

Traditional Medicine Through Words and Vegetations for Indigenous People

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Abstract: This research was conducted in Kajang district Bulukumba regency called indigenous people of *Ammatoa*. The objective of this research includes: 1). To disclose the natures of words as a traditional medicine are usually consumed to medicate the patients of indigenous people of *Ammatoa*. 2). To express the characteristics of traditional medicines vegetations/ forests' plants as a traditional medicines are usually expressed to medicate the patients for indigenous people of *Ammatoa*. 3). To reveal two forceful ways (words and vegetation) to medicate the patients of indigenous people (Akib. Y, 2008). Qualitative method was used to obtain the data of traditional medicine, which was informed by the head of customary and customary apparatus. In addition, the researcher herself had a role as a key instrument who had to master the field being researched, and all things must be prepared before coming to the object of the research. The data of indigenous people of *Ammatoa* were collected by using techniques of observation, recording, interview, and notetaking. Meanwhile, the result of the research indicates that the use of traditional medicine through words and vegetation or forest plants is strongly used by this indigenous people. In conclusion, the strength of using and belief of traditional medicine for indigenous people of *Ammatoa* is resulted from the strength of messages called *Pasang ri Kajang* as its philosophy of life.

Keywords: Traditional Medicine, Words, Vegetation, Indigenous, People.

I. INTRODUCTION

Healthy living is a universal desire. When people are ill, they cannot carry out daily activities, so they rely on medicines prepared by pharmacologists and prescribed by doctors. This reflects their wish to live longer and avoid serious health problems. People, therefore, try to find medicines and treatment methods that are most effective (Dalyan et al., 2025; Akhmar et al., 2022; Pratiwi et al., 2026). At the same time, many feel reluctant or lack confidence to take medicines without a doctor's prescription, a habit seen not only in Indonesia but around the world. In this view, doctors are often regarded as the only solution to illness (Paiting et al., 2025; Rahman et al., 2022; Akhmar et al., 2023).

However, modern medicine is not the only way to treat patients. An alternative, *ile kampong* (traditional medicine), can be almost as effective as modern medicine. In Kajang District, eastern Bulukumba Regency, according to Usop (1978), the indigenous *Ammatoa* community practices this local medicine. Its strength is rooted in indigenous beliefs based on *Pasang ri Kajang* (traditional messages), which contain four pillars of life: *lambusu'* (honesty), *gattang* (assertiveness), *sa'bara'* (patience), and *appisona* (contemplation). Each pillar is associated with a particular social role. Honesty guides the government, which must govern responsibly, as expressed in the saying *punna' danggammi tau mappamarentata, panra'mintu lamullamunga* ("when the government has acted, the plants or vegetation will then be extinct"). *Gattang* (assertiveness) refers mainly to *Ammatoa*, the customary leader, who must uphold custom, as in *bola-bola palettekang, baju-baju pasampeang pettai kalennu kamaseang kulantu'nu* ("a house can be moved, a dress can also be removed, but love,

patience, and your knees [family] must be preserved”). Sa’bara’ (patience) is associated with patuntung, the teacher of the local belief (searching for God), as in sa’baraki naki sanging angu’rangi mange ri Tu Rie’ A’ra’na (“be patient and always follow His commands”). Finally, appisona (contemplation) is linked to the shaman (sanro Kajang), who treats illnesses and protects the community from drought and disaster, for example when rie’ bambang lantama’, bala la tattappa angngera mi sanroa bara’ gassingngase’jaki. In such times, Ammatoa must pray to avert calamity. These four pillars must be practiced chiefly by the government, the teachers of local belief, and the shaman, and Ammatoa must understand and model them for the community.

Among the four pillars, appisona (contemplation) is the main focus of this research, because it is closely related to ile kampong (traditional medicine) and to the spoken formulas used by the shaman to prevent diseases and disasters affecting the Ammatoa community.

II. LITERATURE REVIEW

A. The Natures of Words as Traditional Medicines Used by Indigenous People

Sanro Kajang (Shaman from Kajang) mentioned by Katu & Alim (2005), usually express specific words or invocation to medicate the patients or sick person. Some speech can be seen as follows: *Papparamma’ nako buttayya*, “you the tranquilizer for the land”, *pappalumu’na batarayya*, “the flatter of God”, *bajikkanangku*, “ my wise words”, *bajikkanangku, torakkanangku*, “ my true words”, *sumpallang sukkurukku* “closing with giving thanks in God”, Lailaha’ “I witness”, *kualle* “ I believe/ or become” *kupassongka balang* “I make it as catastrophe or disaster preventive.

B. The Characteristics of (Vegetation/ Forest’s plants) Used by Indigenous People

Regarding some of Sanro Kajang (Shamans from Kajang) as Katu & Alim (2005) described, a great deal of traditional medicines (vegetation/ forest plants) is usually used to medicate indigenous people Ammatoa’s diseases. Those kinds of plants grow around the forest and uses by people who live around the area of Ammatowa and his community resides. Those vegetations are as follows:

Table 1. List of forest plants

No.	Traditional name	Scientific name
1	<i>Anggoro</i>	<i>Ingguruta angustifolia</i>
2	<i>Balle</i>	<i>Landep barleria prinonitis</i>
3	<i>Bainang sulapa’</i>	<i>Averroa carambolla</i>
4	<i>Biccoro</i>	<i>Pluchea India</i>
5	<i>Bila-Bila</i>	<i>Murraya paniculata</i>
6	<i>Binungang</i>	<i>Tembelekaand lantana</i>
7	<i>Bote’-bote’</i>	<i>Pulai alstonia scholaris</i>
8	<i>Burangga</i>	<i>Aglaia odorota</i>
9	<i>Buno Bampo</i>	<i>Barleria cristata</i>
10	<i>Bunga eja</i>	<i>Morus Alba</i>
11	<i>Didi bulang</i>	<i>Kompri symphytum officanalea</i>
12	<i>Jammu borong</i>	<i>Psidium guajava</i>
13	<i>Lahira</i>	<i>Gynura segetum</i>
14	<i>Lahunga</i>	<i>Graptophyllum pictum</i>
15	<i>Linrapa’</i>	<i>Desmodium triquentrum</i>

16	<i>Lasuna pute</i>	<i>Allium sativum</i>
17	<i>Limpujang</i>	<i>Landik barleria lupulina</i>
18	<i>Manya-Manya</i>	<i>Sauropus androgynus</i>
19	<i>Mangko'-Mangko'</i>	<i>Nothopanax scutellarium</i>
20	<i>Munyi'-Munyi'</i>	<i>Talinum paniculatum</i>
21	<i>Kayu rampe</i>	<i>Senggani malastoma candium</i>
22	<i>Palihasa</i>	<i>Ficus benyamina</i>
23	<i>Passassalahu</i>	<i>Selaginella doederleinil</i>
24	<i>Paria</i>	<i>Momordika charantia</i>
25	<i>Sinrolo</i>	<i>Gude gajanu cajan</i>
26	<i>Siri pute</i>	<i>Prasman Eupatorium Triplinerve</i>
27	<i>Soong-Soong</i>	<i>Catharina roseus</i>
28	<i>Sumi' karaeng</i>	<i>Piper retrofractum</i>
29	<i>Rampu-Rampu</i>	<i>Plantago mayor</i>
30	<i>Tambara</i>	<i>Amaranthus spinosus</i>
31	<i>Sombere</i>	<i>Raufoivia serpentina</i>

C. Two Forceful Ways (words and vegetations) to Medicate Indigenous People

1. Words

Before disclosing the words or invocation below the shaman asked the family of the sick person to take a glass of water. After the glass of water is ready in front of the shaman, he then uttered the specific words or invocation, while blowing to the body of the sick person (Harlinah, 2017). Here is the words are usually expressed by the shaman from Kajang:

Pappamma' nako buttayya, “you the tranquilizer for the land”, *pappalumu'na batarayya*, “the flatter of God”, *bajikkanangku*, “ my wise words”, *bajikkanangku, torakkanangku*, “ my true words”, *sumpallang sukkurukku* “closing with giving thanks in God”, *Lailaha'* “I witness”, *kualle* “ I believe/ or become” *kupassongka balang* “I make it as catastrophe or disaster preventive.

2. Vegetations

As a structured and integrated system, traditional medicine demonstrates the integration of certain plant species with a variety of illnesses and physical complaints. The 31 species described in this article are not simply a botanical list, but rather a concrete representation of local knowledge that has been passed down through generations, linking certain plants to specific health problems and their processing techniques (Ashar, 2013). The selection of each plant is based not only on its therapeutic properties but also on the value of practical wisdom reflected in the use of parts such as leaves, fruits, and other organs, which are processed through simple methods such as boiling, pounding, or direct application to the affected body part. In a society where access to modern medical services is often limited or expensive, the existence of traditional medicinal plants plays a significant role in maintaining and supporting sustainable community health.

For instance, Anggoro (*inggu, Ruta angustifolia*) is used externally to treat skin irritation by smearing it directly on the affected area, while Balle (*landep, Barleria prionitis*) is boiled and drunk to relieve cough. *Bainang sulapa'* (*Averrhoa carambola*) is eaten fresh to support lung health, and *Biccoro* (*Pluchea indica*) is boiled so that its active ingredients can help treat internal complaints.

Bila-bila (*Murraya paniculata*) is pounded into a soft paste and applied to the knees to prevent stiffness. These five plants are only a small part of the 31 traditional medicines described, but together they represent the wider diversity of local remedies, routes of administration, and targeted illnesses that form the core of this article. These are other indications of traditional remedies.

1. *Binungang* (tembeleka and lantana) is used to medicate diabetes. This fruit is usually boiled and then filtered and drunk it.
2. *Bote'-bote'* (*Pulai alstonia scholaris*) is usually boiled, filtered, and then drunk it. It can also be used with gargling.
3. *Burangga* (*Aglaia odorata*, a medicine for wound by means of greased or it can also be attached around injured body.
4. *Buno Bampo* (*barleria cristata*) this kind of traditional medicine is usually boiled and drinking for a sick person who suffer from gastric.
5. *Bunga eja* (*morus Alba*). This medicine is usually used to medicate low body temperature. This medicine is usually boiled and then drunk.
6. *Didi bulang* (*Kompri symphytum officinale*) a fruit is usually used to medicate tubercloses (TBC). This fruit is usually grated until soft and then soiled to all body. This fruit is usually boiled and then we drink.
7. *Jammu borong* (*Psidium Guajava*) is usually consumed for people who suffer from diarrhea. Its fruit can be made as juices, and its leaf can be drunk.
8. *Lahira* (*Gynura Segetum*) this leaf is usually used to reduce fever. It can be boiled and drunk and it can also be smeared and soaked and then it is attached to in the part of sick body.
9. *Lahunga* (*Graptophyllum pictum*), a leaf used for wound body by pounding the leaf softly, and then greased it to wounded body.
10. *Linrapa'* (*Desmodium triquetrum*) to get a good result, this traditional medicine is usually boiled, and then drunk.
11. *Lasuna pute* (*Allium sativum*) is used to medicate blood pressure. This kind of spices is grated until soft and then consumed rowly.
12. *Limpujang* (*landik barleria lupulina*) is usually used to medicate influenza. This local medicine is usually boiled, and then drunk it.
13. *Manya-Manya* (*Sauropus Androgynus*), a leaf for increasing desire for food, is used by boiling it.
14. *Mangko'-Mangko'* (*Nothopanax scutellarium*). This traditional medicine is usually boiled and drinking while it is still warm.
15. *Munyi'-Munyi'* (*Talinum Paniculatum*) is used to medicate gastric and vomit followed with blood by boiling and drinking.
16. *Kayu rampe* (*Senggani Malastoma candium*) is usually used to medicate tyepest. It is usually squeezed and soiled to throughout the body.
17. *Palihasa* (*Ficus benyamina*) is used to medicate asthma. It is boiled and then drink while it is still warm.
18. *Passassalahu* (*Selaginella doederleinil*) its leaf is used to medicate dizzying. This kind of local medicine is usually boiled before drinking.
19. *Paria* (*Momordika charantia* is usually used to medicate itching. Its leaf and meat is boiled before drinking.
20. *Sinrolo* (*Gude Gajanu cajan*), a medicine used for someone who suffers from tyepest. This

medicine is usually boiled before drinking.

21. *Siri pute* (Prasman Eupatorium Triplinerve) a medicine for decreasing fever is boiled before drinking.
22. *Sombere* (*Raufolevia serpentina*) is used to reduce fever. It is usually boiled before consuming.
23. *Soong-Soong* (*Catharina roseus*) is used to medicate dengue fever and malaria. It is usually boiled before drinking.
24. *Sumi' karaeng* (*Piper retrofractum*). This leaf is to medicate a part of swollen body. It is usually dried and then boiled before drinking.
25. *Rampu-Rampu* (*Plantago Mayor*) is used to medicate typhoid by means of boiling it before drinking.
26. *Tambara* (*Amaranthus spinosus*) is usually used to medicate waist. This traditional medicine is usually boiled before drinking. Besides, it can also be dried and then grated until producing powder to smear on the waist.
27. *Sombere* (*andropholis paniculata*). This tree leaves is usually boiled and drunk. It is very effective to cure malaria.

III. METHODS

A. Types of Research

This research uses qualitative method which explores issues, understand answer the questions making meaning about the data. Data of traditional medicines include words or invocation, and names of vegetation (forest plants). They were taken from primary source data.

B. Techniques of data collection

1. Observation

Visiting *Ammatoa* (Puto Palasa) as the head of indigenous people and his apparatus are first activity to do when researches are going to do research about indigenous people of *Ammatoa*. Besides, the researches met the customary apparatus to ask about the data of traditional medicines.

2. Interview

This kind of technique of obtaining data is used by asking some questions to the head of indigenous people (*Ammatoa*), and his apparatus called *galla'*. The terms of *galla'* can also be called *kapala desa* "the head of subdistrict" who knows much information about traditional medicines for indigenous people.

3. Recording

In addition to observation, and interview, data collection were also done through hidden recording since using electric tools transparently inside the area of *Ammatoa* and his followers are very restricted.

4. Note Taking

It is a usual thing that all data given by the informant can be well understood therefore, note taking technique is also used to get a good data.

C. Techniques of Data Analysis

The data of traditional medicine in the form of words and vegetations were obtained from *Ammatoa* and his apparatus based on traditional messages called *Pasang ri Kajang*. The data through words (invocation) are analyzed in literal meaning (denotational meaning), and free translation in conotational meaning. Those words or invocations can be seen as follows:

Corpus: *Papparamma' nako buttayya*, "you the tranquilizer for the land"

MB : *Pak parammak na ko butta ya*

Free Translation: *ko* refers to personal pronoun "you" is something functions as a tool to tranquilizer for the land uttered by the shaman

Corpus: *pappalumu'na batarayya*, "the flatter of God"

MB : *pak pa lu muk na batara ya*

Free Translation: *na* refers to personal pronouns means he/she as the flatterer of God

Corpus: *bajikkanangku*, "my wise speech"

MB : *bajik kanang ku*

Free Translation: *ku* refers to personal pronoun I speak wisely

Corpus: *torakkanangku*, "my touching speech"

MB : *torak kanang ku*

Free Translation: touching words

Corpus: *sumpallang sukkuru'* "closing with giving thanks in God"

MB : *sumpallang sukkuruk*

Free Translation: Close with giving thanks in God

Corpus: *lailaha'* "I witness"

MB : *la ilaha*

Free Translation: I witness no other creature unless Allah

Corpus: *kualle* "I take"

MB : *ku alle*

Free Translation; I believe

Corpus: *kupassongka balang* "I take it to evade or avoid catastrophe or disaster"

MB : *ku pak songka balang*

Free Translation: I become or make it a tool to evade catastrophe or disaster

IV. RESULTS AND DISCUSSION

As seen in various indigenous traditions across various regions, healing practices often combine the power of ritual speech, spiritual authority, and herbal concoctions as a unified method for identifying, preventing, and treating health problems. This integrative pattern is also reflected in the practices of the Ammatoa Kajang community, where the oral element of mantras or invocations does not stand alone but rather works hand in hand with the use of specific forest plants as complementary therapeutic tools. Through the combination of the verbal dimension, rich in symbolic meaning, and the use of local flora believed to possess medicinal properties, this healing system forms a holistic healing framework. It is in this context that the study identified 31 traditional concoctions used by the Ammatoa Kajang community, all of which represent a synergy between oral prayer and the specific use of forest plants as two integrated modes of healing (Haque et al., 2018; Mwaka et al., 2023).

The central role in the overall healing mechanism rests with the shaman or spiritual authority, as is also found in various ethnomedicinal systems in a number of traditional communities. In the Ammatoa community, the Ammatoa themselves and their appointed shamans hold full responsibility for determining the types of plants to be used, establishing appropriate dosages, and selecting the most effective method of administration whether by boiling them for drinking, applying topically, pounding them, consuming them fresh, or through other relevant methods. Each of these therapeutic actions is not carried out separately from the spiritual dimension, but is always accompanied by the recitation of sacred words believed to have protective powers. Through the chanting of these prayers and mantras, divine protection is sought and disasters are attempted to be warded off, so that healing practices are understood not only as physical interventions but also as comprehensive spiritual endeavors (Adriana Gandasari et al., 2023; Mwaka et al., 2023).

In line with recent trends in ethnographic studies of traditional healing practices and the use of medicinal plants in Asia and Africa, this research places direct involvement and in-depth understanding of the social context as its methodological foundation, particularly to uncover knowledge that is often closed or limited in access. The approach used is qualitative with an emic orientation, realized through participant observation, in-depth interviews with Ammatoa and galla', covert audio recording, and detailed and systematic field notes. Through this combination of techniques also commonly applied in contemporary ethnographic research, relying on intensive involvement, semi-structured interviews, and thematic analysis, this research seeks to gain authentic understanding from the internal perspective of the community, so that the structure of meaning, healing practices, and local knowledge systems can be reconstructed comprehensively and contextually (Regina Lambin et al., 2018; Aziz et al., 2018).

The appropriateness of this method becomes even more apparent in community contexts where healers tend to be cautious, even selective, in disclosing the stages and procedures of their practices. Furthermore, healing practices are not solely embodied in visible actions but also encompass an invisible spiritual dimension imbued with symbolic meaning. In such situations—where knowledge systems are passed down orally through family lines or specific ritual pathways—an approach that emphasizes intimacy, trust, and the exploration of meaning from an internal perspective becomes highly relevant. Thus, the oral, closed, and tradition-based nature of knowledge transmission makes this method the most appropriate choice for exploring the entire structure of practices and the beliefs that surround them (Adriana Gandasari et al., 2023; Mwaka et al., 2023).

A clear distinction between plant species, intended use, and processing techniques is evident in the 31 identified herbal remedies. Anggoro (*Ruta angustifolia*) is used externally to treat skin irritation; Balle (*Barleria prionitis*) is boiled and the water drunk to treat coughs; Bainang sulapa'

(Averrhoa carambola) is consumed fresh to relieve lung disorders; Biccoro (*Pluchea indica*) is boiled for internal complaints; and Bila-bila (*Murraya paniculata*) is pounded and applied to the knees as a preventative measure for joint stiffness. The careful matching of plant species, parts used, preparation methods, and the types of ailments treated demonstrates a structured classification system. This pattern aligns with findings from various ethnobotanical surveys in Ethiopia, Pakistan, and Bangladesh, which show the predominance of leaves and herbs, with processing techniques such as decoction, paste, and direct consumption tailored specifically to specific disease categories (Aziz et al., 2018). Thus, the Kajang healing system can be understood as part of a broader configuration of systematic and well-structured traditional pharmacopoeias. Its existence does not simply represent a collection of locally based healing practices, but rather reflects a well-established body of knowledge that functions effectively as a primary healthcare service for rural communities. In this context, its role is significant because it provides access to treatment that relies on local resources while simultaneously supporting the health needs of communities often beyond the reach of modern medical facilities (Agize et al., 2022).

Documented oral expressions such as pappamma' nako buttayya ("you the tranquilizer for the land"), pappalumu'na batarayya ("the flatter of God"), bajikkanangku ("my wise speech"), and kupassongka balang ("I make it a tool to avoid disaster") show that healing practices are understood not merely as physical clinical actions, but also as cosmological work imbued with spiritual meaning. Through these verbal formulations, the therapeutic process is positioned in two domains simultaneously: the biomedical realm related to the body and the metaphysical realm related to the order of the cosmos and the relationship between humans and supernatural powers. This pattern aligns with various other traditions in which healing words, prayers, or mantras always accompany the use of herbal concoctions, so that medical action and spiritual practice are united in an inseparable ritual (Haque et al., 2018; Villanueva, 2021; Mwaka et al., 2023), through the linguistic construction used, these expressions attribute agency to plants as seen in the phrase "you the tranquilizer" as if the plants play an active role in the healing process. At the same time, the healer's position is emphasized as a wise and responsible speaker, as reflected in the expression "my wise speech," which signifies both their moral authority and ethical capacity for care.

Furthermore, these statements explicitly link healing and protection practices to divine will and expressions of gratitude, so that healing is understood as the result of a harmonious relationship between humans, nature, and transcendent powers. A lexical analysis of the denotative and connotative meanings of these expressions indicates that the concept of disease is not reduced to merely physical disturbances but also encompasses moral, ecological, and spiritual dimensions. This interpretation reflects a broader worldview, similar to research findings in the Bankariya, Dayak, and Korku communities, where disease is often interpreted as the result of spirit intervention, a curse, or a broken relationship between humans and the land and the divine entities that govern it (Moktan, 2023; Gandasari et al., 2023; Mwaka et al., 2023).

At the social level, these healing practices do not exist in isolation, but are integrated within a hierarchical structure that clearly divides roles. Ammatoa occupy the position of political leader and supreme spiritual figure, while shamans (sanro Kajang) function as ritual specialists and experts in herbal concoctions. Patuntung, on the other hand, serve as religious instructors, and galla' act as customary officials who wield normative authority within the community. This configuration of roles demonstrates the differentiation of organized ritual work, where responsibility for healing and maintaining social order is divided according to the capacity and legitimacy of each actor. This division of labor is comparable to other indigenous systems, which demonstrate the coexistence and collaboration of various types of healers such as herbalists, shamans, traditional midwives, and ritual practitioners in carrying out integrated health and spiritual functions (George et al., 2018; Angmo et al., 2022). In similar contexts, Kajang healers serve as the frontline providers of immediate, culturally trusted care within the local community. Their interventions are often the first step before patients

consider biomedical services, or even performed in conjunction with modern medicine. Thus, traditional healing practices are positioned not as entirely separate alternatives, but as a form of initial care that enjoys social legitimacy and strong collective trust within the community (Haque et al., 2018; Angmo et al., 2022; Fabrigas et al., 2018). The emphasis in various invocations on the values of honesty, assertiveness, patience, and reflection indicates that healing practices are understood not merely as therapeutic actions, but as manifestations of the four moral pillars of Pasang ri Kajang. Thus, health is placed within a broader framework, namely as the result of proper governance, ethical speech, and adherence to rituals passed down through generations. This relationship between the moral dimension and the physical condition emphasizes that individual well-being depends on collectively maintained social and spiritual order. This pattern has also been documented in various other studies, which show that indigenous medical knowledge is closely intertwined with relationships to the land, spiritual belief systems, and communal norms that govern communal life. (Redvers et al., 2020; Agize et al., 2022; Fabrigas et al., 2018; Corso et al., 2022)

Ultimately, the strong reliance on forest vegetation which is not only named but also classified and addressed through specific rituals, underscores both its pharmacological potential and its vulnerability as a knowledge system. The practice of naming, categorizing, and symbolic recognition of these plants demonstrates a structured epistemic construction, yet is simultaneously vulnerable to external change. Several ethnobotanical studies in various regions indicate that urbanization, deforestation, and intergenerational shifts have contributed to the decline of medicinal plant resources, while weakening the oral tradition that has long been the primary medium for transmitting this knowledge (Lambin et al., 2018; Agize et al., 2022; Pereira et al., 2020; Aziz et al., 2018). Thus, the corpus of the Kajang herbal remedies not only operates as a living and continuously practiced medicinal system, but also represents an urgent documentation of a highly valued biocultural heritage. Its existence reflects the accumulation of ecological and medical knowledge integrated into the social and spiritual fabric of the community. The qualitative documentation of invocations, plant uses, and healing authority, as conducted in this study, aligns with contemporary calls for the preservation of indigenous pharmacopoeias. Furthermore, this approach supports the idea of careful, community-led integration into the broader health system, while maintaining the local principles that underpin it. (Redvers et al., 2020; Pereira et al., 2020; Angmo et al., 2022; Corso et al., 2022).

V. CONCLUSION

It is aware that the presence of traditional medicines are less attended compared to modern medicines. Yet, this belief is different from people who live in the area where Ammatoa and his people reside; this kind of medicine is strongly maintained by indigenous people in Kajang district. The strength of using and belief in traditional medicine results from the strength of messages called Pasang ri Kajang as their philosophy of life. This kind of medicine is prohibited to be cut since it is a primary healing source besides words.

For the Ammatoa community, traditional medicine is not merely a method of treatment but also a sacred cultural heritage that reflects harmony between humans and nature. Therefore, preserving medicinal plants and maintaining the teachings of Pasang ri Kajang become essential practices in sustaining both physical health and cultural identity.

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Conflict of Interest

The authors declare that there is no conflict of interest.

REFERENCES

1. Agize, M., Asfaw, Z., Nemomissa, S., & Gebre, T. (2022). Ethnobotany of traditional

- medicinal plants and associated indigenous knowledge in Dawuro Zone of Southwestern Ethiopia. *Journal of Ethnobiology and Ethnomedicine*, 18. <https://doi.org/10.1186/s13002-022-00546-4>
2. Ahimsa, H. (2007). *Prologue dalam masalah kesehatan dalam kajian ilmu sosial budaya* (pp. 13–37). KEPEL Press.
 3. Akhmar, A. M., Rahman, F., Supratman, S., Hasyim, H., & Nawir, M. (2022, April). Four Transmission Patterns Traditional Ecological Knowledge (Tek) Cerekang People. In *9th Asbam International Conference (Archeology, History, & Culture In The Nature of Malay)(ASBAM 2021)* (pp. 432-446). Atlantis Press.
 4. Akhmar, A. M., Rahman, F., Supratman, Hasyim, H., & Nawir, M. (2023). The cultural transmission of traditional ecological knowledge in Cerekang, South Sulawesi, Indonesia. *Sage Open*, 13(4), 21582440231194160.
 5. Akib, Y. (2008). *Ammatoa komunitas berbaju hitam*. Pustaka Refleksi.
 6. Angmo, K., Gailson, L., Adhikari, B., Rawat, G., Bhatt, J., Busmann, R., & Malik, Z. (2022). Prevailing traditional health care services in Western Ladakh, Indian Trans-Himalaya. *Ethnobotany Research and Applications*. <https://doi.org/10.32859/era.24.22.1-12>
 7. Ashar Said. (2013). *Pesan lestari dari negeri Ammatoa*. Pustaka Refleksi.
 8. Aziz, M., Adnan, M., Khan, A., Shahat, A., Al-Said, M., & Ullah, R. (2018). Traditional uses of medicinal plants practiced by the indigenous communities at Mohmand Agency, FATA, Pakistan. *Journal of Ethnobiology and Ethnomedicine*, 14. <https://doi.org/10.1186/s13002-017-0204-5>
 9. Corso, M., DeSouza, A., Brunton, G., Yu, H., Cancelliere, C., Mior, S., Taylor-Vaisey, A., MacLeod-Beaver, K., & Côté, P. (2022). Integrating Indigenous healing practices within collaborative care models in primary healthcare in Canada: A rapid scoping review. *BMJ Open*, 12. <https://doi.org/10.1136/bmjopen-2021-059323>
 10. Dalyan, M., Rahman, F., & Fitriani. (2025). Etnolinguistic Study of Healing Discourse in Buginese Traditional Healthcare. *Journal of Cultural Analysis and Social Change*, 31-38.
 11. Fabrigas, Y., & Maniago, J. (2018). Ayta's indigenous healthcare practices: A descriptive-qualitative study. *European Scientific Journal*, 14, 408. <https://doi.org/10.19044/esj.2018.v14n3p408>
 12. Gandasari, A., Supiandi, M., Syafruddin, D., Nita, S., Mawardi, M., Zubaidah, S., & Mahanal, S. (2023). Indigenous knowledge source: Plants and animals as traditional medicine Dayak Tamambaloh's of Labian Ira'ang Village. *JPBIO (Jurnal Pendidikan Biologi)*. <https://doi.org/10.31932/jpbio.v8i1.2039>
 13. George, J., Macleod, M., Graham, K., Plain, S., Bernards, S., & Wells, S. (2018). Use of traditional healing practices in two Ontario First Nations. *Journal of Community Health*, 43, 227–237. <https://doi.org/10.1007/s10900-017-0409-5>
 14. Haque, M., Chowdhury, A., Shahjahan, M., & Harun, M. (2018). Traditional healing practices in rural Bangladesh: A qualitative investigation. *BMC Complementary and Alternative Medicine*, 18. <https://doi.org/10.1186/s12906-018-2129-5>
 15. Katu, M. A. (2005). *Tasawuf Kajang*. Pustaka Refleksi.
 16. Lambin, R., Wahab, N., Choo, G., Mustapha, R., & Abdullah, R. (2018). A case study of Orang Asli indigenous knowledge in traditional medicine. *International Journal of Academic Research in Business and Social Sciences*. <https://doi.org/10.6007/ijarbss/v8-i4/4127>
 17. Moktan, D. (2023). Indigenous knowledge on health and use of herbal plants as domestic: A

- case study of illiterate an indigenous caste 'Bankariya'. *Southwestern Research Journal*. <https://doi.org/10.3126/srj.v1i1.62260>
18. Mwaka, A., Achan, J., & Orach, C. (2023). Traditional health practices: A qualitative inquiry among traditional health practitioners in northern Uganda on becoming a healer, perceived causes of illnesses, and diagnostic approaches. *PLOS ONE*, 18. <https://doi.org/10.1371/journal.pone.0282491>
 19. Paiting, Y. S., Daud, A., Arsin, A. A., Ishak, H., Putro, G., Rahman, F., ... & Mallongi, A. (2025). Evaluation of Environmental Health Literacy in High School Students Regarding Environmental Management Aspects for Malaria Vector Control Instrument Development and Validation. In *Seminars in Medical Writing and Education* (Vol. 4, pp. 449-449). AG Editor (Argentina).
 20. Pereira, N., Bandeira, F., Marques, J., De Freitas Tomás, A., Morimitsu, P., De Miranda, A., Santos, R., & Bitencourt, R. (2020). Sacred medicinal plants and impacts on the traditional healing system of the Rodelas/BA's Tuxá indigenous people. *International Journal of Advanced Engineering Research and Science*. <https://doi.org/10.22161/ijaers.73.3>
 21. Pratiwi, N. I., Sosrohadi, S., Fathu, R., Dalyan, M., Andini, C., & Mulyani, M. (2026). The use of code-mixing by edu-influencers in social media: A communication strategy in sociolinguistic perspective. *International Journal of Research and Innovation in Applied Science*, 10(1), 1034–1042.
 22. Rahman, F., Akhmar, A. M., Hasyim, M., Dalyan, M., & Rahman, F. F. (2022). The Virtue In Core Values of Buginese Culture: A Worldview from Philosophical, Religious, and Moral Perspectives. *Al-Qalam*, 28(2), 197-207.
 23. Redvers, N., & Blondin, B. (2020). Traditional Indigenous medicine in North America: A scoping review. *PLOS ONE*, 15. <https://doi.org/10.1371/journal.pone.0237531>
 24. Sahib, H. (2017). Entextualization and genres transformation of Kajang death ritual speech (Doctoral dissertation).
 25. Usop, M. (1978). Pasang ri Kajang: Kajian sistem nilai budaya di Benteng Hitam Ammatoa. Laporan Penelitian Pusat Latihan Ilmu-Ilmu.
 26. Villanueva, J. (2021). Indigenous healing practices, policies and perceptions of young and elderly Ga'dang people in Nueva Vizcaya, Philippines. *Journal of Natural Remedies*. <https://doi.org/10.18311/jnr/2021/25167>