Traditional health practices in mountain, plain and seaside regions of Adana in Turkey

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The purpose of this study is to identify the traditional medical practices about general health in mountain, plain, and seaside regions of Adana, find out the differences resulting from geographical features, and collect information regarding this issue to hand down the knowledge gathered to next generations. Target population of the study was designed as a qualitative one. The study was conducted with 23 participants who were born and have been living in mountain, plain, and seaside regions of Adana. Data obtained from the study show that people living in mountain, plain, and seaside regions make use of various traditional health practices. As a result of the interviews conducted, health practices were collected under the following subtitles: wound-burn injury, skin diseases, pain, fracture-dislocation, ear-nose-throat diseases, and respiratory system disorders. It was found that there were fewer traditional health practices and more mystical beliefs in plain and seaside regions than in the mountains. It is important for health professionals to know individuals and families for whom they provide care in terms of their attitudes, behaviours and applications regarding the traditional practices, which can help an improvement in the effectiveness of the service provided to them.

Keywords: Traditional practice, Health, Illness, Folk remedies, Medicinal plants

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Traditional medicine has a long history. It is the sum total of the knowledge, skills and practices based on the theories, beliefs and experiences indigenous to different cultures. Whether explicable or not, it has been used in the maintenance of health, as well as in the prevention, diagnosis, improvement or treatment of physical and mental illnesses. The terms complementary/alternative/non-conventional medicine are used interchangeably with traditional medicine in some countries.

Health care service practices require the use of not only modern medicine approach but also culturally appropriate care. Any health care service model that excludes cultural features is rejected by the society. Therefore, it is important to be in touch with the society while planning community health services. Recognizing the traditional attitudes and behaviours of the community in relation to health is an important factor in improving the effectiveness of health services to be provided. In this century when medical modernization and information are in their golden age, it has become compulsory to define, analyse, and identify advantages and disadvantages of traditional health practices. It is thought that, with the identification of the scientific efficiency of these practices in terms of medical and psychosocial aspects, it can be possible to create a synergistic action with “the integration of those which are appropriate to modern medicine”.

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Methodology

Study area

Adana, located in the East Mediterranean part of the Mediterranean region in the South of Turkey, is a city with a square measure of 17,253 km² and a
population of 2,085,225 (according to the results obtained from 2010 address-based population registration system). It has 15 towns, 37 municipalities and 469 villages. Of the cities experiencing the fastest urbanization process, Adana is the leading center of Mediterranean Region in terms of trade, industry and capital market. Target population of this study which was designed as a qualitative one is the people who are settled in Adana. The participants are 23 people who were born and have been living in the mountain regions in Saimbeyli, Feke, Tufanbeyli, and Kozan towns, seaside in Yumurtalık and Karatas towns, and plains in Ceyhan and Seyhan towns, who did not have communication problems, and who volunteered to participate in the study Appendix. By taking into consideration all segments of the society, reference persons were identified among those who acknowledged the cultural values of the region and who were from various cultures and education levels. Field visits were conducted between June and September 2010. Interview dates were identified by contacting the reference persons, and then they were visited for interviews.

Appendix: List of Reference Persons (RP)

Date of birth, occupations, educational background and residing places of the reference persons are as follows:

RP1- Ayse Sener, 1940, traditional midwife, illiterate, Saimbeyli
RP2- Ali Ogut, 1941, sheepman, illiterate, Saimbeyli
RP3- Kiraz Kargi, 1945, traditional midwife, illiterate, Saimbeyli
RP4- Süleyman Ogut, 1980, dental technician, high school, Saimbeyli
RP5- Fatma Ogut, 1947, housewife, illiterate, Saimbeyli
RP6- Ahmet Kargi, 1933, horse doctor, literate, Saimbeyli
RP7- Zübeyde Ogut, 1955, housewife, primary school, Saimbeyli
RP8- Fadime Aksoy, 1923, traditional midwife, illiterate, Feke
RP9- Halil Ibrahim Yavuz, 1965, restaurateur, university, Feke
RP10- Elif Akkuş, 1935, traditional midwife, illiterate, Yumurtalık
RP11- Fatma Cakir, housewife, illiterate, Yumurtalık
RP12- Ismail Cuyirci, 1948, baharatçı, primary school, Seyhan
RP13- Neriman Zongor, 1939, housewife, primary school, Seyhan
RP14- Meliha Simak, 1928, farm worker, literate, Karatas
RP15- Yurdanur Karatas, 1940, housewife, literate, Karatas
RP16- Fikri Cirit, 1953, retired teacher, university, Ceyhan.
RP17- Deha Akar Mirel, 1973, land agent, high school, Ceyhan.
RP18- Hakki Baser, 1928, high school, health technician, Tufanbeyli.
RP21- Muhtarre Ozturk, 1952, farmer, primary school, Ceyhan.
RP22- Davut Avci, 1958, X-Ray tecnician, high school, Kozan.
RP23- Selahattin Sas, 1956, restaurateur, high school, Karatas.

The interview data were collected using tape recorders and camera. However, the researcher took notes while interviewing those who did not consent being recorded during the interview.

Ethical committee

The written ethical approval was obtained from the ethical review board of Cukurova University. Participants were informed about the aims of the study and their verbal consent was obtained prior to the administration of the interviews.

Data analysis

The data collected from semi-structured interviews were analysed using content analysis, one of the qualitative analysis methods. Interview data collected from the reference persons were transcribed on computer and analysed by creating themes composed of similar groups.

Results

It was found that people residing in mountains, seaside, and plains used various traditional health practices. The people were found to make use of flowers, roots, stems, leaves, stem bark, and oil of plants; honey and honeycomb of bees; and practices having massage and touching medicine. As a result of the interviews conducted, traditional health practices were collected under the following subtitles: “wound-burn injury, skin diseases, pain, fracture-dislocation, ear-nose-throat diseases, and respiratory system disorders” (Table 1).
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<th>Table 1 — Traditional health practices of participants in mountains, plains, and seaside regions</th>
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It was also found that in curing wound-burn injury, those living in mountain regions used mastic gum, *Centaurium* flower, *Hypericum perforatum* L., onion, *Bovista*, and black beeswax; those living in plains used a mixture with the Vaseline as the primary material and centaurium; but those living by the sea reported that they did not use any traditional practices in curing burn injuries.

Use of *Centaurium* was found to have an important role in curing wounds. The participants reported that they used both centaurium flower and its seedy form blended with olive oil.

“Olive oil is added to the *Centaurium* and the mixture is kept in a glass jar for 40 days. It is then applied to wounds.” (*RP1, RP7, Mountain).

“*Hypericum perforatum* L. cures all wounds in human body. It is kept in a bottle filled with olive oil at least for 20-40 days. It is drunk on an empty stomach every morning for 21 days. It can heal sore throat and a hoarse voice as well” (RP18, Mountain).

“*Centaurium* is put in olive oil when it still has flowers and kept in the sun. It is applied on the wound. It is drunk (one dessert spoonful)” (RP12, Plain; RP19, Mountain).

“When the *Centaurium* flowers began to seed, they are kept in olive oil and applied on the wound. They are mixed with wheat flour and pulped. Then, the wounded area is bandaged” (RP9, Mountain).

“Mastic gum is found in the cones of pine trees. It pours from the cone onto the soil. This gum is collected and used. Mastic gum is brayed with tallow. The wound is bandaged with the mixture and this application is repeated until the wound is healed” (RP5, Mountain).

The participants came to this conclusion after observing birds collect mastic gum with their beaks and apply it on the wounded area to heal.

“The abscessed area is bandaged with beeswax. This application helps the abscess to drain. Black beeswax is different from honey wax. It is not produced in the hive; it is produced by the bee itself in the entrance of the hive” (RP5, Mountain).

“A cream is prepared using a mixture of ingredients at some certain proportions (*The main ingredient is Vaseline, he does not tell the other ingredients*). The cream is applied on the wound and the wound is bandaged for 48 hours. The bandage is renewed until the tissue heals. In deep wounds, the cream helps the dead tissues separate from the healthy ones, and thus accelerates healing. It can be used in wound-burn injuries and cuts” (RP16, Plain).

The traditional practices to relieve pain were found to vary depending on the painful area.

“*Helichrysum* (Compositae) is steeped like tea and drunk for severe pain. *Helichrysum* (Compositae) flowers are also used for the water to wash the dead” (RP9, Mountain).

“*Equisetum arvense* is boiled and drunk” (RP7, Mountain).

“*Rhus coriaria* leaf is boiled and pulped, then the painful area is bandaged using this mixture” (RP7, Mountain).

“The painful area is pulled in every kind of pain” (RP14, Sea).

**Headache**

“The head is hit by measuring from upper ear, this practice relieves pain” (RP8, Mountain).

White cabbage leaf is put on the head” (RP7, Mountain).

“*Matricaria chamomilla* L. is boiled and its vapour is inhaled and drunk. Sideritis can also used for the same purpose. *Matricaria chamomilla* L. is drunk as tranquiliser as well” (RP10, Sea).

“*Achillea millefolium* is good for migraine” (RP18, Mountain).

**Sore throat**

“*Rhus coriaria* leaf is boiled and gargled” (RP7, Mountain).

**Earache**

“*Helichrysum* flower is steeped like tea. Its vapour is applied to the painful ear” (RP5, Mountain).

**Stomachache**

“*Matricaria chamomilla* L. is steeped like tea and drunk” (RP20, Plain).

“Thyme is both used in food (kebabs, some soups, etc) for its aroma and drunk as tea. This kind of tea does not have the side effects of the black tea” (RP10, Sea).

**Backache**

“Cupping is good for backache, small jars or glasses are used for this practice. Alcohol is soaked to the cotton placed on the top of a skewer, and then the cotton is burnt. As the substance burns down, the cup
is inverted and placed at some points along the body. One cup is taken out while the other one is placed. Vicks is applied after cupping is practiced in all parts of the back. Then, the body is kept warm by the help of a hot towel” (RP20, Plain).

**Arthralgia**
Honeycomb of the horse bee is wetted, and the juice is drunk. *Equisetum arvense* is boiled and drunk (RP7, Mountain).

**Menstrual pain**
“Achillea millefolium is steeped like tea and drunk” (RP7, Mountain).

**Sciatica pain**
“Larva of the honeycomb that belongs to current year is taken and made smaller so that it could fit to a coffeepot. It is boiled in two tea glasses of water until it diminishes. Then, it is drunk (one glass). The pulp is kept and boiled in two tea glasses of water 8 hours later. It is boiled again until the water diminishes and then it is drunk. The same procedure is repeated for three times in every 8 hrs” (RP18, Mountain).

**Traditional practices about skin diseases were found to be as follows:**

**Skin care/skin crack**
“Women who spend time with gardening apply henna to protect their hands and feet” (RP7, Mountain).

**Skin diseases**
There is a 20 ºC natural water spring, 6km south of Ceyhan, near Tahtalıköy. The water has sulphurous hydrogen gas in bubbles, and it is good for skin diseases” (RP21, Plain)

**Whitlow**
“Delight or bread dough is bandaged on the whitlow to heal abscess” (RP20, Plain).

“*Pronychia serpilifolia* is cooked with wheat flour and the wound is bandaged with it” (RP18, Mountain).

**Sycosis barbae**
“Herba Euphorbiae milk is applied to the problematic area. Applying it only once works” (RP13, Plain).

“The problematic area is scrubbed hard with garlic” (RP12, Plain)

**Fever blister**
“A wooden spoon is heated and put on the fever blister” (RP8, Mountain).

“Hot compress is applied using boiled water” (RP20, Plain).

**Fungus**
“*Centaurium* which was kept in the olive oil is applied between fingers” (RP9, Mountain).

“Olive oil is mixed with laurel oil and applied to the skin” (RP12, Plain).

“Pennyroyal flower is brayed, put between fingers and covered by wearing socks. This application is not good for diabetic patients” (RP18, Mountain).

**Intertrigo**
“The area is frequently washed, applied olive oil, and aired” (RP20, Plain).

**Miliaria**
“Swimming in the sea is good for miliaria” (RP11, RP15, Sea).

It was observed that people who are called bonesetters still existed and people asked for their help in curing fracture-dislocation. Two bonesetters, one of whom lived in the plain and one of whom lived in the mountain, were interviewed.

“First of all, the area with fracture-dislocation is specified. The decision whether the problem is a fracture or dislocation is made according to the patient’s expressions and palpation. Once the area is identified, it is scrubbed with warm water and soap. Since the problematic area becomes tough it is massaged until it gets softer. Then, that area is bandaged using mastic gum. The mastic gum is melted in a cup on the ash and disseminated on a piece of cloth. Two people pull the patient from two sides so as to apply the bandage. The broken parts are put in parallel position and bandaged using a hot bandage. If there are more than one broken parts, they can be supported using thin batten. The bone heals in 15 days” (RP2, Mountain).

The participant reported that he could cure broken bones such as in fingers, hands, arms, legs, and collarbones, but not hip fractures. He said when he had a patient with hip fracture, he sent him/her to an older and more experienced bonesetter.

“The patient is evaluated according to palpation, symptoms and history. Then, s/he is asked about where, when and how the incident happened. The area is examined in terms of insensitivity or numbness. If I suspect any nerve injury, I do not touch it. I suggest the patient to have an x-ray, especially in fragmental cracks. Due to poverty, people used to mix soap and
eggs to cure cracks in the past, now I use cast. Oedema is cured by preparing a mixture of rice flour, milk, and olive oil. The mixture is applied to a piece of fabric and bandaged to the area. Depending on the conditions, the patient is asked to come for a check up after 24-28 hours” (RP17, Plain).

It was found that plants are frequently used in curing ear- nose-throat and respiratory system diseases.

Sinusitis
“Squirting cucumber melon juice is filtered in the evening and kept till morning. It is mixed with water at the same amount and kept in the fridge for one day. One drip is instilled to each nostril. Usually it works outright. If it does not, the same procedure is repeated after 20 days” (RP13, Plain; RP22, Mountain).

Common cold
“Matricaria chamomilla L. and lime is steeped like tea and drunk” (RP15, Sea; RP18, RP22, Mountain; RP20, Plain).

“The indigenous origanum micranthum vogel (Akoluk tea) is steeped and drunk. Slices of lemon, grapefruit or orange may also be included. This tea is used for common cold, but it is also good as antioxidant” (RP9, Mountain). RP9, who is a nature-friendly person, created a special forest field in his village despite living in the city center and aimed to protect and produce indigenous plants. He pointed that he frequently visited the village and did his best to improve his neighbourhood. He applied to the Cukurova University Biology Department and asked for the analysis of the indigenous plant called “Akoluk tea”. After the plant was analyzed at the university, he managed to receive certificate of incorporation from the Turkish Patent Institute and named the tea as “Akoluk Grey Mint Tea”.

Cough, Bronchitis, Asthma, and Dyspnea
“Tussilago farfara is boiled with a little thyme and drunk for 5-6 days” (RP18, Mountain).

“Hypericum perforatum L. is steeped like tea and drunk” (RP18, Mountain).

“Viscum album L. leaves are steeped like tea and drunk. The leaves are also useful if eaten by animals in that their meat and milk taste better and the amount of milk increases” (RP5, Mountain).

“Laurus nobilis L. works. For one water glass, four leaves are boiled for about 5 minutes. It is drunk after steeping for 10 minutes” (RP22, Mountain).

“Fructus Crataegi and Melisa officinalis are mixed and steeped like tea. It is very good for patients having asthma and dyspnea” (RP22, Mountain)

“A kind of moss that can be found in rocks by the sea is steeped like tea and drunk” (RP23, Sea).

“Sea air is good for respiratory tract diseases, it eliminates asthma” (RP23, Sea).

Pneumonia
“Zingiber officinale, Curcuma longa L., Eugenia caryophyllata, and Cinnamomum are boiled together and drunk” (RP22, Mountain).

Lung cancer
“Urtica dioica L. seed is mixed with honey. The seed is brayed until triturated. Then, it is mixed with honey and taken on an empty stomach in the mornings (1 tablespoon). This mixture is used for prostate cancer as well” (RP18, Mountain).

Discussion
People keep tradition practices alive not only because these practices are parts of their beliefs and traditions, but also they are meaningful for them. Traditional practices are used almost in all parts of the world with some differences in the frequency. Although it is more common to find traditional practices in developing countries, they are used and become widespread in developed countries as well. Within the last decade, the use of traditional and complementary/alternative medicine (TM/CAM) has increased widely not only in developing countries where they are perceived as the only way to protect health but also in developed countries. In the majority of high income countries such as Canada, France, Germany, England and United States of America nearly 50% of the general population prefers TM/CAM. Adana has a very rich folklore in connection with having hosted various civilizations in the past. Different physical and geographical features (Toros Mountains, Cukurova agricultural soil and Mediterranean seacoast) form both the flora of the region and life styles of the people, which provides a basis for various traditional practices. Traditional health practices in Çukurova region are commonly used especially in villages. Review of the related literature indicates that people widely used traditional practices for their common health problems.
Similarly, the present study has revealed that various traditional practices about general health still exist in urban and rural areas. According to the interviews conducted, the traditional practices about health are collected under the following subheadings: “wound-burn injury, skin diseases, pain, fracture-dislocation, ear-nose-throat diseases, and respiratory system diseases”.

In their study conducted with 405 women aged between 18 and 65, Kocatas et al. (2008) aimed to identify the traditional practices that women applied and found that the most frequently encountered health problems for which women try to find solution included hypotension, hypertension, diarrhea, fainting, nasal bleeding, nausea, stomachache, constipation, and coughing. The study found that women pulled hair, poured water on head and neck for nasal bleeding; ate pumpkin seeds for parasite; applied applesauce, potato, toothpaste, sauce, yoghurt, mud, olive oil, butterfat and roasted barley meal for burn injuries.

CAM is becoming increasingly popular for the treatment of inflammatory skin diseases, primarily atopic dermatitis. In their review, Boneberger et al. (2010) found that people used complementary therapy methods such as herbal medicine, diet with essential fatty acids, probiotics, massage therapy, homeopathy and aroma therapy for atopic dermatit and other allergic skin diseases. Cooled tea made from chamomile flowers can be used to treat mouth irritation, and it can be used as a compress for skin irritation. In addition, taken internally it has mild sedative activity and treats gastrointestinal spasm and inflammation. St. John’s Wort plant can be used internally or externally in curing wounds. Njoroge and Bussmann (2007) interviewed 60 people who were randomly chosen and aimed to identify the use of traditional remedies in managing various skin conditions in the Central Province of Kenya. They found that the participants used various plants in various ways for scabies, measles, burns, pimples, wounds, ringworm, warts, skin rashes, boils, swellings and sores (fibers used as bandage, sap from leaves, leaves and stems beaten-up and applied directly, sap applied directly, etc.). A study conducted by Cakircioglu et al. aimed to identify wild plants collected for medical purposes by the local people of Maden County, located in the Eastern Anatolia Region of Turkey, and to establish the uses and local names of these plants. A total of 88 medical plants belonging to 41 families were identified in the region. These plants were found to be used in the treatment of many diseases (e.g. astringent, urinary inflammations, diarrhea, diabetes, stomach-ache, rheumatism, cough, kidney stones, asthma, haemorrhoids, colds, flu, etc.).

Ground surface parts of Hypericum perforatum L. (St. John’s Wort) plant, the macerate in olive oil or sunflower oil have remedial effects. This red oil that can be used both internally and externally has preventive and remedial effects on inflammations. Hypericum perforatum L. preparates can be found as licensed medicine and medical tea in Germany. As for USA, dry extras are used in capsule and tablet forms while tenture and fluid extras are used as nutritional supplement. The present study found that Centaurium was widely used in curing wounds. It was also detected that Centaurium, both with flowers and with seeds, is blended with olive oil and used. Findings also show that people residing in mountains use traditional practices more often than those in other places and the practices demonstrate more variety in mountains.

Kocatas et al. (2008) identified the most frequently used traditional health practices as tying the head for headache (57 %); drinking hot beverages, boiling mint-lemon, drinking mineral water for stomachache (93 %); pressing on stomach using a pillow, using hot compress on stomach and feet, sitting on hot bricks, heating sheep scat and sitting on it for stomachache (60 %); girdling belly, wearing corset, using hot towel, braying, heating and girdling pitch, wrapping turnip, and tying for low back pain (47 %); putting salt, olive, garlic, coffee, bread, boiled eggs, cotton with cologne, aspirin, clove, tobacco, and baking soda on the tooth for toothache (98 %). The present study identified that traditional medical practices varied depending on the painful area and correlated with the other studies conducted before.

It was found that people known as bonesetters still existed and people asked for their help. Two bonesetters, one from mountain regions and one from the plain, were interviewed. The bonesetter residing in the plain pointed that he did this job as a profession and benefitted from modern medicine practices. Findings in the studies conducted by Elmaci and Ozelci (2000), Karatay (2009), Kocatas et al. (2008), Alan et al. (2009) and Konak and Aktar (2009) correlate with those in this study in that they also found that people consulted bonesetters, used
traditional medical practices such as wrapping colophony or a mixture of grape-honey, applying a mixture of egg white and soap, massaging with soap and hot water, wrapping raw meat, applying the mixture of bran, water and flour and wrapping the area.

Participants of this study reported that they frequently used plants for ear-nose-throat and respiratory system diseases. Despite the existence of such practices in mountain, sea and plain regions, they were found to be more common in mountains. Similar to the findings of this study, traditional practices, especially plants, were used to cure sinusitis, common cold, cough, bronchitis, asthma, dyspnea, pneumonia and lung cancer.

Results of this study revealed that people residing in mountains, seaside, and plains used various traditional health practices. The people were found to make use of flowers, roots, stems, leaves, stem bark, and oil of plants; honey and honeycomb of bees; and practices having massage and touching medicine.

Traditional health practices were found to be more common in mountain villages (maybe) due to the hard living conditions in the area. It was also found that people in the village began to be familiar with modern health practices through media, especially by watching doctors in health programs on TV. Besides, it was observed that people were conscious and tried to consult more experienced people or institutions for the situations beyond their capabilities. People in Feke/Akoluk village, due to being in forest and having a rich plant flora, were found to make use of plants in protecting themselves from diseases and curing them. In addition, development level of the people in the village is lower since the young people migrate to the city, which leads to a more common usage of traditional health practices in the society. Traditional health practices were found to be less common in plains and seaside when compared to the mountains where mystical beliefs were more common.

Conclusion
In conclusion, acknowledging beliefs and attitudes of individuals, families, and society regarding health services is of great importance due to many reasons, especially increasing the effectiveness of the healthcare services provided. Healthcare providers should develop a holistic approach in evaluating individuals and collect data in a way that would reveal their beliefs about health and traditional practices.

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