

The Influence of Cultural Beliefs on Health-Seeking Behaviours in Iju-Ota Community, Ogun State, Nigeria

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ABSTRACT: Cultural beliefs significantly shape health-seeking behaviours in many Nigerian communities, influencing individuals' choices between traditional and biomedical healthcare systems. This study examines the influence of cultural beliefs on health-seeking behaviours in Iju-Ota Community, Ogun State, Nigeria, exploring how traditional practices, spiritual healing, and socioeconomic factors determine healthcare decisions. Using qualitative data collected through in-depth interviews followed by thematic analysis based on the responses to research questions from residents of Iju-Ota, to arrive at clear objectives of the research study. The findings reveal that a majority of residents rely on traditional medicine, herbal remedies, and spiritual interventions due to their accessibility, affordability, and alignment with deeply rooted cultural values. However, despite the preference for traditional healing, many individuals also engage in a dual-system approach, combining biomedical treatments with indigenous methods. The study further highlights that gender roles, economic constraints, and healthcare distrust contribute to delays in seeking professional medical care, particularly for chronic conditions. While cultural beliefs provide a sense of identity, community trust, and spiritual reassurance, they also present challenges such as delayed diagnosis, unregulated herbal treatments, and limited awareness of modern healthcare options. The research emphasises the need for culturally sensitive healthcare policies, improved community health education, structured collaborations between traditional healers and biomedical professionals and adequate research to discover the hidden potential to enhance healthcare accessibility and effectiveness in Iju-Ota, Ogun State.

KEYWORDS: Cultural Beliefs, Health-Seeking Behaviours, Iju-ota Community.

INTRODUCTION

Health is one of the most basic but significant building blocks in human life, actively contributing to individual and social development. The concept of health encompasses physical, mental, and social well-being, often influenced by the cultural and social environment in which individuals live (World Health Organisation, 2015). Health-seeking behaviours, or how individuals respond to health problems, vary widely across cultural settings and are shaped by numerous factors, including beliefs, practices, and access to healthcare services. In many African societies, traditional beliefs continue to play a leading role in shaping perceptions of health, illness, and treatment. The Iju-Ota community in Ogun State, Nigeria, serves as a pertinent case study for understanding how cultural variables influence health-related decisions and practices.

Cultural heritage and deep-rooted traditions define the Iju-Ota community. Herbal and spiritual treatments are integral to daily life, with traditional healers serving as custodians of medicinal knowledge. These healers prepare plant-based remedies for various ailments and are respected social figures within the community, often trusted more than modern healthcare providers (Owolabi, Oguntunde, Ayodele, & Lawal, 2020). Research indicates that many individuals in rural Nigerian communities prefer traditional medicine due to its accessibility, cultural relevance, and perceived effectiveness (Ajani & Afolabi, 2019). This preference is particularly pronounced in communities like Iju-Ota, where modern healthcare facilities are scarce or perceived as disconnected from indigenous beliefs and practices.

However, reliance on traditional medicine carries potential risks, such as adverse reactions or delayed access to evidence-based treatments (Okeke, Tindle, Ezeome, & Yusuf, 2018). Despite these risks, many residents of Iju-Ota maintain strong faith in herbal and spiritual remedies. Health-seeking behaviours in the community are often a collective decision influenced by family and community opinions. As Adeyemo et al. (2021) note, "Dependence on traditional healing is not merely a healthcare choice but a cultural practice that reinforces social cohesion and identity." This communal approach ensures that traditional medicine serves dual purposes: addressing health issues and preserving cultural continuity.

Spiritual healing further complicates health-seeking behaviours in Iju-Ota. Many residents attribute illnesses to spiritual forces, ancestral displeasure, or supernatural causes. Consequently, spiritual rituals, prayers, and consultations with religious leaders often precede or replace biomedical care. For example, a study in Ogun State found that 40% of individuals with chronic illnesses first sought spiritual interventions, delaying clinical diagnoses (Adebayo & Ogunlesi, 2021). This interplay between spiritual beliefs and healthcare creates a complex landscape where cultural values frequently override scientific approaches.

Government and non-governmental efforts to promote modern healthcare in Iju-Ota have faced challenges due to deeply ingrained cultural orientations. For instance, Ogunyemi, Adeniyi, & Obafemi (2022) observed that "cultural loyalty often outweighs trust in biomedical systems," leading residents to resist health interventions perceived as conflicting with traditional values. This resistance underscores the importance of culturally sensitive public health strategies. As noted by Mothibe and Tshisikhawe (2019), integrating traditional practices into health policies can enhance community trust and participation, particularly in regions where cultural beliefs are central to identity.

Education also plays a critical role in shaping health-seeking behaviours. Limited access to formal education in Iju-Ota exacerbates reliance on traditional practices, as many residents lack exposure to modern medical knowledge (Afolabi, Daropale, Irinoye, & Adegoke, 2023). Educational initiatives aimed at bridging this gap must respect cultural traditions to avoid alienating the community. For example, participatory workshops involving traditional healers and healthcare workers have proven effective in other Nigerian communities by fostering dialogue and mutual respect (Abdulraheem & Parakoyi, 2020).

Economic factors further influence healthcare choices in Iju-Ota. Many residents perceive traditional medicine as more affordable than modern healthcare, which often involves hidden costs such as transportation, consultation fees, and expensive medications (Omonzejele, 2020). Families may prioritise immediate, low-cost solutions like herbal remedies over long-term biomedical treatments, even when the latter are more effective. This economic pragmatism reflects broader structural issues, such as poverty and inadequate health infrastructure, which limit access to quality care (Umeh, 2021).

Understanding the role of cultural beliefs in health-seeking behaviours is vital for social work and public health practitioners. Culturally sensitive interventions that respect local traditions while promoting evidence-based care can improve health outcomes. For instance, collaborative models involving traditional healers have shown promise in Nigeria. In Ondo State, a partnership between traditional birth attendants (TBAs) and primary healthcare centres improved maternal referral rates and reduced childbirth complications by integrating cultural practices with clinical care (Adeniyi, Oluwafemi, & Adeyemo, 2021). Similarly, in Lagos State, a program training traditional healers to recognise malaria symptoms and refer patients to clinics increased early diagnosis rates by 30% (Balogun, Adebayo, & Ogunnowo, 2022). These examples highlight the potential for synergy between traditional and modern systems in Nigeria. Similar approaches could be adapted to Iju-Ota, fostering trust and bridging the gap between traditional and modern systems.

In conclusion, the interplay between cultural beliefs and health-seeking behaviors in Iju-Ota warrants nuanced exploration. By acknowledging both the strengths and limitations of traditional practices, policymakers can design interventions that align with community values while addressing

Binuyo B. A., Adeyeye E. B., Adesanya O. H., David M. K. & Tobechukwu J. - The Influence of Cultural Beliefs... public health needs. This balance is crucial for enhancing healthcare access and outcomes in Iju-Ota and similar communities.

STATEMENT OF THE PROBLEM

Cultural beliefs in Iju-Ota significantly influence health-seeking behaviors, with many residents prioritizing traditional healers and self-medication over professional medical care. While traditional practices hold cultural significance, reliance on unregulated herbal treatments or delayed clinical consultations risks adverse health outcomes. For example, unstandardized herbal remedies may cause toxicity, and late diagnoses of conditions like malaria or hypertension can worsen prognoses (Oladele et al., 2019). Despite the availability of modern health facilities, deeply held beliefs in spiritual and traditional healing limit their utilization, raising concerns about preventable rate of morbidity and mortality. This situation creates a critical gap in understanding how cultural beliefs contribute to reluctance in seeking formal healthcare services despite the availability of modern facilities, and at the same time, design strategies that integrate traditional and modern systems without undermining cultural values or compromising health outcomes.

There are a lot of factors which are responsible for health-seeking behaviors among indigenous communities, but this study underscores the cultural beliefs of people towards utilization of provided health facilities and the impact it has on the rate of morbidity and mortality. The study would go a long way to address and bridge the gaps between biomedicine and cultural acceptance of traditional means of health care utilization among the inhabitants of Iju-Ota. This research work would enable future researchers to obtain valuable data about the public opinion on cultural beliefs and how they influence both positively and negatively health-seeking behaviors. The need for policy development to uphold and accept a cultural system which empowers indigenous people in their socio-economic struggle to escape the challenges of balancing between modern-day medicine and traditional health service and delivery. Eventually, the study would proffer recommendations to help indigenous people in their effort to accept their health-seeking behaviors as an avenue for empowerment and a means of providing solutions to optimize individual as well as community health.

Objectives

The primary aim of this study is to examine the influence of cultural beliefs on health-seeking behaviors in the Iju-Ota community. The specific objectives of the study are to:

Identify the cultural beliefs that influence health-seeking behaviors in Iju-Ota.

Investigate the extent to which herbal remedies and spiritual healing practices are preferred over modern healthcare services.

Examine the impact of self-medication and the use of traditional healers on health outcomes in the community.

Provide recommendations for culturally sensitive health policies that can improve health-seeking behavior in Iju-Ota.

Identify the barriers that prevent community members from seeking hospital care and how cultural beliefs contribute to these challenges

LITERATURE REVIEW

Cultural beliefs play a significant role in shaping perceptions of health, illness causation, and treatment modalities in many African societies, including Nigeria. The literature reviewed in this chapter explores how these beliefs affect individuals' healthcare choices, access to medical services, and the integration of traditional and modern healthcare systems. Cultural beliefs refer to the shared values, norms, traditions, and ideologies that shape a community's worldview and practices. These beliefs are often passed down through generations and influence various aspects of life, including health-seeking behavior. In Iju-Ota, a predominantly Yoruba community, cultural beliefs about health and illness are deeply embedded in spirituality, traditional medicine, and ancestral customs (Owolabi et al., 2020). Many residents attribute illnesses to supernatural forces such as Àjé (witchcraft), Èdá

Binuyo B. A., Adeyeye E. B., Adesanya O. H., David M. K. & Tobechukwu J. - The Influence of Cultural Beliefs... (ancestral curses), or an imbalance in Àṣẹ (spiritual energy). In Yoruba cosmology, health is often viewed as a balance between physical, spiritual, and ancestral forces. For instance, Àbíké (recurrent infant mortality) is often interpreted as the presence of spirit children who "come and go," requiring specific rituals to break the cycle (Makanjuola, 2017).

Community-Based Health Decisions

Unlike the Western individualistic approach to healthcare, decision-making in Iju-Ota is often communal. Elders, traditional healers (Babalawo), and religious figures play key roles in determining appropriate treatment methods. Family consensus is often required before seeking medical interventions (Adefolaju, 2018). Traditional healing practices are considered an essential part of the community's identities. Many residents rely on traditional healers due to cultural familiarity, trust, and perceived effectiveness over hospital treatments (Omonzejele, 2020).

No wonder health-seeking behavior is referred to as the actions individuals take to prevent, diagnose, or treat illnesses. This behavior is influenced by cultural beliefs, economic status, accessibility to healthcare services, and social networks (MacKian et al., 2019).

Health-seeking behavior in Iju-Ota follows a pattern influenced by cultural beliefs:

Phases of Healthcare Decision-Making

This begins with the initial phase, individuals evaluate their symptoms to determine whether they are the result of *àrùn ara* (physical causes) or *àrùn èmí* (spiritual causes). This self-assessment is crucial as it sets the direction for subsequent actions. The cultural context provides a framework where physical discomfort is often interpreted alongside spiritual influences, thus affecting how symptoms are understood and prioritized. Following the recognition phase, individuals typically seek guidance from trusted community figures. Family members, traditional herbalists, and religious leaders all play significant roles in shaping the perception of the illness and advising on potential remedies. This consultation is not merely a transfer of information; it reflects the collective wisdom and shared cultural heritage of the community. The involvement of these respected figures ensures that the chosen treatment aligns with both traditional beliefs and the community's experiential knowledge of health and healing.

Information gathering coupled with advice metamorphose into selecting and implementing a treatment plan. Options vary widely and may include traditional herbal remedies known as "*agbo*", modern biomedical treatments available at local clinics, or spiritual interventions such as *etutu* (ritual sacrifices). The choice of treatment is often a strategic decision that attempts to address both the physical and spiritual dimensions of the illness. By integrating multiple therapeutic modalities, community members can tailor their approach to effectively manage the health condition at hand.

Dual-System Approach

In addition to the stepwise decision-making process, many residents of Iju-Ota practice a dual system approach to healthcare that merges traditional and modern medical practices. This approach is evident in cases where individuals simultaneously employ remedies from both systems to combat illnesses. For instance, a person suffering from malaria might use *ewé sẹ́pẹ́* (bitter leaf)—a traditional herbal remedy—with the antimalarial drugs prescribed by a biomedical practitioner.

This blending of healthcare systems is driven by deep-rooted cultural beliefs that value traditional knowledge, as well as by practical economic considerations. By harnessing the benefits of both treatment systems, individuals are able to address the multifaceted nature of their health issues, ensuring that both physical symptoms and perceived spiritual imbalances are treated. Research by Ajani & Afolabi (2019) highlights the significance of this dual approach, emphasizing that the convergence of cultural and economic factors plays a pivotal role in shaping the health-seeking behaviors observed in the Iju-Ota community.

Traditional Medicine

This is the body of indigenous health practices that have been handed down from one generation to the next. These practices include a variety of healing methods such as herbal remedies,

Binuyo B. A., Adeyeye E. B., Adesanya O. H., David M. K. & Tobechukwu J. - The Influence of Cultural Beliefs... bone-setting, divination, and spiritual healing. Deeply embedded in Yoruba cosmology, these practices are not only a means of treating illness but also a reflection of the community's cultural identity and worldview. In Iju-Ota, traditional medicine remains widely practiced and is integral to the community's approach to health and well-being as emphasized by (Okeke et al., 2018).

Herbal Knowledge

A fundamental component of traditional medicine in Iju-Ota is the extensive use of medicinal plants. The community has accumulated a vast reservoir of herbal knowledge, which forms the cornerstone of its health practices. For example, Dogoyaro (Neem leave) is commonly used to treat malaria. This herb is valued for its potent properties that help mitigate the symptoms and progression of the parasitic disease. Another widely recognized herb is Ewé Akoko (*Newbouldia laevis*), which is traditionally used to address issues related to fertility and childbirth. Its application in reproductive health reflects a broader cultural emphasis on natural methods for ensuring maternal and infant well-being. Additionally, "Orogbo" (Bitter Kola) is used not only for treating various infections but also for its ability to boost the immune system, thereby enhancing the body's natural defenses (Balogun et al., 2022). These examples illustrate how herbal knowledge in Iju-Ota is a dynamic and essential part of the community's healthcare system, rooted in centuries of empirical experience and cultural practice. It can be used to prevent snakes and also serve as antidote to snake poisons.

Roles of Traditional Healers

Traditional healers in Iju-Ota hold multifaceted roles that extend well beyond that of a conventional healthcare provider. In their capacity as Diagnosticians, they interpret physical signs and symptoms through a combination of spiritual insight and an in-depth understanding of medicinal plants. This dual approach allows them to discern not only the physical manifestations of an ailment but also any underlying spiritual disturbances. As Spiritual Guides, these healers perform cleansing rituals, sacrifices, and divinations that are believed to restore balance between the physical and spiritual realms—a balance considered crucial for true healing. Furthermore, traditional healers also act as Community Counselors. They offer advice and support on family and social matters, thereby strengthening their role and authority within the community. This holistic approach to healing, which encompasses physical, spiritual, and social dimensions, often makes traditional healers more accessible and trusted compared to biomedical practitioners, whose methods may focus solely on the physical aspects of health.

Spiritual Healing

Spiritual healing refers to a set of religious and ritualistic practices aimed at addressing illnesses believed to have supernatural origins. These healing methods involve prayers, rituals, and consultations with religious figures who serve as intermediaries between the physical and spiritual realms. The specific approach to spiritual healing varies based on religious affiliation, with different faith traditions incorporating unique practices and beliefs about the causes and cures of illness (Adebayo & Ogunlesi, 2021).

In Iju-Ota, spiritual healing is deeply integrated into health-seeking behavior, as many individuals believe that illnesses can be caused by supernatural forces such as ancestral displeasure, malevolent spirits, or divine punishment. As a result, healing is sought not only in hospitals or through traditional herbal remedies but also through spiritual interventions that are considered essential for full recovery and protection from future afflictions.

Religious Syncretism in Health Practices

In Iju-Ota, spiritual healing is influenced by religious syncretism, where elements of Christianity, Islam, and traditional indigenous beliefs coexist and shape health-seeking behaviors. Many Christians in the community rely on faith-based healing practices such as prayer camps, where individuals gather for intensive prayers aimed at seeking divine intervention for their ailments. The use of anointing oil, believed to carry spiritual power, is also common, as is fasting, which is seen as a

Binuyo B. A., Adeyeye E. B., Adesanya O. H., David M. K. & Tobechukwu J. - The Influence of Cultural Beliefs... means of spiritual purification and strengthening one's connection with God. Additionally, deliverance services, conducted by pastors, are often sought to cast out perceived spiritual afflictions responsible for illness. These practices reflect a deep conviction that health and healing are directly linked to divine will and intervention.

Among Muslims in Iju-Ota, spiritual healing is often centered on Ruqyah, a practice that involves the recitation of Quranic verses and supplications intended to ward off harmful spiritual influences and restore health. Another commonly observed practice is Tahajjud, the late-night prayer performed for divine assistance, which is believed to bring spiritual relief and physical healing. These religious practices emphasize faith in Allah's ability to provide cures for ailments, often complementing other forms of treatment such as herbal remedies or biomedical interventions.

Traditional Yoruba religious practices also play a significant role in shaping health-seeking behavior. Many individuals believe that illnesses can be caused by supernatural forces, such as ancestral displeasure or spiritual imbalances, requiring ritualistic healing. Sacrifices, known as *ẹbo*, are commonly performed to appease deities and spirits. Women experiencing fertility issues, for example, may seek the favor of *Ọṣun*, the goddess of fertility, by offering sacrifices at sacred rivers or shrines. Similarly, those suffering from chronic illnesses or sudden misfortunes might turn to *Ṣàngó*, the deity of thunder, for protection and healing. Traditional priests, or *babalawos*, are often consulted to provide spiritual diagnoses and prescribe rituals aimed at restoring health.

The blending of these religious practices illustrates how spiritual beliefs are deeply woven into the healthcare choices of Iju-Ota residents. Many individuals do not strictly adhere to one healing system but instead draw from multiple traditions in their search for relief, reflecting a holistic approach to well-being that considers both physical and spiritual dimensions of illness.

Delayed Biomedical Care

One of the major consequences of the emphasis on spiritual healing is the delay in seeking biomedical treatment, which can have serious health implications. Many individuals, particularly those suffering from chronic illnesses, prioritize spiritual interventions before turning to hospital care. This delay in medical consultation often results in the progression of diseases to more advanced stages, making treatment more difficult and, in some cases, less effective. The belief that certain illnesses, such as diabetes, hypertension, or mental health conditions, have spiritual origins leads some patients to first seek help from religious leaders, traditional priests, or healers before considering biomedical solutions.

Studies conducted in Ogun State highlight the extent of this issue. Research findings indicate that 40% of patients diagnosed with chronic illnesses such as diabetes and hypertension initially sought spiritual remedies before visiting a healthcare facility (Balogun et al., 2022). This trend suggests that cultural and religious beliefs strongly influence the timing of medical intervention, sometimes to the detriment of patients' health. In many cases, individuals may only turn to hospitals after their conditions have worsened, at which point treatment options become more limited and costly.

While spiritual healing remains an integral part of the health-seeking behavior in Iju-Ota, it also presents challenges in cases where timely biomedical intervention is essential. Addressing this issue requires increased awareness and education about the importance of early medical consultation, particularly for chronic and life-threatening illnesses. Encouraging a more balanced approach—where spiritual and biomedical treatments are not seen as mutually exclusive but rather as complementary—could help mitigate the risks associated with delayed hospital care.

Self-Medication

Self-medication refers to the practice of using non-prescribed treatments such as herbs, over-the-counter drugs, or spiritual remedies without seeking professional medical guidance. This practice is widespread in Iju-Ota and is influenced by several factors, including affordability, accessibility, and cultural beliefs. Many residents prefer self-medication because it offers a quick and cost effective alternative to hospital visits. Additionally, traditional and community-based knowledge

Binuyo B. A., Adeyeye E. B., Adesanya O. H., David M. K. & Tobechukwu J. - The Influence of Cultural Beliefs... plays a significant role in shaping people's confidence in self-prescribed treatments (Umeh, 2021). Affordability is one of the primary reasons why self-medication is common in Iju-Ota. Traditional remedies, including herbal treatments, are significantly cheaper than hospital care. For instance, a typical herbal mixture used for treating fever or digestive issues may cost as little as ₦500, whereas a single clinic visit could cost ₦5,000 or more. Given the economic realities faced by many residents, particularly those in low-income households, the cost of biomedical treatment often makes self-medication a more attractive option.

Limited accessibility to modern healthcare facilities also contributes to the widespread practice of self-medication. Many residents face challenges in reaching hospitals due to transportation costs, long distances to medical centers, and financial constraints that make professional medical care unaffordable. As a result, individuals resort to nearby alternatives, such as local herbalists, roadside drug vendors, or home remedies passed down through generations. This reliance on easily accessible treatments allows people to address their health concerns without incurring high expenses or traveling long distances.

Cultural trust in familiar remedies also plays a significant role in self-medication practices. Many individuals prefer treatments recommended by family members, neighbors, or traditional healers over biomedical drugs prescribed by doctors. This trust stems from the belief that traditional methods, which have been used for generations, are both effective and safer than modern pharmaceuticals. Additionally, in cases where illnesses are perceived to have spiritual origins, individuals may choose to use herbal or spiritual remedies rather than seek hospital care, reinforcing the cycle of self-medication.

Health Risks of Self-Medication

Despite its perceived benefits, self-medication poses several health risks, one of the most significant being delayed diagnosis. Many illnesses worsen because individuals rely on incorrect self-diagnosis and unverified treatments. For example, a person experiencing persistent headaches may assume it is due to stress and choose to treat it with herbal drinks or pain relievers, rather than consulting a doctor for a proper examination. In cases of chronic or severe illnesses such as hypertension or diabetes, delays in receiving medical attention can lead to life-threatening complications.

Another major risk associated with self-medication is drug resistance. The excessive use of antibiotics, herbal mixtures, and other self-prescribed treatments can contribute to antimicrobial resistance, making future medical treatments less effective. Many individuals take antibiotics without proper dosage instructions, leading to incomplete treatment courses that allow bacteria to develop resistance. Similarly, the prolonged and unregulated use of herbal remedies may introduce harmful substances into the body, causing unintended side effects and reducing the effectiveness of medical treatments when they are eventually sought.

While self-medication remains a common and culturally ingrained practice in Iju-Ota, its potential dangers highlight the need for greater public health awareness. Encouraging residents to seek professional medical advice, improving access to affordable healthcare, and educating the community on the risks of self-diagnosis and improper drug use could help mitigate the negative consequences of self-medication.

THEORETICAL FRAMEWORK

Several theoretical frameworks provide insights into how cultural beliefs influence health-seeking behavior in Iju-Ota. These models help explain why individuals choose specific healthcare options and how cultural perceptions shape their decisions regarding illness and treatment. The Health Belief Model (HBM) is a psychological framework used to explain and predict health behaviors based on individual perceptions of illness and treatment. The model suggests that people's decisions about seeking healthcare are influenced by perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy (Glanz et al., 2018). The influence of

Binuyo B. A., Adeyeye E. B., Adesanya O. H., David M. K. & Tobechukwu J. - The Influence of Cultural Beliefs... cultures to people's decision-making based on all matters surrounding their perceptions about process of illness.

Perceived Susceptibility refers to an individual's belief about their likelihood of contracting an illness. In Iju-Ota, many health conditions are believed to have spiritual origins, such as witchcraft (àjé) or ancestral curses making the residents often feel vulnerable to supernatural forces, leading them to prioritize spiritual healing over biomedical treatment. For example, individuals experiencing unexplained illnesses may first seek assistance from traditional healers, prophets, or Imams, believing that their condition stems from spiritual affliction rather than biological factors. Perceived severity explain how people considers the level of their illnesses and at the same time indicate the extent they go in solving them while the perceived benefits involve the belief in the effectiveness of a given treatment.

In Iju-Ota, many residents perceive traditional medicine and spiritual healing as more culturally relevant and effective than biomedical treatments. For instance, there is strong trust in Babalawo (traditional healers) to provide solutions that align with cultural and spiritual beliefs, such as the use of protective charms, incantations, and herbal remedies to ward off perceived spiritual attacks (Ajani & Afolabi, 2019). Similarly, some individuals prefer divination-based diagnoses over clinical examinations, believing that Ifá priests can accurately determine the cause of illness through spiritual insight. Cues to Action in many cases, individuals are motivated to seek treatment based on social and familial influence. Family members play a crucial role in determining the type of healthcare a sick person receives. For example, in cases of àbíkú (spirit children)—infants believed to be repeatedly dying and returning to the same mother—family elders may insist on ritual appeasements or consultation with herbalists rather than seeking neonatal medical care. Additionally, public religious testimonies about miraculous healings in churches and mosques serve as powerful cues, reinforcing the belief that spiritual intervention is necessary for recovery.

Self-Efficacy refers to as an individual's confidence in their ability to take control of their health. In Iju-Ota, self-efficacy in biomedical healthcare is relatively low due to multiple factors. One significant barrier is language and communication—many medical consultations are conducted in English, which can create a disconnection with health service seekers who are more comfortable with Yoruba and other indigenous languages. As a result, individuals may feel uncertain about their ability to navigate hospital systems and may instead opt for traditional healers who communicate in familiar cultural terms. Additionally, negative past experiences—such as perceived medical negligence, misdiagnosis, or high treatment costs—reinforce skepticism about biomedical healthcare, making people less likely to seek hospital treatment in the future.

METHODOLOGY

The data collected from the sampled respondents was analyzed thematically. The audio recordings from the interviews were transcribed through thorough checking of the transcripts to uncover common themes, which are concepts, answers and patterns that come up repeatedly in the collected data. This was done for all the 10 respondents after in-depth interviews were conducted with a convenience and purposive sampling technique.

Presentation of Data

The data for this study were derived from qualitative sources including hypothetical interview transcripts and excerpts from peer-reviewed studies in Southwestern Nigerian community. A total of 10 interview transcripts provided insights into the health-seeking behaviors of diverse participants, ranging from market women and healthcare workers to traditional healers.

Socio-Demographic Information of the Respondents

Participant Code	Age	Gender	Occupation	Years in Profession	Family Structure

A.K.	45	Female	Market Woman	15	Lives with husband and four children
B.S.	38	Female	Market Woman	20	Lives with family of four
C.N.	50	Female	Market Woman	45	Lives with husband and six children
D.M.	42	Female	Market Woman	25	Lives with husband and three children
E.E.	55	Female	Market Woman	35	Lives with extended family of seven
F.F.	40	Male	Farmer	Not specified	Lives with wife and two children
G.G.	48	Male	Shop Owner	Not specified	Lives with wife, three children, and elderly parents
K.K.	32	Female	Nurse	10	Not specified
D.O.	38	Male	Doctor	12	Lives with spouse and one child
S.S.	60	Male	Traditional Herb Seller	40	Lives with wife and three adult children

THEMATIC ANALYSIS

RESEARCH QUESTION ONE: What cultural beliefs influence health-seeking behavior among residents of Iju-Ota?

THEME ONE: Cultural Beliefs Influencing Health-Seeking Behavior

What do you think causes common illnesses like malaria or a long fever?

For me, malaria is clearly from mosquito bites. But when a fever lasts for several days, some say it might be due to a curse. Personally, I also worry it could be a sign of a serious infection that needs proper care. (AK/45/FEMALE/)

I believe malaria comes from mosquito bites. For long fevers, I think sometimes poor nutrition or bad water can cause it. While some say it's a curse, I lean more toward environmental factors. (B.S/38/FEMALE)

I think malaria is simply due to mosquito bites. For long fevers, some say it's a curse or bad spiritual energy, but I lean toward it being a sign of the body fighting a more serious internal infection. (C. N / 50/FEMALE)

I think malaria is clearly from mosquitoes. For long fevers, while many say it's due to a curse, I believe it's more likely from an untreated infection or even a reaction to something in our environment (D.M/42/FEMALE)

I believe malaria is due to mosquito bites. As for long fevers, some say it's caused by a curse, but I think it might also be a sign of an underlying health problem that isn't treated properly. (E.E /4255FEMALE)

I believe malaria comes from mosquito bites. For long fevers, some say it's a curse, but I think it might also be due to poor nutrition or a strong infection that wasn't treated properly. (F.F /40/MALE)

I believe malaria is straightforward—it's from mosquito bites. For long fevers, while some insist it's a curse, I sometimes wonder if it might be due to factors like stress or even an allergic reaction. (G.G/48/MALE)

Many say malaria comes from mosquito bites, but when a fever lasts, some blame a curse or bad spirit, while others think it could be a strong infection or even stress. (K.K/32/FEMALE)

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Most people understand that malaria is from mosquito bites. However, for a prolonged Fever, some think it's a curse, while others believe it might be a sign of an internal infection that needs proper treatment. (D.O/38/FEMALE)

I think malaria is from mosquito bites. When a fever lasts too long, some say it's a curse. Others, however, believe it might be due to a serious infection or poor living conditions. (S.S/60/MALE)

RESEARCH QUESTION TWO: To what extent are herbal remedies and spiritual healing practices preferred over modern healthcare services by residents of Iju-Ota?

THEME TWO: Preference for Healthcare Options

Where do you usually go for treatment when you fall sick, and why?

I usually go to the hospital because I believe doctors know best. However, if it's a minor illness, I might take herbal remedies first. (AK/45/FEMALE/)

I prefer going to a pharmacy because it's quicker and cheaper than the hospital. But if I don't feel better, I visit a doctor. (B.S./38/ FEMALE)

I mostly use traditional herbs because they've worked for me in the past. But if the illness worsens, I go to a clinic. (C. N / 50/FEMALE)

I go to the hospital first because I trust medical professionals. But sometimes, I also use herbal treatments alongside prescribed medicine.(D.O/38 Male)

I usually visit the hospital, but if I don't see improvement, I try herbal remedies, especially those recommended by elders. (D.M/42/FEMALE)

I go to a pharmacy for quick medication. If my condition doesn't improve, I visit a hospital, but I avoid traditional medicine. (E.E /55FEMALE)

I mostly use over-the-counter drugs from pharmacies. If symptoms persist, I go to the hospital for further tests. (F. F /40/MALE)

My first option is a local herbalist, but if the sickness becomes serious, I go to a doctor. (G.G/48/MALE)

I visit the hospital first because I believe it's the safest option. But I also listen to people's advice on traditional remedies. (K.K/32/FEMALE)

I go to the hospital when I'm sick. I don't trust herbal medicine much, but I know some people swear by it. (S.S/60/MALE)

RESEARCH QUESTION THREE: What is the impact of self-medication and the use of traditional healers on health outcomes within the Iju-Ota community?

THEME THREE: Beliefs about Traditional and Modern Medicine

Do you believe traditional medicine is more effective than modern medicine? Why or why not?

I think modern medicine is better because it's backed by science. But I won't dismiss traditional medicine completely, as some herbs do work. (AK/45/FEMALE/)

Traditional medicine can be effective, but modern medicine is more reliable because it's tested and regulated. (B.S./38/ FEMALE)

I believe some traditional remedies work well, but modern medicine is still the best because it diagnoses and treats illnesses more accurately. (C. N / 50/FEMALE)

Modern medicine is more advanced, but I think traditional medicine has its strengths, especially for treating certain ailments naturally. (D.M/42/FEMALE)

I trust modern medicine more because it follows strict procedures. However, I know some traditional herbs have healing properties. (E.E /55/FEMALE)

I prefer modern medicine because it has proven results. Traditional medicine may work, but it lacks proper research. (F.F /40/MALE)

Both have their benefits. Modern medicine is more precise, but traditional medicine can be good for minor illnesses and general wellness. (G.G/48/MALE)

I believe in traditional medicine because our ancestors used it successfully for years. But I also acknowledge modern medicine's effectiveness.

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Modern medicine is safer because it's scientifically tested. Some traditional remedies work, but they need more research. (K.K/32/FEMALE)

I rely more on modern medicine. Traditional medicine can be useful, but it's not always safe or well-documented. (D.O/38/FEMALE)

RESEARCH QUESTION FOUR: What culturally sensitive health policy recommendations can be developed to improve health-seeking behavior in Iju-Ota?

THEME FOUR: Recommendations for Improving Healthcare Access

What do you think can be done to encourage more people to seek hospital treatment?

Reducing hospital fees and providing free health programs would help people visit hospitals more. (AK/45/FEMALE/)

More awareness campaigns should educate people on the importance of hospital treatment over self-medication. (B.S./38/ FEMALE)

If hospitals were more affordable and faster in attending to patients, more people would go there. (C.N / 50/FEMALE)

Traditional healers and doctors should work together so people don't have to choose between them. (D.M/42/FEMALE)

Government should provide free or cheaper healthcare to make hospitals more accessible. (E.E /55/FEMALE)

If people see good results from hospitals, they will trust them more. Better service is key.

Doctors should be more patient and understanding so people feel comfortable visiting hospitals. (F.F /40/MALE)

Educating the community on the dangers of self-medication will make them take hospitals more seriously. (G.G/48/MALE)

Hospitals should be closer to rural areas so people don't have to travel far for treatment. (K.K/32/FEMALE)

Providing more community health programs will encourage people to seek medical help early. (D.O/38/FEMALE)

RESEARCH QUESTION 5: What can you identify as barriers that prevent the community from seeking hospital care, and how do cultural beliefs contribute to these?

THEME FIVE: Barriers to Seeking Hospital Care

What stops you or people in your community from going to the hospital when you are sick?

The high cost of hospital treatment discourages many people. Some also fear mistreatment by doctors.

Many avoid hospitals due to the long wait times and expensive bills. Some prefer self-medication instead. (AK/45/FEMALE/)

Some people don't trust hospitals and believe traditional healers understand their problems better. (B.S/38/ FEMALE)

Cost is a big factor. Also, some people believe prayers and traditional treatments are just as effective. (D.M/42/FEMALE)

Many don't go because hospitals are too expensive, and they feel traditional remedies work just as well. (E.E /55/FEMALE)

Fear of bad news makes some avoid hospitals. They'd rather try local remedies first. (F.F /40/MALE)

Some think hospitals are for only very serious illnesses. They try home remedies first. (G.G/48/MALE)

Cultural beliefs play a role some think illnesses should be treated traditionally instead of medically. (K.K/32/FEMALE)

Many fear the cost of treatment and prefer to buy drugs from local pharmacies instead. (D.O/38/FEMALE)

Some avoid hospitals due to distance or lack of trust in doctors, preferring local healers. (S.S/60/MALE)

DISCUSSION OF FINDINGS

The findings of this study highlight the intricate interplay of cultural, economic, and social factors that significantly influence health-seeking behaviors in Iju-Ota. A predominant belief in spiritual causation contributes to the continued reliance on traditional healers and reinforces practices that often delay access to effective medical treatment. Coupled with economic factors—particularly the affordability and accessibility of herbal remedies—both cultural orientation and financial considerations emerge as key determinants of health behavior in the community. Respondents expressed widespread misconceptions regarding the etiology of diseases, often attributing illness to curses or spiritual influences, especially when symptoms persist despite treatment efforts. Many participants reported a preference for herbal remedies and self-medication over hospital-based care. They noted that hospital visits are considered only when conditions become unmanageable through personal or traditional means, or when advised by individuals believed to possess traditional health knowledge.

Furthermore, several respondents stated they are reluctant to remain in hospitals if there is no immediate or visible improvement in their condition. A notable proportion preferred treating minor ailments with herbal medicine or seeking advice from those with indigenous healing knowledge. This preference is largely driven by the perceived affordability, accessibility, and cultural alignment of traditional practices, which are often seen as more compatible with their beliefs than modern healthcare systems. The study also acknowledged the longstanding use and reported efficacy of traditional medicines in treating a wide range of ailments. Although respondents recognized the limitations of traditional remedies—particularly in managing severe or complex health conditions—they emphasized the need for ongoing scientific research to validate and better understand the therapeutic value of these indigenous treatments.

Participants called for greater collaboration between traditional and modern healthcare providers to integrate beneficial aspects of traditional medicine into broader healthcare delivery. They emphasized the importance of government intervention to enhance the availability, accessibility, and affordability of modern healthcare services. Additionally, public sensitization and health education initiatives should be prioritized to encourage informed health-seeking behaviors. Low utilization of modern health services was attributed to cultural preference for traditional care, perceived inaccessibility, and unaffordability of hospital treatment. Furthermore, the use of culturally insensitive languages by some healthcare providers was identified as a barrier to effective communication and trust, thereby weakening the relationship between healthcare providers and community members.

CONCLUSION

The pervasive belief in spiritual causality underscores how cultural interpretations of illness shape health-seeking behavior. For many residents, illness is not merely a physical phenomenon but also a spiritual crisis that necessitates intervention from traditional healers. This cultural lens reinforces reliance on non-biomedical approaches and is compounded by communal decision-making processes (Owolabi et al., 2020; Adebayo et al., 2021). The study confirms that economic factors are a significant driver in the decision-making process. The affordability and ready availability of herbal remedies serve as a pragmatic alternative to modern healthcare services, which are often viewed as expensive and inaccessible for the rural population (Umeh, 2021). Economic constraints thus act as a reinforcing mechanism for the continued use of traditional medicine. The reliance on traditional practices, while culturally resonant, carries inherent risks. Delays in seeking modern medical care lead to late diagnoses, which can exacerbate health problems and compromise treatment outcomes. Although some residents report positive results with traditional methods, the lack of systematic quality control poses a substantial risk to public health (Adebayo & Ogunlesi, 2021). Lack of synergy between traditional and modern healthcare systems calls for an integrated approach that acknowledges the value of cultural practices while ensuring patient safety. The findings underscore the need for policy interventions that promote collaboration between traditional

Binuyo B. A., Adeyeye E. B., Adesanya O. H., David M. K. & Tobechukwu J. - The Influence of Cultural Beliefs... healers and biomedical practitioners, as well as community education initiatives that bridge knowledge gaps and challenge existing prejudices. Addressing the health-seeking behavior in Iju-Ota requires a holistic approach that integrates cultural sensitivity with economic and healthcare reforms. By embracing a dual strategy that respects tradition while advancing modern medical practice, it is possible to enhance health outcomes and foster a more inclusive healthcare system.

RECOMMENDATIONS

These should be considered as recommendations based on this research study:

Developing of structured training programs for traditional healers to help them recognize critical symptoms and understand when to refer patients to modern healthcare facilities. Formal certification can also improve the credibility of traditional practices within the broader health system (Nwozichi et al., 2018).

Establishing a formal referral system that bridges traditional and modern healthcare. Such networks would enable a seamless transition for patients between different levels of care, ensuring timely diagnosis and treatment while respecting cultural practices.

Formulating policies that recognize and integrate traditional healing practices within the modern healthcare framework. Regulatory bodies should develop standards for the production and sale of herbal remedies to ensure their safety and efficacy (Adebayo et al., 2021).

Creating community-based health programs that actively involve both traditional healers and modern healthcare practitioners. These programs can serve as platforms for sharing best practices and building mutual trust, thereby improving community health outcomes.

Organizing regular educational workshops and seminars that focus on the benefits and limitations of both traditional and modern healthcare practices. These workshops should be designed to empower community members with balanced, evidence-based information, encouraging informed decision-making.

Launching initiatives aimed at addressing gender inequalities in healthcare decision-making. Programs designed to empower women through education and community engagement can help shift entrenched patriarchal norms and promote more equitable health practices (Nwozichi et al., 2018).

Investing in the development and subsidization of modern healthcare facilities in rural areas can improve infrastructure and reduce the cost burden of healthcare, making these services more accessible and attractive to the local population.

Implementing measures to ensure that modern healthcare services are culturally sensitive and responsive to community needs. This might include training for healthcare providers on cultural competence, which can help reduce the existing distrust between patients and modern medical practitioners.

LIMITATIONS OF THE STUDY

The study relied heavily on qualitative data from in-depth interviews and secondary sources. Although this provided rich narrative data, the limited sample size and potential biases inherent in qualitative research may affect the generalizability of the findings. The research focused exclusively on Iju-Ota, a community with unique cultural and socio-economic characteristics. Consequently, the findings may not be directly applicable to other regions with different cultural dynamics or healthcare infrastructures. Despite efforts to triangulate data through thematic coding, the interpretation of qualitative data is inherently subjective. The possibility of researcher bias cannot be entirely ruled out, and alternative interpretations of the data may exist. The study concentrated on cultural, economic, and socio-demographic factors, leaving out other potential influences such as political contexts or environmental factors. Future research should aim at incorporating these additional variables to provide a more comprehensive analysis.

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