

## **Concurrent Use of Traditional and Orthodox Modes of Healthcare Services among Out-Patient Nursing Mothers in Ikenne Local Government Area, Ogun State, Nigeria**

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### **Abstract**

Every society makes provisions for the health care delivery system for its members, this is intending to provide medical and related services for the maintenance of good health, particularly through the prevention and treatment of diseases. This is in recognition of the pervasive importance of good health upon which life is contingent. Despite the development of more researched and formulated orthodox medicines, herbal medicines continue to be well patronized by persons across the world with some patrons concurrently using both forms, oblivious of the unwelcome effects that may occur. The study adopted a descriptive survey research design. For the study, a quantitative approach was used in analyzing the data collected, the population of the study were females between the ages 15-49 with a total of 1081 nursing mothers in Ikenne Local Government Area (LGA), Ogun Nigeria. Sample size determination calculation by Cochran was used to determine the sample size of 190. A multi-stage random sampling, purposive sampling and accidental sampling technique were used to select the respondents. The study revealed that all the social and demographic characteristics of respondents except community had a

significant association with respondents' concurrent usage of herbal and orthodox medicines. It was also observed that 2 in every 10 nursing mothers uses both orthodox and herbal drugs concurrently on their children. The study concluded that 11.05% of respondents concurrently used herbal and orthodox medicines for infant health problems.

**Keywords:** Concurrent healthcare, Traditional/herbal healthcare, Orthodox, Outpatient, Nursing mothers, Under-five children.

## **Introduction**

Every society in there uniqueness makes provisions for healthcare delivery systems for its members, this is to provide medical and related services for the maintenance of good health, particularly through the prevention and treatment of diseases (Adefolaju, 2014). This is in recognition of the pervasive importance of good health upon which life is contingent. Duru and Merenu (2016) thought that societies thus developed indigenous medical systems through interactions with their environment wherein the health needs of the people were met. Cultural beliefs and attitudes influence modes of healthcare and outcomes in reproductive health preferences and practices (Bent, 2008). In the past, traditional medical practices were a way of life across indigenous societies in Nigeria. These societies had their cultural practices for health and illness, and also had unique healthcare approaches (Erinoso, 1998, as cited in Ogunsola & Egbewale, 2018). Azaizeh (2003) argues that the aftermath of colonization in Nigeria has, however, presented two healthcare systems namely traditional and orthodox which seem to work at cross purposes in meeting the health needs of the people. While orthodox practice enjoys official recognition from the government, the traditional practice is derided, ridiculed and disdained by the government authorities (Adefolaju, 2014).

Despite the introduction of orthodox medicine by the Europeans who colonized Africa, up to 80% of Africans still use traditional medicines, especially herbal medicine for their primary healthcare needs (World Health Organization, 2005). Patronage of herbal products has also seen an increase even in developed countries such that approximately 20% of people in the United States of America use herbal products for various health reasons (Bent, 2008). In recent times, the combination of herbal and orthodox medicine has received worldwide acclaim since medicinal plants continue to play a crucial role in the healthcare delivery system in urban, semi-urban and rural communities in the world (Omoera, Awosola,

Okhakhu & Eregare, 2011). Adibe (2009), reported that about 80% of the world's population depend on traditional medicine for their healthcare.

### **Materials and Methods**

Ikenne is a Local Government Area (LGA) in Ogun State, Nigeria. The research design that was adopted for the study was a descriptive survey. A quantitative approach was used in analyzing the data collected. A quantitative approach was adopted because it allows researchers to replicate both the test and the results of studies. The sample population of the study consisted of one hundred and ninety (190) outpatient nursing mothers residing in Ikenne Local government Ikenne Remo Ogun State, Nigeria. The data-gathering instrument that was employed for the study was a structured questionnaire. A structured questionnaire was used because of its direct response, feedback and the literacy level of the proposed respondents. The questionnaire comprised four (4) sections. Section (A) was on the bio-data of the respondents, and section (B,) was on the perspective of nursing mothers towards the traditional healthcare modes which was on a Likert scale type. The agreement scale was from 1-5 of which, 5 represent 'strongly agree', 4 'agree', 3 'undecided', 2 'disagree', and 1 'strongly disagree'. The Likert scale items focused on the research objectives and research questions of the study. Section (C) dealt with the perception of nursing mothers towards orthodox medical care modes for under-five children in Ikenne local government while section (D) was on the concurrent use of herbal and orthodox drugs. A total of one hundred and ninety (190) copies of the questionnaire were administered in all; 38 sets of the questionnaire were administered to each of the towns selected.

A reliability test was conducted to ascertain whether the variables of the study consistently measured the factors intended. A pre-test for internal consistency measure using Cronbach's Alpha was adopted for assessing the reliability of all the variables. The reliability was conducted to ascertain whether the internal consistency is indicative of the homogeneity of the items in the measure that taps the variables. In addition, to reduce errors and give stable results of the data collected, the reliability for each of the variables was ascertained at a threshold of 0.7 and above (Cronbach, 1951). The pilot study result showed a high level of internal consistency for the entire variables. The overall Cronbach's alpha for the whole instrument is 0.845. The result showed that the questionnaire has a high level of reliability. Data was collected using a pretested, semi-

structured, interviewer-administered questionnaire. The data collected was keyed into SPSS (20 version) and analyzed using Statistical Package for Social Sciences (SPSS) version 20. The chi-square test was used to test associations between variables and combined use of orthodox and traditional medicine. Multiple regression models were used to assess the predictors of combined use and results were reported at a 95% confidence interval. A p-value of  $<0.05$  was considered significant. Descriptive data were presented as simple frequencies and percentages.

The study was carried out under the supervision of the Olabisi Onabanjo University Health Research Ethics Committee (OOUHREC) and by the laid down rules and guidelines. To ensure the anonymity of the respondents, researchers ensured the anonymity of the respondents, by making sure that the names and other personal details that could be traced back to the respondent will not be sought for nor documented anywhere in the study. Also, in the course of carrying out the research, the researchers ensured that considerable efforts are put in place to ensure the confidentiality of data collected as well as the identity of the subjects that provided information for this work when reporting the outcome of the study. The researchers also ensured that all contributions of other researchers are referenced using the APA 6th edition style in the study. The researchers were frank all through the course of the study and ensured that the process of data reporting and result reporting was honest as well as the method and procedure that were used. The researchers also ensured that no false data was included in the data collected and that the process of presenting and interpreting the data was free from bias.

## **Results**

The respondents comprised outpatient nursing mothers in Ikenne LGA, southwest Nigeria. Out of the 190 copies of the questionnaire issued, the entire copies of the questionnaire were returned fully completed representing a 100% response rate. The response of 100% facilitated the gathering of sufficient data that was generalized to reflect the objects of the study. This was in tandem with Graham (2002) that a response rate above 50% of the total sample size contributes towards the gathering of sufficient data that could be generalized to represent the opinions of respondents in the target population on the sought study problem. The highest percentage of the respondents are in the age group 25-29 years with 70 (36.84%), the analysis revealed that more than half of the nursing mothers in the survey are Christian. The distribution of respondents by

the community was analyzed and the result showed that 116 (61.05%) of the respondents are residents of the Ilishan community, 26 (13.68) are resident of Irolu, 40 (21.05) are residents of Iperu while 8 (4.21%) are residents of Ikenne.

The analysis revealed that nursing mothers residing in the Ilishan community have the highest number of participants in the study. A close study of educational status was considered and postgraduate status was represented by 9.47%, graduate status was represented by 48.42%, 22.11% of the respondents are secondary school graduates while 20% are primary school holders and no participant in the study with no education. From the analysis, nursing mothers with a first degree have the highest representation reason been that Babcock University is located within Ikenne LGA has an influential factor on residents within the locality to be educated. The employment status of nursing mothers among participants in the survey was considered. The analysis revealed that 102 (53.68%) of the respondents are employed, 33 (17.37%) are unemployed and 28.95% are self-employed. The study shows that more than 50% of the respondents are employed. On the basis of occupation, 63 (33.16%) of nursing mothers who participated in the survey are civil servants, 55 (28.95%) are private office owners, 37.89% are businesswomen and none of the participant is a student or has no job. From the analysis, the highest percentage of participants are nursing mothers who are business persons while the least are those having private offices.

From the study, 11.05% of the participants have a child or two children, 72.11% of the respondents have between three and four children, 16.84% of the participants have between five and six children and none of the respondents has children as many as seven and above. The study revealed that nursing mothers with two to three children have the highest representation in the study. It also revealed the frequency and percentage distribution of nursing mothers who have at one time or the other been sick within one year. The analysis shows that 78 (41.05%) of the nursing mothers have been sick within one year, and 112 (58.95%) did not experience any form of illness in the past year. In continuation, the nursing mothers that reported that they have at one time or another experience illness were also asked about the type of medication mode they used when they were sick. The result showed that 72 (91.58%) of the nursing mothers used orthodox drugs while 6 (8.42%) of the women used herbal drugs. Therefore, from the survey, we can lay claim that most nursing mothers use an orthodox mode of healthcare when they are sick. Also, 103 (54.21%)

reported that their children have once been sick in the past year, while 87 (45.05%) said no. the nursing mothers whose wards had experience illness within one year were asked to report the drug mode that was used to cure the illness. The analysis revealed that 58 (59.74%) of the nursing mothers used herbal drugs on their children while 45 (46.35%) used orthodox drugs. From the study, we can lay claim that the majority of nursing mothers administer herbal drugs to their children when they are sick. When compared to the type of medical mode used when they are sick, nursing mothers use more herbal on their children than themselves.

The analysis revealed that the majority of out-patient nursing mothers have the perception that traditional mode of healthcare is widely available, accessible and desirable. This is consistent with the outcome of an earlier study on traditional medicine (Omoera et al., 2011). About 65.5% of out-patient nursing mothers strongly agreed that treating a child with the traditional mode of healthcare is the cheapest among other modes and a majority of the respondent have the perception that the lack of orthodox health service in the community gave room for traditional modes. 24.84% of the respondents strongly agreed that the lack of orthodox healthcare service in the community gave room for traditional modes; 37.37% agreed; 17.89% were undecided; 6.84% disagreed that the lack of orthodox healthcare service in the community gave room for traditional modes while 11.05% strongly disagreed. Since there must be a means by which society takes care of their sick ones, like a popular saying "if the desire is not available, the available becomes the desirable." Therefore, more than 60% of the respondents have the perception that the lack of orthodox health services in the community gave room for traditional modes of healthcare in the study area. On the issue of concurrent use of both modes of healthcare services, 21.58% of nursing mothers in the study concurrently use both modes of health care services. The study revealed the following factors responsible for the simultaneous use of traditional and orthodox healthcare modes among nursing mothers of under-five children in the study area, 15 (5.55%) said using both modes makes them more comfortable in managing their health condition effectively in treating diseases, 4 (1.48%) said it enhances quick recovery and 5 (1.85%) said the cost incurred when both modes are applied is lesser.

**Table 1: Cross-Tabulation of Frequency and Percentage Distribution of Nursing Mothers of Under-Five Children and Concurrent Use of Orthodox and Herbal Drugs**

Age	CONCURRENT USE OF ORTHODOX AND HERBAL DRUGS		Total (%)
	Yes (%)	No (%)	
15-19	11 (78.57)	3 (21.43)	14 (100.00)
20-24	4 (14.81)	23 (85.19)	27 (100.00)
25-29	6 (8.57)	64 (91.43)	70 (100.00)
30-34	0 (0.00)	42 (100.00)	42(100.00)
35-39	0 (0.00)	37 (100.00)	37(100.00)
40-44	0 (0.00)	0 (0.00)	0.00
45-49	0 (0.00)	0 (0.00)	0.00
<b>Total</b>	<b>21 (11.05)</b>	<b>169 (88.95)</b>	<b>100.00</b>

Chi=75.5637, P=0.000, d.f =4

Source: Survey Research 2022

Table 1 shows the cross-tabulation of frequency and percentage distribution of outpatients nursing mothers by age group and concurrent use of orthodox and herbal drugs the study revealed that concurrent use of orthodox and herbal drugs is very high for mothers between ages 15-19 with 11(78.57%). 14.81% of nursing mothers between the ages 20-24 concurrent use orthodox and herbal drugs; 8.57% of nursing mothers between the age of 25-29 engages in the practice of concurrent use of orthodox and herbal drugs. Furthermore, concurrent use of orthodox and herbal drugs is low among women within the age group 20-24 when compared with women in the age groups 15-19 and 20-24. After examining the effect of age on the concurrent use of orthodox and herbal drugs, the p.value is less than 0.05 we, therefore, conclude that there is a significant effect of out-patient nursing mothers’ age on concurrent use of orthodox and herbal drugs.

**Table 2 Religion and Concurrent Use of Orthodox and Herbal Drugs**

Religion	Concurrent Use of Orthodox and Herbal Drugs		Total (%)
	Yes (%)	No (%)	
Christian	5 (4.90)	97 (95.10)	(100.0)
Muslim	4 (5.63)	67 (94.37)	(100.00)

Traditional	12 (70.59)	5 (29.41)	(100.00)
Total	21 (11.05)	169 (88.95)	(100.0)
<b>Chi= 67.3377, P=0.000, d.f =2</b>			

**Source: Survey Research 2022**

Table 2 shows the cross-tabulation of frequency and percentage distribution of out-patient nursing mothers by religion. The study revealed that concurrent use of orthodox and herbal drugs is very high for out-patients nursing mothers that are traditional worshippers which account for 70.59%. The rate of concurrent use of orthodox and herbal drugs among Muslim and Christian nursing mothers is very minimal compared to the traditional worshippers. After examining the effect of religion on the concurrent use of orthodox and herbal drugs, the p.value is 0.000 which is less than 0.05 we, therefore, conclude that there is a significant effect of religion on the concurrent use of orthodox and herbal healthcare services.

**Table 3 Cross-Tabulation of Frequency and Percentage Distribution of Respondents by Community and Concurrent Use of Orthodox and Herbal Drugs**

Community	Concurrent Use of Orthodox and Herbal Drugs		Total (%)
	Yes (%)	No (%)	
Ikenne	5 (62.50)	3 (37.50)	8(100.0)
Irolu	4 (15.38)	22 (84.62)	26(100.00)
Iperu	12 (30.00)	28 (70.00)	40 (100.00)
Ilishan	0 (0.00)	3 (12.00)	3 (100.00)
Total	21 (11.05)	169 (88.95)	100(100.0)
<b>Chi= 51.0560, P=0.600, d.f =2</b>			

**Source: Survey Research 2022**

Table 3 above shows the frequency and percentage distribution of out-patient nursing mothers on the community level and concurrent use of orthodox and herbal drugs. The study revealed that the majority of nursing mothers in the Ikenne community are fond of concurrent use of both traditional and orthodox modes of healthcare. The effect of community level on the concurrent use of traditional and orthodox modes of healthcare was carried out and the result showed an insignificant effect on the subject. Therefore, there is an insignificant effect of community



level of out-patient nursing mothers on the concurrent use of orthodox and herbal drugs.

**Table 4 Cross-Tabulation of Frequency and Percentage Distribution of Respondents by Level of Education and Concurrent Use of Orthodox and Herbal Drugs**

Level of Education	Concurrent Use of Orthodox and Herbal Drugs		Total (%)
	Yes (%)	No (%)	
Postgraduate	0 (0.00)	6(100.00)	6 (100.00)
Graduate	2 (1.05)	84 (95.45)	88 (100.00)
Secondary	5 (3.00)	66 (84.62)	78 (100.00)
Primary	12 (7.00)	13 (72.22)	18 (100.00)
Total	21 (11.05)	169 (88.95)	100(100.0)
<b>Chi= 11.1464, P= 0.011, d.f =4</b>			

**Source: Survey Research 2022**

Table 4 shows the cross-tabulation of frequency and percentage distribution of out-patients nursing mothers by the level of education. The study revealed that the concurrent use of orthodox and herbal drugs is very high for mothers with a primary level of education with 12(7.00%). Furthermore, the effect of educational level on the concurrent use of orthodox and herbal drugs, was examined and the p.value is less than 0.05, which is 0.011. We, therefore, conclude that there is a significant effect of out-patient nursing mothers' level of education on the concurrent use of orthodox and herbal drugs. The result of the study is consistent with the findings of Duru et al. (2016). The study found that two-thirds of patients attending herbal clinics used orthodox medicines before they visited the facilities, while only a quarter of hospital attendees used herbal medicines preceding their visits. Another study by Mahomood (2013) recorded about one-fifth of respondents concurrently using both herbal and orthodox health services.

## Discussion

Simultaneous use of herbal drugs and orthodox medicines is becoming unprecedentedly high among Africans particularly in Nigeria (Erinoso, 1998, as cited in Toyin, 2014). In the present study, age is statistically significant in the concurrent use of both modes of healthcare services. The finding aligns with the study of Azaizeh et al. (2003), where they reported

that about 80% of the world's population depends on traditional medicine for their healthcare. As a result, the study revealed that the concurrent use of orthodox and herbal drugs is very high for nursing mothers between ages 15-19 with 11(78.57%). Also, the research by Evans et.al. (2018); Ogunsola and Egbewale (2018), showed a significant effect of age on the concurrent use of traditional and orthodox drugs. Traditional and orthodox healthcare subscribers increased with decreasing ages. This has also been reported by Miller (1997); Adams et al. (2003) and Al-Faris et al. (2008). While the results of some studies in the USA found that simultaneous use of both healthcare services increased in middle-aged groups (Del & Marose, 2002; Steyer & Lantz, 2002). Traditional and orthodox use of healthcare services increased with lower levels of education. The study revealed 7% among those with primary school certificates, 3% among secondary certificates and 1% among graduates. These results are in disagreement with a study in Australia, where the concurrent use of both drugs were associated with increased levels of education (Eisenberg et.al., 1998).

A critical and more comprehensive sensitization on the effects and dangers of concurrent use of both modes of healthcare is needed to curb or rather eradicate that attitude. On the issue of the viability of combining both medical modes, more than 50% of the nursing mothers in the study disagreed with the perception that orthodox and traditional medicines are faster in curing ailments when combined than using them independently while one in every four nursing mothers have the perception that orthodox and traditional medicines are faster in curing ailments when combined than when used independently. Several reasons were elucidated as factors responsible for the concurrent use of both health services. The most mentioned reason among the respondents for the simultaneous use of both healthcare services is that both medical modes work together to manage health conditions. Second, they feel more comfortable managing their health conditions more effectively in treating diseases. Lastly, the cost incurred when both drug modes are used is lesser. The findings are consistent with the study of Umunakwe (2010), which state that orthodox drugs are also becoming very expensive and unavailable to average income earners and many diseases are developing resistance to orthodox drugs. An example is the increasing resistance of malaria parasites to the cheapest and most common malaria drug in Nigeria such as chloroquine. The implication of this is that the cost may not necessarily be the most important factor influencing the mode of

healthcare in the study area and is contrary to the worldview in the literature. Chetley (2007) and the World Health Organization (2002) claim that the cost of medical care is the most important factor influencing the utilization of traditional medicine by people around the world. In the present study, 70.59% of the participants who are traditional worshippers concurrently use both traditional and orthodox modes of healthcare when they are sick. This percentage align with the studies of Bent (2008), Ogunsola and Egbewale (2018) wherein more than 65% of the respondents concurrently use both medical modes when they are sick.

### Conclusion

The study concluded that 21.58% of nursing mothers in Ikenne LGA concurrently use both modes of healthcare when they are sick while 15% of nursing mothers concurrently treat their children with both modes of healthcare. The perception of nursing mothers in orthodox healthcare mode is that it is widely available, accessible and desirable but relatively expensive and, therefore, recommend that traditional medicine should be integrated into the primary healthcare system. Research, quality control, assessment of safety, and regulation of traditional medicine should be carried out to improve its standard and efficacy.

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