nu	Respondent Characteristics		Traditional treatment (y)		amount N (%)	P.valor
			Yes	No		
1	Sex	Male	27 (16,7%)	135 (83,3%)	162 (100%)	0,269>0,05
		Female	47 (21,2%)	175 (78,8%)	222 (100%)	
2	Age	20-43	36 (19,0%)	153 (81,0%)	189 (100%)	0,913>0,05
		44-78	38 (19,5%)	157 (80,5%)	325 (100%)	
3	Marital status	Married	64 (19,7%)	261 (80,3%)	325 (100%)	0,623>0,05
		Single	10(16,9%)	49 (83,1%)	59 (100%)	
4	Level of education	La eskola	17 (18,7%)	74 (81,3%)	91 (100%)	0,115>0,05
		Primary	16 (29,15%)	39 (70,9%)	55 (100%)	
		Pre- Secondary	3 (10,3%)	26 (89,75)	29 (100%)	
		Secondary	16 (14,3%)	96 (85,75)	112 (100%)	
		University	22 (22,7%)	75 (77,3%)	97 (100%)	
5	Profission	Agriculture	36 (17,9%)	165 (82,1%)	201 (100%)	0,916>0,05
		Unemployed	11 (21,6%)	40 (78,4%)	51 (100%)	
		Contracted	7 (22,6%)	24 (77,4%)	31 (100%)	
		employee	11(22,0%)	39 (78,0%)	50 (100%)	
		Student	9 (17,6%)	42 (82,4%)	51 (100%)	

Table 1 shows the sociodemographic characteristics of respondents' sex, age, marital status, education level, and profession in traditional treatment indicators. Based on the results of the research in the category of sex showed that 27 male respondents with percent (16.7%) who use traditional treatment, while 135 people with percent (83.3%) do not use and female 47 people (21.2%) use traditional treatment and 175 people (78.8%) do not use traditional treatment. Based on this data shows that women are more involved in traditional treatment practices, although the difference between male and female groups is not significant.

In the Age Category, the results showed that the data of respondents in the age group 20–43 years is 36 people (19.0%) use traditional treatment, while 153 people (81.0%) do not use. In the age group 44–78, 38 people (19.5%) used traditional treatment and 157 people (80.5%) did not use it. This result shows that the knowledge is increasing that many young people do not use traditional treatment. Increasing knowledge through the media and access to other information where modern medicine is considered more "practical", faster, effective, faster use, and the availability of medicines sold freely in stores, kiosks that can be purchased without consultation or with a prescription, lack of social promotion, social promotion, lack of traditional medicine lack of knowledge about traditional medicines and how to use them is a factor that causes a decrease in the use of traditional medicines in people aged 20 – 43 years who will be categorized as young.

Based on the aspect of marital status, data show that among married respondents, 64 people (19.7%) use traditional treatment, and 261 people (80.3%) do not use it. Among single respondents, 10 people (16.9%) used traditional treatment, and 49 people (83.1%) did not use it. The difference between the married and single groups did not show a strong tendency to use traditional treatment. Lack of knowledge about traditional medicine, and information about traditional medicine is not well documented (empirical data that is not well documented) or passed down from generation to generation, negative perceptions about traditional medicine such as the perception of traditional medicine takes a long time to show results, including traditional medicine and medicines that are not clear side effects are always unclear, raising doubts about how to use, Fast "Instant" lifestyle makes people tend to choose instant/ automatic solutions such as chemical drugs, and the use of Traditional Medicine among the Community is still minimal. And the aspect of education level, based on the level of education of respondents who do not go to school 74 people (81.3%) do not use traditional medicine and use 17 (18.7), primary education level 39 (70.9%) use traditional treatment, 16 (29.15%) do not use, pre-secondary 3 (10.3%) use traditional treatment, 26 (89.75) use traditional medicines, secondary education level 16 (14.3%) do not use traditional medicines, 96 (85.75%) and university education level in 22 (22.7%) use traditional medicines, and 75 (77.3%) do not use traditional medicines for treatment. university students are relatively new to using traditional medicine.

Based on Level of Education Shows that, Knowledge of Modern Medicine People with higher education tend to have greater exposure to scientific and medical information. The level of education can determine a person's Broader Knowledge of modern medicine, Understanding of the efficacy, dosage, side effects, and safety of modern medicines compared to traditional medicines, which are sometimes not standardized. In addition, through access to information from scientific or reliable sources, so be more selective when choosing treatment methods. A higher level of education also determines a person's critical and logical thinking, so treatments that are not based on scientific evidence tend to be unreliable. In terms of profession, farmer respondents are the largest group (36 people, 17.9%) who use traditional treatment, followed by unemployed (11 people, 21.6%), contracted (7 people, 12.6%), employees (11 people, 22.0%) and students (9 people, 17.6%).

Based on respondent data from the Occupation category, Farmer Groups are more likely to prefer traditional medicine than modern medicine due to a number of factors related to culture, economy, accessibility, and beliefs. Farmers generally live in rural areas, far from hospitals or community health centers and poor transportation infrastructure makes access to modern medical services difficult and expensive, so the option of using medicinal plants to treat diseases. Overall, the results of this table show that sociodemographic characteristics such as sex, age, marital status, education, and profession, do not show relevant differences in preference for traditional treatment. This practice will be an important part of the community health culture, which does not depend much on individual factors.

**Table 2. Frequency distribution according to respondent characteristics based on Access, Culture, Experience and Income indicators**

Nu	Research Variable		Traditional treatment (y)		Amount N (%)	OR	0,5% CI		P.Valor
			Yes	No			Lower	Upper	
1	Culture	Intergenerational transmission	28 (15,1%)	158(84,9%)	186 (100%)	3,586	1,348	6,985	0,042<0,05
		Spirit and symbolic value	46 (23,2%)	152(76,8%)	198(100%)				
2	Access	Drug availability	43 (23,5%)	140(76,5%)	183(100%)	1,684	1,008	2,814	0,045<0,05
		Access time	31 (15,4%)	170(84,6%)	201(100%)				
3	Experience	Effective practice	35(18,0%)	159(82,0%)	194(100%)	0,852	0,513	1,416	0,537>0,05
		Information sources	39(20,5%)	151(79,5%)	190(100%)				
4	Economic	Enough	32(18,2%)	144(81,8%)	176(100%)	0,878	0,527	1,464	0,619>0,05
		Less	42(20,2%)	166(79,8%)	208(100%)				



### **Relationship between Culture and Use of Traditional Treatment**

The results showed that culture was significantly related to the use of traditional treatment ( $p = 0.042 < 0.05$ ). People with traditional beliefs are three to four (3.5x) more likely to use traditional treatment than those who do not. This shows that traditional belief systems will play an important role in shaping community decisions about disease treatment. Based on the above data analysis, shows a significant result, that there is a significant link and not a coincidence between the two, because culture influences how a society maintains and uses its traditions.

Culture shapes a society's perspectives, behaviors, and practices. It refers to the values, norms, customs, habits, and ways of life that are passed down from generation to generation. It means that the community still shows cultural identity, conveys local values, and maintains the sustainability of local practices against modernization. There is also the perception of illness that culture influences how a society sees the cause of illness, whether physical, spiritual, or supernatural, to determine the type of treatment chosen. Holistic versus biomedical: Traditional medicine often takes a holistic approach, which not only treats physical symptoms but also considers the balance between mind, spirit, and relationship to the environment. This differs from modern biomedical approaches, which tend to focus more on specific diseases.

In addition, social support is a decision to use traditional medicine because it is often influenced by family members or older neighbors or community leaders (such as *lia Nain*), this support from the social environment to strengthen belief in the effectiveness of traditional medicine. Local culture (Traditional Knowledge) that has a thorough knowledge of the natural resources available in their environment, which is then used as raw materials for traditional medicines.

### **Access in Using Traditional Treatment**

In terms of access, the variables drug availability and access time also showed a significant relationship ( $p = 0.045 < 0.05$ ). This shows that when traditional medicine is well available many people will prefer to use it because it is easy to find in nature and local areas and also the time of access shows a big difference to people's decision to use traditional medicine and relationship to personal preferences and socio-cultural factors, because easy access is not enough to change community trust.

Based on the geographical area, Hae-coni suco with a long distance from health facilities and other rural areas, traditional medicine is the main option because of easier or faster access compared to health facilities, and other factors include limited or unavailable medicines in health centers. It is easy to find the Ingredient in nature as many traditional medicines grow in the environment surrounding the Place, such as ginger, turmeric, betel leaf, Javanese ginger, and

so on. And the community can prepare themselves without the help of health facilities.

The community believes that traditional medicine is safer because it uses natural ingredients that do not contain synthetic chemicals and side effects are not serious. But not everyone believes, but experience and good results make people continue to use traditional medicine for the treatment of diseases.

Because traditional medicines are part of the local cultural heritage, they will continue to be valued and passed down from generation to generation. Many people believe in its effectiveness because they prove empirically in diseases according to their experience. In addition, testimonies from family and neighbors who use traditional medicine and manage to see good results also help to increase the confidence of the community to continue using this traditional medicine.

Community preference approach, traditional medicine not only treats physical symptoms, but also considers the balance between body, mind, and spiritual aspects. This is from a holistic approach, which sees human illness as part of the whole of life. In cultures such as traditional Chinese medicine, it also receives attention to the spiritual and lifestyle side, not just the clinical side. Based on the research results, the community in the villages is normal to choose traditional medicine because it is cheaper, easy to find in nature and does not require manufacturing processes like modern medicine. Many people such as students, farmers and children, unemployed use traditional medicine because natural ingredients such as medicines, spices or roots, which are in the local environment.

The use of traditional medicine as an alternative treatment has been practiced for a long time, long before formal health services using modern medicine were realized. Timor Leste, which is composed of many islands inhabited by different ethnic groups, has differences in the use of plants as traditional medicine. This is because each ethnic group has its own unique empirical experience and culture. The life of our ancestors, in one with nature, fostered an awareness that nature is the provider of medicine for themselves and their communities that is easier or faster to find, the distance that is closer to the place to be used quickly to avoid or prevent signs and symptoms of disease.

Traditional medicines, such as manufactured medicines, should not be consumed carelessly. There are dosages that must be followed, as prescribed. This means that traditional medicines have no side effects. The side effects of traditional medicines are relatively minor if used appropriately by using the right dosage, the right ingredients, the right time, the right method of use, and avoiding misuse. Although there is a lot of use of traditional medicine in the community, data on past reasons for using traditional medicine are limited. Also, data on the types of diseases commonly treated using traditional medicine are limited.

### **Experience in Using Traditional Treatments**

The experience variable showed no significant relationship with the use of traditional treatment ( $p = 0.537 > 0.05$ ). Isto pointed out that individual prior experience does not determine the decision to continue using traditional treatment. This factor can be explained because community decisions do not depend solely on one person's experience.

Many traditional medicines come from plants or natural ingredients that have been used from generation to generation, which Generally, traditional medicines are cheaper than modern medicines and faster to obtain, In some communities, the use of traditional medicines is part of culture and beliefs. Therefore, the decision to use medicinal plants for the treatment of diseases is not based on previous experience or use.

### **Economic Yield**

The economic income variable was also not significant ( $p = 0.619 > 0.05$ ). Isto showed that income level differences did not have an important impact on the use of traditional treatment. This means that traditional treatment is part of the cultural value system of the Timorese community. Health is a major concern for every person in the world. Everyone wants a healthy body, both physically and mentally. Health plays a significant role in all aspects of human activity, regardless of profession or social status. In the world of public health, health efforts include preventive measures, promotional measures, and curative measures to maintain human health. These measures are implemented by communities using a variety of treatment methods and medicines. Currently, some communities and ethnicities still prefer natural/herbal ingredients over chemicals and drugs. This tendency to return to nature is often referred to as "returning to nature." and with concerns about the side effects of using chemicals and belief in traditional medicine still very strong.

In addition, in line with advances in medical knowledge that have led to the development of various types of chemical-based medicines, public confidence in the effectiveness of traditional medicines is declining. One factor that contributes to the loss of public confidence in the effectiveness of traditional medicine is the loss and knowledge of traditional medicine inherited from Timor Leste's ancestors. Moreover, the effectiveness of modern medicines is felt much faster than that of herbal remedies. Traditional/herbal medicines, which have few side effects, are often lost among the general public. They prefer modern drugs with all their side effects. Therefore, knowledge of these family medicines needs to be constantly developed to ensure continued success.

### **CONCLUSION**

Based on the results of Crosstabulation, it is concluded that: (1) Culture and Access to the use of traditional medicine have a significant relationship with the use of traditional treatment ( $p < 0.05$ ) (2) Experience and Economic Income does not show statistical significance ( $p > 0.05$ ) (3) Because the use of traditional medicine as an alternative treatment has been practiced for a long time, long before formal health services using modern medicine were realized, as well as access to modern health services determines practice change, but requires an educational approach and cultural sensitivity to change community behavior. There is a significant relationship between culture (interactional transmission and spiritual/symbolic values) and traditional treatment. This shows that traditional treatment is supported by local culture, because culture values traditional knowledge and community spirit.

There is a significant relationship between access especially in terms of availability of medicines and traditional treatment. When medicines are available, many people use them because they are easy to find in nature. The factors experience (effective practice and sources of information) and income (low or low) did not show a significant relationship, which shows that the decision to use traditional medicine does not depend only on experience or level of education, but mainly on culture and access.

In general, this research shows that culture and access are the main factors that sustain the continuity of traditional medicine use in the community. It is therefore important to continue to preserve traditional knowledge by planting local medicines and promote collaboration between traditional treatment and modern health systems to improve people's lives in the community.

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