

Development and Validation of the Folk Healing Perception Scale (FHPS): Assessing the Reliability and Validity of a Novel Measurement Instrument

Karl Ial A. Flandez*, Sophia Mae T. Imbayarte, Hannah Grace L. Canoy, Mary Katrina G. Lapinid,
Ma. Kristelle Anne L. Pacheco, Jester Anthony S. Pamplina, Emma Lissa B. Ramirez,
Marian Madelyn M. Collera, John Louie O. Quinte

College of Nursing and Allied Health Sciences, Western Leyte College, Ormoc City, Leyte, Philippines

*Corresponding Author Email: karlflandez1014@gmail.com

Date received: July 12, 2025

Date revised: September 2, 2025

Date accepted: September 16, 2025

Originality: 92%

Grammarly Score: 99%

Similarity: 8%

Recommended citation:

Flandez, K. I., Imbayarte, S. M., Canoy, H. G., Lapinid, M. K., Pacheco, M. K. A., Pamplina, J. A., Ramirez, E. L., Collera, M. M., & Quinte, J. L. (2025). Development and validation of the folk healing perception scale (FHPS): Assessing the reliability and validity of a novel measurement instrument. *Journal of Interdisciplinary Perspectives*, 3(10), 366-371. <https://doi.org/10.69569/jip.2025.569>

Abstract. The increasing need for a standardized tool to assess perception of folk healing presents a gap in culturally appropriate health research, especially in Filipino communities where traditional healing practices remain widely used. This study aimed to develop and validate the Folk Healing Perception Scale (FHPS), a researcher-made questionnaire designed to measure beliefs, attitudes, and perceptions of folk healing. A quantitative psychometric design was utilized. The scale was constructed through a literature review and consisted of 11 items rated on a 4-point Likert scale (Strongly Agree to Disagree Strongly). It was administered to 500 purposely selected respondents aged 40 and above from Barangay Linao, Ormoc City, Leyte, Philippines, who had direct knowledge or experience of folk healing. The reliability of the scale was assessed using Cronbach's alpha, yielding a value of 0.82 with a 95% confidence interval of 0.79 to 0.85, indicating high internal consistency. Item-rest correlation values ranged from 0.32 to 0.58, showing that all items contributed positively to the overall scale. No item, if removed, significantly affected the scale's reliability. The findings show that the FHPS is a reliable and valid instrument for assessing folk healing perceptions and may be helpful in future research, community health assessments, and culturally responsive healthcare planning. Highlighting the implications of these findings, the development of FHPS contributes to the theoretical understanding of health belief systems rooted in culture, while also providing practitioners and policymakers with a concrete, validated tool to integrate traditional health perspectives into contemporary healthcare models. This supports the advancement of culturally sensitive practices in both academic research and applied public health settings.

Keywords: Cultural beliefs; Folk healing; Instrument validation; Psychometric; Reliability testing

1.0 Introduction

Folk healing continues to be a significant component of healthcare in various cultural communities across the globe, particularly in developing countries such as the Philippines (Cerio, 2020; Rondilla *et al.*, 2021; Rosales & Gepty, 2022; Varela, 2023; Velez, 2021). Despite the growing modernization of medical practices, many individuals still rely on traditional healers or "albularyos," "hilots," and faith healers for treatment and relief of various ailments. These practices are deeply embedded in cultural beliefs and are often passed down through

generations. However, while folk healing remains culturally relevant and widely practiced, there is a noticeable need for standardized tools to measure contemporary perceptions of these practices.

The need to understand community beliefs and acceptance of folk healing is essential, especially in the context of integrating culturally sensitive approaches into public health planning (Jaradeleza *et al.*, 2025; De Guzman, 2022). Research suggests that culturally embedded health practices can influence health-seeking behavior, treatment compliance, and patient outcomes (Bibon, 2021; Abano, 2019). Still, the academic and public health sectors lack sufficient empirical data to support policy recommendations or culturally responsive interventions related to folk healing. Although numerous qualitative studies have examined indigenous healing systems and their significance in local healthcare, only a limited number have sought to develop and validate a psychometric tool to quantitatively measure perceptions of these practices (Arevalo *et al.*, 2022).

More recent studies also highlight the importance of standardized instruments in assessing health-related perceptions to enhance data-driven health initiatives (Kim *et al.*, 2016). In particular, validated tools are critical in bridging the gap between traditional practices and modern healthcare systems, helping professionals understand the values and beliefs that shape patients' health decisions. While some measurement tools have been created in related fields, they frequently fall short in terms of specificity, cultural relevance, or psychometric robustness needed to effectively guide research and practice (Arevalo *et al.*, 2022). This highlights the need for a more targeted, empirically validated instrument to explore the perception of folk healing within the Philippine context and similar cultural environments.

This study addresses this gap by developing and validating the Folk Healing Perception Scale (FHPS)—a researcher-made, 11-item questionnaire constructed to measure beliefs, attitudes, and perceptions of folk healing. The scale is designed using a 4-point Likert response format and was administered to a purposefully selected individual with direct experience or knowledge of folk healing. The validation process focused on ensuring the instrument's reliability and construct validity using an appropriate statistical method.

The purpose of this study is to produce a culturally relevant, reliable, and valid measurement tool that can be used by researchers, healthcare professionals, and policymakers. Thus, this study aimed to address the following research questions: (1) Is the FHPS a reliable tool for assessing folk healing perceptions? (2) Do the items show acceptable construct validity? (3) Can the FHPS be utilized as a standardized tool for culturally responsive public health planning and future research? By doing so, the findings are expected to contribute significantly to culturally sensitive health profiling, public health planning, and future research focused on the intersection of traditional beliefs and modern healthcare.

2.0 Methodology

2.1 Research Design

This study employed a quantitative psychometric research design to develop and validate the Folk Healing Perception Scale (FHPS). This design is well-suited for studies that seek to establish the reliability and validity of a measurement instrument using statistical analyses (Kim *et al.*, 2016). It allowed the researcher to examine the internal consistency and construct validity of the scale based on the responses of the target population. This approach was selected to ensure that the scale accurately measured beliefs, attitudes, and perceptions toward folk healing. By utilizing item analysis and reliability testing, this design provided objective evidence on the performance of each item in the scale and the instrument as a whole. The focus was on generating empirical data that supports the FHPS as a valid and reliable tool for use in future health-related and cultural studies.

2.2 Respondents and Sampling Technique

The respondents of the study were 500 individuals aged 40 years old and above from Barangay Linao, Ormoc City, Leyte, Philippines, who possessed direct knowledge or experience with folk healing, such as “albularyos,” “hilots,” or faith healers (Villanueva, 2021). This age group was selected to include individuals with more established cultural perspectives and direct exposure to traditional healing practices, which are typically transmitted across generations (Obligar *et al.*, 2024). The study employed purposive sampling, a non-probability sampling method commonly used in scale development and validation studies, to deliberately select respondents who could provide relevant insights into the constructs being measured. Inclusion criteria required respondents to be residents of the area for at least five years and to have either utilized or observed folk healing

practices within their household or community. All respondents were informed of the study’s purpose and participated voluntarily with written consent.

2.3 Research Instrument

The main research instrument used in this study was the Folk Healing Perception Scale (FHPS), a researcher-made questionnaire specifically developed to measure the beliefs, attitudes, and perceptions of individuals toward folk healing practices. The initial pool of items was informed by previous studies, including Abano (2019) on cultural beliefs in disease causation and De La Cruz (2023) on folk healing practices. The scale consisted of 11 items rated on a 4-point Likert scale: Strongly Agree (4), Agree (3), Disagree (2), and Strongly Disagree (1). This scale format was selected for its simplicity and ease of interpretation, especially in older adult respondents.

2.4 Data Gathering Procedure

The researchers sought approval from the barangay officials of Linao, Ormoc City, to facilitate smooth coordination and conduct of the study. Following ethical clearance, the researchers employed a face-to-face, house-to-house approach to administer the instrument. Each respondent was first oriented regarding the study’s objectives, and informed consent was obtained prior to questionnaire distribution. To ensure reliability and adherence to ethical guidelines, the administration of the FHPS was standardized. Each respondent received the questionnaire and responded independently; however, researchers were available to assist in clarifying item meanings for older respondents. Data collection was conducted over three weeks. Completed questionnaires were gathered immediately, checked for completeness, and stored securely for encoding and analysis.

2.5 Data Analysis Procedure

All collected data were analyzed using a quantitative statistical technique appropriate for scale validation. To assess the internal consistency reliability of the Folk Healing Perception Scale (FHPS), Cronbach’s alpha was computed. A threshold of ≥ 0.80 was used to determine acceptable reliability. Furthermore, item-rest correlation was performed to examine the contribution of each item to the overall scale reliability; items with values ≥ 0.30 were retained as they stand with the acceptable threshold. These analyses provided evidence of the scale’s psychometric soundness and supported its application in similar future studies. All data were handled confidentially and used solely for academic purposes.

2.6 Ethical Considerations

The study adhered to the ethical principles of autonomy, beneficence, and confidentiality. All respondents were given a clear explanation of the study’s purpose, procedures, and voluntary nature. Written informed consent was obtained prior to participation, and only individuals who agreed were included. Respondents were assured of the confidentiality and anonymity of their responses. No personally identifiable information was collected. The data were exclusively for academic purposes and stored in a secure file to prevent unauthorized access. Participation posed no foreseeable risk, and respondents were free to withdraw at any time without consequences. The researcher upheld the standards of research ethics throughout the study to ensure the protection and dignity of the respondents.

3.0 Results and Discussion

3.1 Internal Consistency of the Folk Healing Perception Scale (FHPS)

Cronbach’s alpha was used to evaluate the internal consistency of the Folk Healing Perception Scale (FHPS), a statistical method widely used in psychometric analysis to determine the reliability of a scale. Table 1 shows that the overall Cronbach’s alpha of the 11-item FHPS was 0.82, with a 95% confidence interval ranging from 0.79 to 0.85, indicating high internal reliability.

Table 1. Cronbach’s Alpha Reliability Test			
Scale	Cronbach’s Alpha	SE	95% CI
FHPS	0.82	0.015	0.79-0.85

Note: FHPS = Folk Healing Perception Scale, SE = Standard Error, 95% CI = 95% Confidence Interval

This result signifies that the items in the scale consistently measure the same underlying construct—perception of folk healing. A Cronbach’s alpha value above 0.80 reflects good reliability, supporting the conclusion that the FHPS is suitable for use in research and community assessments. Furthermore, the internal consistency score of

the FHPS is comparable to other validated cultural perception instruments such as the Indigenous Health Belief Scale, which yielded a reliability coefficient of 0.82.

The results suggest that the scale items are homogeneous yet not redundant, a key indicator of effective instrument construction. High reliability indicates that the scale items are well-aligned with the intended construct and are interpreted consistently by respondents, which is essential for drawing a valid conclusion from the data. The high internal consistency observed in this study reinforces the scale's potential for use in larger population studies, particularly in culturally diverse communities where traditional healing practices continue to influence health beliefs and decisions. The reliability coefficient also demonstrates that the FHPS can be a valuable tool in public health research aimed at integrating indigenous health practices into culturally sensitive healthcare delivery.

3.2 Item-Rest Correlation and Construct Validity of the Folk Healing Perception Scale (FHPS)

Table 2. Item-Rest Correlation Reliability Test

Item	Item Description	Item-Rest Correlation	Interpretation
1	I am familiar with traditional healing methods practiced in my community.	0.35	Acceptable
2	I believe that folk beliefs and traditional healing methods have been passed down through generations.	0.46	Good
3	I believe that certain illnesses are caused by supernatural forces (e.g., "gaba," "sumpa," or "luop").	0.56	Strong
4	I believe that folk healers (e.g., "albularyo," "hilot," or "magtatawas") play an important role in our healthcare system.	0.58	Strong
5	I believe that traditional healing is still effective in treating illnesses today.	0.51	Strong
6	I or someone in my family has consulted a folk healer for an illness.	0.55	Strong
7	I think using medical plants and herbs is an effective treatment for illnesses.	0.33	Acceptable
8	I believe that folk healing is more accessible than hospitals or health centers.	0.49	Good
9	I trust traditional healers as much as I trust medical doctors.	0.47	Good
10	I believe that religious and spiritual rituals can help cure certain illnesses	0.53	Strong
11	I believe in the effectiveness of practices such as "hilot," "luop," or "tawas."	0.46	Good

Interpretation: 0.50-above = strong correlation; 0.49-0.49 = good correlation; 0.30-0.39 = acceptable correlation; below 0.30 = weak correlation

To assess the construct validity of the Folk Healing Perception Scale (FHPS), an item-rest correlation analysis was conducted. This method examines the degree to which each item correlates with the total score of the scale, providing evidence of how well each item contributes to the measurement of the intended construct. Table 2 shows the item-rest correlation values, which ranged from 0.32 to 0.58. All items exceeded the commonly accepted threshold of 0.30 (Kim *et al.*, 2016), indicating that each item is statistically relevant and contributes positively to the internal structure of the scale.

These findings affirm that the FHPS items consistently reflect the underlying perception of folk healing and are not measuring unrelated or divergent concepts. The strongest correlations were observed in Items 3 and 4, with values of 0.56 and 0.58, respectively, suggesting that these items are particularly effective in capturing the central theme of the scale. In contrast, Items 1 and 7, with correlations of 0.35 and 0.32, while still acceptable, may be slightly less impactful but remain valid and supportive of the overall construct.

The results support the claim that the FHPS has construct validity, as the items collectively measure a unified underlying construct. This is consistent with psychometric principles, which emphasize that items with acceptable to high item-rest correlations indicate a cohesive and valid construct. The high internal consistency of

the FHPS aligns with findings from similar psychometric validation studies conducted in the context of traditional and cultural health beliefs. For instance, Kim *et al.* (2016) reported comparable reliability scores in the validation of the Phlegm Pattern Questionnaire, emphasizing that an alpha value above 0.80 reflects good internal consistency for culturally specific instruments. Moreover, the item-rest correlation values are consistent with those found in the Traditional Medicine Belief Scale developed in a similar Asian cultural setting, where correlation values above 0.30 were deemed acceptable for construct validity (Arevalo *et al.*, 2022). These parallels affirm the psychometric soundness of the FHPS and further support its application in assessing health-related cultural perceptions in diverse populations.

Overall, the item-rest correlation analysis confirms that the FHPS possesses internal coherence and can be used with confidence in future research or public health applications involving cultural health perceptions.

4.0 Conclusion

The development and validation of the Folk Healing Perception Scale (FHPS) provide a significant contribution to culturally responsive health research. By establishing the reliability and construct validity of the scale, this study offers a scientifically sound instrument for assessing public perceptions of folk healing. This domain has long lacked standardized instruments. The FHPS enables researchers, public health practitioners, and policymakers to gain a deeper understanding of how traditional healing is perceived in culturally embedded communities, particularly within the Philippine context.

The instrument has practical implications in community health profiling, as it can support the integration of culturally rooted beliefs into holistic care models. In health education, the FHPS can serve as a tool to initiate culturally sensitive discussions on traditional medicine and its coexistence with biomedical approaches. Its use can also guide policy development by providing empirical data that highlight the relevance of folk healing, especially in underserved or rural populations where such practices remain prevalent. However, the study is limited by the use of purposive sampling in a single community, which may affect generalization.

For researchers, the FHPS fills a critical gap in the literature by offering a validated tool that can be used in future quantitative studies exploring the intersection of culture, health belief systems, and health-seeking behavior. It may also be adapted or extended in future work to assess perceptions in other cultural or indigenous contexts across Southeast Asia and beyond. Future research may expand this work by conducting exploratory or confirmatory factor analysis to examine the scale's dimensionality, or by validating the tool in other ethnolinguistic groups to assess its cross-cultural applicability. Longitudinal studies may also investigate how perceptions of folk healing evolve across generations or in response to healthcare modernization.

Overall, this study promotes the recognition of cultural diversity in health, reinforcing the value of traditional knowledge systems in shaping inclusive, patient-centered care.

5.0 Contributions of Authors

All authors contributed to the study's conceptualization, data gathering, analysis, review, and writing, ensuring the research's accuracy and integrity.

6.0 Funding

This study is funded and supported by Western Leyte College – College of Nursing and Allied Health Sciences.

7.0 Conflict of Interests

The authors confirm that there are no conflicts of interest regarding the publication of this paper.

8.0 Acknowledgment

The researchers extend their utmost gratitude and praise to the Lord, Almighty God, whose abundant blessings, wisdom, and guidance made this study possible. His divine providence has been a constant source of strength throughout the conduct of this research. Heartfelt gratitude to Western Leyte College – College of Nursing and Allied Health Sciences for their invaluable guidance, thoughtful insights, and unwavering support throughout the entire duration of this study. The researchers also express their heartfelt thanks to Mr. Benny Bartolini, the study's statistician, for his expertise in data analysis and for providing essential support in the interpretation of the results. Gratitude is also extended to the panel members for their constructive feedback, professional guidance, and recommendations that significantly enhanced the quality of this research. The researchers further express their appreciation to the officials of Barangay Linao, Ormoc City, for their warm reception and generous permission to conduct the study within their community. Lastly, the researchers convey their profound appreciation to their families and friends, whose unwavering encouragement, patience, and moral support sustained them through the challenges of this academic pursuit. Their beliefs in the researchers' capabilities played an essential role in the completion of this endeavor.

9.0 References

Abano, G. (2019). Residents' knowledge, attitudes, and patterns of use towards complementary and alternative medicine (CAM). *International Journal of Advanced Research*, 7(5), 523-532. <https://doi.org/10.21474/ijar01/9068>

- Arevalo, Ma. V. P. N., Robredo, J. P. G., Valenzuela, S., Ho, F. D. V., Alberto, N. R. I., Alberto, I. R. I., Bernardo, M. N. G., Manlongat, K. D., Garcia, A. M. U., Tan, J. Z. G., Dee, E. C., & Eala, M. A. B. (2022). The role of traditional, complementary, and alternative medicine in cancer care in the Philippines. *Chinese Clinical Oncology*, 11(6), 49–49. <https://doi.org/10.21037/cco-22-91>
- Bibon, M. B. (2021). Acquisition of folk healing practices: A phenomenological study grounding the experiences of Parasantigwar in Cagraray Island, Philippines. *Cognizance Journal of Multidisciplinary Studies*, 1(8), 17–33. <https://doi.org/10.47760/cognizance.2021.v01i08.002>
- Cerio, C. (2020). Albularyo folk healing: Cultural beliefs on healthcare management in Partido District, Camarines Sur, Philippines. *Journal of Southeast Asian Studies*, 25(1), 210–236. <https://doi.org/10.22452/jati.vol25no1.11>
- De La Cruz, P. A., Santos, M. L., & Villareal, R. T. (2023). Folk healing practices and folkloric modalities of traditional healers in Northwestern Cagayan. *Philippine Folk Medicine Review, International Network for Natural Sciences | INNSpub*. <https://doi.org/10.5281/ZENODO.10677033>
- De Guzman, Ma. T. G. (2022). Health and well-being practices among the indigenous groups in the Philippines: An ethnographic review. *Anthropology and Ethnology Open Access Journal*, 5(1). <https://doi.org/10.23880/aeoaj-16000164>
- Kim, H., Ku, B., Kim, J. Y., Park, Y.-J., & Park, Y.-B. (2016). Confirmatory and exploratory factor analysis for validating the phlegm pattern questionnaire for healthy subjects. *Evidence-Based Complementary and Alternative Medicine*, 2016(1). <https://doi.org/10.1155/2016/2696019>
- Nunnally, J. C., & Bernstein, I. H. (1994). *Psychometric theory* (3rd ed.). McGraw-Hill.
- Obligar, P. I., Dayal, E., & Contretas, E. E. (2024). Indigenous healing practices among mothers in the rural areas of Pilar: An alternative health care during COVID-19. *International Journal of Applied Research and Sustainable Sciences*, 2(3), 163–172. <https://tinyurl.com/yk7mrkhp>
- Rondilla, N. A., Rocha, I. C. N., Roque, S. J., Lu, R. M., Apolinar, N. L. B., Solaiman-Balt, A. A., Abion, T. J., Banatin, P. B., & Javier, C. V. (2021). Folk medicine in the Philippines: A phenomenological study of health-seeking individuals. *International Journal of Medical Students*, 9(1), 25–32. <https://doi.org/10.5195/ijms.2021.849>
- Rosales, L., & Gepty, V. (2022). Cultural healing rituals and practices used by Ati traditional healers. *Journal of Humanities and Social Sciences Studies*, 4(4), 209–213. <https://doi.org/10.32996/jhss.2022.4.4.26>
- Tavakol, M., & Dennick, R. (2011). Making sense of Cronbach's alpha. *International Journal of Medical Education*, 2, 53–55. <https://doi.org/10.5116/ijme.4dfb.8dfd>
- Varela, R. P. (2023). Faith healing based on narratives of healing experiences: A psycho-spiritual interpretation. *EXPLORE*, 19(6), 792–796. <https://doi.org/10.1016/j.explore.2023.03.011>
- Velez, M. C. (2021). Folk healing narratives: A grounded theory. *Journal of English Education and Linguistics*, 2(1), 93–110. <https://doi.org/10.56874/jeel.v2i1.407>
- Villanueva, J. M. (2021). Indigenous healing practices, policies, and perceptions of young and elderly Ga'dang people in Nueva Vizcaya, Philippines. *Journal of Natural Remedies*, 21(2), 149. <https://doi.org/10.18311/jnr/2021/25167>