Psychosocia: Journal of Applied Psychology and Social Psychology

Volume. 1 Issue 1 October 2023

Page No: 39-48



The Unique Way Balinese Medicine Works To Achieve Well-Being

Ni Kadek Meri Wahyuni¹, Ni Made Swasti Wulanyani² Udayana University, Denpasar, Indonesia¹²

Correspondent: kdmeriwahyuni@gmail.com1

Received : August 29, 2023 Accepted : Sept 25, 2023

Published : October 25, 2023

Citation: Wahyuni, N, K, M., & Wulanyani, N, M, S. (2023). The Unique Way Balinese Medicine Works To Achieve Well-Being. Psychosocia: Journal of Applied Psychology and Social Psychology, 1(1), 39-48

ABSTRACT: Everyone always expects health, and this is one of the indications that individuals have good well-being. Treatment is one of the efforts to be able to restore individual health. There are two types of treatment, namely medical and traditional treatment. Balinese people do not only medical treatment but also traditional treatment known as Balian treatment. The study aimed to determine the process of health-seeking behavior of Balinese people who switch from medical treatment to Balian treatment. The research method is descriptive qualitative, using five respondents selected through purposive sampling. The results of this study indicate that the causes of individuals who switch medical treatment to Balian treatment in Bali are dissatisfaction with the results of medical treatment, the influence of significant others, individual beliefs and perceptions of Balian practices, and cultural traditions. The primary purpose of Balinese people switching from medical treatment to Balian treatment is to get healing as a unique effort to achieve well-being.

Keywords: Balian treatment, health-seeking behavior, wellbeing, treatment switching, Balinese people



This is an open access article under the CC-BY 4.0 license

INTRODUCTION

Being healthy is something that every individual always expects because being physically, psychologically, and socially healthy indicates that the individual has good well-being. However, the majority of individuals have experienced health problems. Health problems experienced by individuals can take various forms, both mild problems and those that need further treatment. Ideally, every individual who experiences health problems will look for solutions to restore their health condition. One way to do this is through medication. The public widely recognizes two types of treatment: modern medicine and traditional medicine. Modern medicine is a treatment that is currently developing with medical methods. Traditional medicine is a treatment whose methods refer to empirical hereditary experiences and skills that can be accounted for and applied by the prevailing norms in society (Peraturan Menteri Kesehatan RI No.15 Tahun 2018, 2018).

The utilization of traditional medicine in Indonesian society is quite common; 30.4% of households in Indonesia utilize traditional medicine as a solution to their health problems

(Nurhayati & Widowati, 2017). In the last five years, Indonesia's non-fulfillment rate of national health services tends to increase by 6.09% in 2022 (Badan Pusat Statistik, 2019, 2022). One of the many factors behind Indonesians' decision to choose traditional medicine is the lack of adequate health services for the community. This description does not match the conditions in Balinese society. In fact, in the last five years, the number of unmet health services in Bali has decreased, with only 2.75% recorded in 2022 (Badan Pusat Statistik, 2019, 2022).

Referring to the data, it can be said that health services in Bali are pretty good and easily accessible to the community to overcome their health problems. Nevertheless, many people from various walks of life and educational backgrounds still utilize traditional medicine until now (Hikmaharyanti, 2019). The phenomenon of many people choosing traditional medicine as a problem solution is closely related to the cultural definitions in that society (Khair, 2015). This is relevant to the Balinese, who consider traditional medicine part of their culture.

Traditional medicine in Bali is more commonly known as Usada Bali, and the individuals who practice it are called Balian (Nala, 1993). Balinese people have accepted Balian practices as part of a hereditary tradition that has existed since long ago (Prastika, 2017). Usada, or traditional Balinese medicine, implements healing knowledge imbued with Hindu values (Sukarma, 2013). The type of Balian treatment can be divided into several types based on the source of power possessed to carry out its practice (Weck, 1976). The method that Balian use in their treatment utilizes natural resources such as plants, animals, and water for internal energy (Suatama et al., 2019).

Based on Tatengering Wong's literature, several things are considered by Balian in confirming the diagnosis of disease, such as the condition of the eyes, skin, pulse, nails, tongue, urine, and feces of the patient (Suatama, 2019). This is important for Balian to pay attention to because, in the conception and treatment of Balian, the emergence of disease is due to an imbalance of some aspects of the body (Sukarma, 2013). It is not surprising that Hikmaharyanti's research (Hikmaharyanti, 2019) found various reasons for Balinese people to utilize Balian services to seek help related to their illnesses, communicate with ancestors, and other spiritual activities.

Individual behavior gives rise to several responses regarding his actions when experiencing this illness. This is called health-seeking behavior, which in the process can involve many influencing factors to form a decision (Notoadmojo, 2014). Cultural aspects influence the concept of health and illness in society, and this causes the formation of health-seeking behavior in individuals to vary according to the cultural values believed (Khair, 2015). The seeking behavior of the Balinese people by utilizing Balian practices is not solely for reasons of cultural tradition. However, some make it an alternative treatment after undergoing medical treatment (Wulanyani et al., 2020).

Of course, this is a unique phenomenon regarding Balinese people who stop medical treatment and turn to Balian treatment to overcome their illness. Referring to data in the field, medical services in Bali have continued to improve over the past five years. Based on this description, the researcher feels it is essential to learn more about the health-seeking behavior of Balinese people transitioning from medical treatment to Balian treatment.

METHOD

This research uses a qualitative research type. Qualitative research uses a natural background to interpret phenomena involving existing methods (Moleong, 2016). A qualitative approach reveals a situation or object in its context, such as finding meaning or a deep understanding of the problem at hand, which appears as qualitative data (Yusuf, 2014).

Research Respondents

Respondents in this study were five people who had been selected and qualified. The sampling technique used was the purposive sampling technique. This technique is a sampling of data sources with specific considerations that can make it easier for researchers to understand the social situation under study (Sugiyono, 2015). The criteria that respondents must meet are people who live in Bali, have experienced medical illness, and have transitioned from medical to Balian treatment. Respondent demographic data can be seen in Table 1.

Table 1. Respondent Demographics

Respondent	Gender	Age	Education	Occupation
1	Female	20	Bachelor	Student
2	Female	22	Diploma	Freelance
3	Male	24	Bachelor	Private Employee
4	Male	39	Senior High School	Private Employee
5	Female	58	Elementary School	Housewife

Data Collection Technique

This research uses interview techniques and literature studies for data collection. The interview is a question-and-answer process conducted between researchers and informant sources that can provide information related to research (Sarwono, 2017). The interview used in this research is semi-structured. The researcher has compiled a detailed and systematic guideline of questions. However, they need to be in a fixed order and allow for probing or additional questions during the interview session.

Data Analysis Technique

The data analysis technique used is descriptive and coding technique. Based on this method, the interview transcripts that have been compiled will be read repeatedly to explore and understand the data well. The data will be analyzed through open coding; the results of this coding are then used to categorize the data and organize them as themes.

RESULT AND DISCUSSION

Research on the transition from medical treatment to Balian treatment was obtained from five Balinese respondents who met the research criteria. This data was obtained from a data analysis that grouped the same or similar answers from each respondent regarding their treatment-switching experience.

Respondents' Medical Treatment History

Respondent	Medical Diagnosis	Medical Treatment
1	Disana dah ketauan kalo aku itu skoliosis di klinik A (Γ1.561-562)	Iya, aku <i>rontgen</i> . Disana dah ketauan kalo aku itu skoliosis di klinik A (T1.561-562) Pernah aku tu coba terapi (fisioterapi) di Jalan A (T1.566)
2	Abis itu dibilang sama dokternya ee kayak herpes nih, gitu dia bilang (Γ1.381)	Dikasi salep sama pil, pas aku pulang langsung aku minum (T.381-382) Emang aku e emang langganan banget sih sama dokternya itu (T1.385) Itu (dokter) spesialis (T1.389)
3	Yang terakhir tuh ini, yang terakhir. Nah karena kemarin kan ee e e aku tuh terlalu <i>over</i> dengan alkohol ya, <i>over</i> alkohol jadinya aku tuh kayak dibilang gejala liver gitu (T1.223-224)	Akhirnya masuk lah rumah sakit (T1.235) Ada kok, ada obat e obat antibiotik dikasi, dikasi obat apa e obat A itu ya penambah sendi-sendi lah ada itu dikasi (T1.301-302)
4	Paling ya di diagnosis ya kayak panas gitu loh, panas badan ya pasti lah karena kita kan kondisi tubuh kan panas pada waktu itu kan (T1.133-134)	Cuma dikasi ya <i>paracetamol</i> e apa ya obatobat seperti itu (T1.105)
5	Diperkirakan sakit Ibu tuh itu ada sakit apa di apa namanya tuh di rahim, tapi Ibu ngerasain <i>ndak</i> ada (T1.117-118)	Terus dikasi obat rahim sampe kalo <i>ndak</i> salah dua bulan-tiga bulan (T1.123-124) Ibu langsung lanjut <i>rontgen</i> ke rumah sakit A (T1.137)

All respondents had experienced medical illnesses ranging from minor complaints, such as fever, to severe complaints, such as scoliosis, herpes, liver disorders, and uterine disorders. All respondents had undergone medical treatment as evidenced by taking medication as recommended by medical personnel and seeking treatment directly at available and trusted health services.

Motivation for Discontinuing Medical Treatment

Table 3. Reasons for Discontinuing Medical Treatment

Respondent	Description
	Nah disana itu kan aku gak cocok kan kayak ngerasa kok aku gak ada berubah ya gitu,
1	cuman ya kalo ngerasa sih bugar ya bugar badanku, cuman kek gak ada perubahannya
	gitu loh untuk penyakitku skoliosisnya itu (T2.150-152)
2	Kok gak ngefek ya gitu dan aku inguh (perasaan tidak nyaman) karena ee e bintik-
	bintiknya itu pas di belakang leher (Γ1.393-394)
3	Tapi aku merasa kok aku udah berapa kali minum obatnya aku gak bisa jalan, apa aku
	bener-bener lumpuh kayak gitu (T1.393-394)
	Aku dah rawat inap, aku nih kenapa aku gak bisa sembuh gitu sedangkan kalo kita
	pusing atau gimana pun pasti setidaknya sembuh loh, apalagi aku dah ngerasa istirahat
	yang cukup banyak lah istirahatnya gitu. Itu sih kecewa aja (T1.329-331)
4	Panas cumak biasanya paracetamol atau obat-obat yang seperti di medis dikasih tuh sekali
	dua kali itu udah meredakan penyakit harusnya seperti itu. Tapi ini selama 24 jam gak
	ada reaksi apa-apa kan (T1.134-136)

Respondent	Description
5	Oh gitu dah, kayaknya sekian kali dikasi obat tu gak mau sembuh jadinya Ibu e makanya Ibu sampek nanya itu sama yang ngobatin (tenaga medis), sampek "Obat apa saya dikasi?" sampek Ibu nanya berarti Ibu kan sudah gini tuh ndak bagus rasanya, ndak cocok gitu loh, ndak cocok (T1.299-302)

The reason for discontinuing medical treatment carried out by respondents based on Table 3 refers to dissatisfaction with the results of the medical treatment that has been carried out itself. Respondents felt that it was not worth the results obtained after participating in medical treatment, be it taking medicine or carrying out specific treatments. In other words, there was no significant positive change experienced by respondents after medical treatment.

The absence of positive results after undergoing medical treatment is one of many reasons respondents stop their medical treatment. There were several things that respondents complained about during the medical treatment process, such as costs, administrative services, and the way medical personnel communicated to patients who seemed not to pay attention to the patient's condition.

"ee iya kayak ke jalan pintasnya langsung kayak gak ada usaha-usaha lain yang sebenernya mungkin itu yang lebih ngefek ke pasiennya gitu .Itu sih menurutku" (T1.95-96) – Statement of the first respondent on how medical personnel communicated solutions to her illness.

"He'eh abis itu emang biasa sih pelayanannya emang biasa-biasa aja cuman bayarannya emang lumayan ya" (T1.550-551) – Statement of the second respondent regarding medical services and costs.

"Lumayan lah ya tu ya, lumayan e lumayan juga tapi nominalnya lupa. Lumayan pokoknya biayanya Dik" (T1.368-369) – Statement of the fifth respondent regarding the cost of medical treatment.

"Tapi (pengobatan) medisnya simple cuma sulitnya di administrasi" (T1.334-335) – Statement of the fourth respondent regarding the administrative services of medical treatment.

Motivation for seeking treatment from Balian

Table 4. Motivation for seeking treatment from Balian

Respondent	Description
1	Karena pas waktu itu tu kan aku dapet tu ikut nganter adikku ya aku lihat lah e e
	pemangku-nya (sebutan pemuka agama Hindu) itu Balian-nya itu nganggep aku sama
	keluargaku itu seperti keluarganya dia kek jadinya nyaman. Adikku pun saat itu nyaman
	diobatin sama dia. Akhirnya aku bilang sama ibuku ya coba dah dulu gitu aku bilang
	(T2. 162-166)
2	Terus udah tiga hari gak ilang (sakitnya) kepikiran lah aku mau ke Balian (T1.395-396)
	Karena aku emang sering dari dulu kalo emang gak mempan di medis ya pasti ke
	alternatif (Balian) (T1.423-424)
3	Karena paksaan, semuanya paksaan sampe kakaknya e kakaknya bapak semua keluarga
	sampe ninik (nenek) semua dateng kayak "ayo dong mau dong" (T1.413-415)

Respondent	Description
4	Ya karena kita kan yakin di Bali ini kan spiritualnya kan lebih tinggi daripada di
	pengobatan yang e lebih medis lah istilahnya. Saya mikir ya jadinya seperti itu (T1.142-
	143)
	Saya itu berkeyakinan itu 2, kalo enggak bisa ke medis, saya itu harus ke Balian. Gitu
	loh, paranormal istilahnya ya di Indonesia (T1.298-300)
5	E kayaknya e Ibu yang ngerasain e itu sakit itu loh non-medis gitu loh, makanya Ibu ke
	Balian gitu loh (T1.106-107)

Respondents' motivations for choosing Balian treatment over other alternative treatments after receiving medical treatment varied. However, overall, the primary motivation for using the services of a Balian is to get healing and achieve well-being that was not successfully fulfilled after undergoing medical treatment. The choice of Balian treatment can vary greatly depending on each respondent's situation.

After seeing positive results from her significant other, the first respondent was highly motivated to use Balian services. A similar situation was experienced by the third respondent, who sought treatment from a significant other. The influence of significant others around individuals plays a vital role as one of the factors in the formation of health-seeking behavior. This can be seen from several respondents who decided to seek treatment from a Balian after getting information about the Balian or referring to the successful experiences of significant others who sought treatment from a Balian.

"Kalo Balian, kalo Balian pada biasanya aku berobat sampe sekarang aku percaya karena adikku waktu itu patah. Dia ya normal, kayak aku, kayak ibuku" (T1.197-199) – The first respondent sought treatment from a Balian because of the success of the significant other's treatment.

"Waktu itu kayaknya e pamanku yang dari A, sodara ajik ku (ayahku) tu, itu dah yang ngasih solusi buat kesana (praktek Balian), coba aja kesana (praktek Balian) biasanya mau kalo dia gimana pasti kesana. Akhirnya kesana dah" (T1.458-461) – The second respondent sought treatment from a Balian because of information and the success of the significant other's treatment.

"Oh, gak ndak. Ibu punya sepupu, sepupu Ibu tuh punya dia kayaknya dia pernah berobat (ke praktek Balian)" (T1.235-236) – The fifth respondent sought treatment from a Balian because of the success of the significant other's treatment.

In addition to the influence of significant others, respondents' beliefs and perceptions of Balian and their practices also greatly influence the decision to switch treatment to Balian. Table 4 shows that the second respondent went to a Balian in addition to the unsatisfactory results of medical treatment because he was used to making Balian treatment an option to heal and achieve well-being. The fourth respondent and the fifth respondent also felt this.

Table 5 below will present each respondent's personal beliefs or perception of the ideal treatment taken into consideration to choose and carry out Balian treatment after medical treatment and compared to trying other alternative treatments.

Table 5. Perception and Belief towards Balian

Respondent	Description
1	Aku harus happy, aku harus nyaman sama orang-orang yang nantinya tu nanganin akunya gitu. Kalo harus berobat tu kek aku happy terus aku bisa disugesti tu kek "Kamu sembuh kok". Kalo aku ditangani sama orangnya (Balian) ini aku mau dan aku tahu aku bakal sembuh kek gitu. Jadi kan kayak aku pulang tu kek jadinya semangat kek "Oh dia (Balian) ngobatin aku, aku bisa sembuh" kayak gitu tu loh. Ya aku harus sembuh juga dengan caraku sendiri gitu dirumah dengan cara yang udah dikasi gitu harusnya gimana gitu (T2.137-
	142)
2	Aku emang e percaya juga sama yang kayak gitu gitu kek <i>niskala</i> (dunia spiritual) gitu aku percaya (praktek <i>Balian</i>) juga gitu (T1.618-619)
3	Tapi kalo orang kayak aku gak terlalu (percaya) sih karena <i>fifhty-fifhty</i> dengan <i>Balian</i> itu ya, percaya gak percaya sih aku (T1.73-74)
4	Tapi dari kitanya sendiri kan, kita itu punya dua jalan karena kita ini orang dari pedalaman atau orang desa lah istilahnya masih ketat lah sama budaya sama tradisi kita di Bali kan istilahnya walaupun kita beda agama gitu (T1.97-99)
5	Makanya kepercayaan Ibu e orang Bali kan biasanya begitu, siapa tau e ada nanti e nasibnya berobat makanya ke e ke Bali (<i>Balian</i>) gitu loh (T1.105-106) Oh gitu. <i>Ndak</i> , percaya. Ibu kesana itu dasarnya percaya, harus percaya 100%. Hm percaya, e kalo <i>ndak</i> percaya (<i>Balian</i>), percaya gak gimana bisa sembuh? Menurut perasaan Ibu gitu (T1.263-265)

After feeling dissatisfied with the results of medical treatment, which eventually became one of the driving factors for respondents to seek treatment from Balian, the next question is whether they get satisfactory results from this Balian treatment. The following are testimonials of the treatment felt by respondents after undergoing Balian treatment, where they feel the results obtained are more effective and quickly visible than when they run medical treatment.

"Nah di tradisionalnya ini tuh keliatan efeknya kak, keliatan e keliatan banget sih efeknya itu ya kayak ya enggak seserem waktu kita ke dokter itu loh dibilang kayak gini-gini gitu tuh enggak" (T2.70-73) Testimony of the first respondent.

"He'eh dah mengering, terus besoknya rutin aku ngisiin (obat Balian) mau ilang, gak ada bekas sama sekali" (T1.403-404) – Testimony of the second respondent.

"Dua kali selesai, sembuh" (T1.485) - Testimony of the third respondent.

"Pernah lah pernah kejadian sekali dua kali pernah, itu selat (jarak) 3 menit atau 2 menit itu langsung hilang (sakitnya)" (T1.82-83) – Testimony of the fourth respondent.

"Ada perubahan e ya ada perubahan berkat ke Balian tu, sembuh jadinya" (T1.178) – Testimony of the fifth respondent.

Health-seeking behavior is the behavior of individuals who bring up several responses when experiencing pain, namely not taking any action, self-medicating, seeking traditional treatment, and seeking modern (medical) treatment to overcome the pain felt (Notoadmojo, 2014). The purpose of health-seeking behavior is that individuals can achieve well-being. According to the American Psychological Association (APA), well-being is happiness, satisfaction, low-stress levels, physical and mental health, and good quality of life. Based on this, to achieve good well-being, individuals

must maintain physical and mental health to achieve satisfaction in life and happiness (Lyubomirsky & Layous, 2013). Referring to this, the Balinese in this study, to achieve well-being from health-seeking behavior, seek medical treatment, and turn to traditional medicine, especially Balian, to overcome the pain suffered.

Many factors can influence the process of forming health-seeking behavior in individuals. Widayati's research (Widayati, 2016) shows that the influencing factors that are significantly correlated with health-seeking behavior are socio-demographic characteristics, economics, and marital status. In line with Hariyanti et al. (Hariyanti et al., 2015) in their research, health-seeking behavior is influenced by several demographic, sociocultural, clinical, perceptual, and individual knowledge factors. The formation of health-seeking behavior is influenced by behaviors that are formed based on knowledge and attitudes and the health system model, which consists of prescriptive characteristics, supporting characteristics, and need characteristics that are influenced by biological, psychological, and social factors (Triyono & Herdiyanto, 2017).

Internal and external factors influence the seeking behavior of each individual. Internal factors influence such as characteristics, beliefs, and individuals' perceptions regarding illness and treatment. Meanwhile, external factors that play a significant role include the influence of significant others' perceptions of healthcare and health insurance systems (Widayanti et al., 2020). Referring to the many factors that can influence the process of forming health-seeking behavior, the factors that often appear and play an important role are individual beliefs, environmental influences, and significant others, as well as perceptions and the availability of health services.

In this study, Balinese beliefs about Balian are essential in their decision to turn to Balian for treatment. Balinese people seek treatment from a Balian rather than other traditional or alternative medicine because they think that if their health problems cannot be solved medically, turning to a Balian can be a solution to healing and achieving well-being. In addition to the findings described above, this is also supported by previous research conducted by (Wulanyani et al., 2020) that the beliefs that grow in Balinese people towards Balian practices are part of a cultural tradition that can help solve their problems that sometimes cannot be solved or cannot be explained scientifically.

Balinese people, whether individuals with traditional or modern perceptions, consider Balian part of the culture, and there is a belief to pass it on to the next generation (Hikmaharyanti, 2019). The findings of Putra and Suwena (Putra & Suwena, 2017) show that the reasons why Balinese people go to Balian practices include the closeness of patients to the Balian who treats them, the same cultural background, the community's belief that they get healing if they seek treatment from Balian and affordable costs.

The environment's and significant others' influence in forming health-seeking behavior is also an essential factor. Balinese people may choose Balian treatment because they are influenced by people around them who already have experience successfully solving their problems when using Balian services. So when they feel that there are health problems that are not resolved, the exposure to positive testimonials of Balian practice from the closest people can be a driving force for the formation of a decision to switch and try Balian treatment. In addition to testimonials of success from significant others, easy access to information about Balian in the environment around the Balinese community, as well as the recognition of Balinese people is still relatively high, can be the

reason for the health-seeking behavior of Balinese people to turn to Balian (Prastika, 2017; Wulanyani et al., 2020).

The Kroeger Model combines three factors influencing a person's decision to determine health services: the disorder's characteristics, individual perceptions, and the health care system (Kroeger, 1983). Referring to this theory, not only beliefs and the influence of significant others, as described above, are determining factors. Other factors play an important role, namely the health service system. Based on the findings, the quantity of unmet medical needs in Bali has decreased in the last five years, but the quality could be more consistent. The shift of medical treatment to Balian by Balinese is due to the inability of medical treatment to meet patients' expectations, especially about the results of medical treatment. They feel that they have carried out the treatment as recommended by experts in medical treatment, but their health problems still need to be resolved. Of course, this is the driving force in the health-seeking behavior of Balinese people to seek treatment at the Balian with the reality that their medical illnesses that cannot be cured by medical treatment can be resolved when undergoing treatment at the Balian. This transition from medical treatment to Balian treatment is a unique attempt by Balinese people to achieve their primary goal of getting healed to achieve well-being.

CONCLUSION

Based on the results of the research conducted, it can be concluded that the health-seeking behavior of Balinese people who undergo a transition from medical treatment to Balian treatment is caused by several things, namely: (1) dissatisfaction with the results of medical treatment, (2) the influence of significant others, (3) individual beliefs and perceptions about Balian medicine and cultural traditions. The primary purpose of this treatment switch is to get healing to achieve well-being in the individual.

REFERENCE

Badan Pusat Statistik. (2019). Unmet Need Pelayanan Kesehatan Menurut Provinsi, 2015-2018.

Badan Pusat Statistik. (2022). Unmet Need Pelayanan Kesehatan Menurut Provinsi, 2020-2022.

Hariyanti, T., Harsono, H., & Prabandari, Y. S. (2015). Health Seeking Behaviour pada Pasien Stroke. *Jurnal Kedokteran Brawijaya*, 28(3), 242–246.

Hikmaharyanti, P. D. A. (2019). TRUST LEVEL OF EDUCATED AMLAPURA PEOPLE TOWARDS BALIAN IN KARANGASEM BALI. *Proceeding International Seminar* (ICHECY), 1(1).

Peraturan Menteri Kesehatan RI No.15 Tahun 2018, (2018).

Khair, N. (2015). Ritual Penyembuhan dalam Shamanic Psychotherapy (Telaah Terapi Budaya di Nusantara). *Buletin Psikologi*, 23(2), 82–91.

- Kroeger, A. (1983). Anthropological and socio-medical health care research in developing countries. *Social Science & Medicine*, 17(3), 147–161. https://doi.org/10.1016/0277-9536(83)90248-4
- Lyubomirsky, S., & Layous, K. (2013). How do simple positive activities increase well-being? *Current Directions in Psychological Science*, 22(1), 57–62.
- Moleong, L. J. (2016). Metodologi Penelitian Kualitatif (Revisi). PT Remaja Rosdakarya.
- Nala, N. (1993). Usada Bali. Upada Sastra.
- Notoadmojo, S. (2014). Ilmu Perilaku Kesehatan. Rineka Cipta.
- Nurhayati, N., & Widowati, L. (2017). The use of traditional health care among Indonesian Family. *Health Science Journal of Indonesia*, 8(1), 30–35.
- Prastika, N. (2017). Yoga Sastra. Dharmasmrti: Jurnal Ilmu Agama Dan Kebudayaan, 17(2), 11–19.
- Putra, I. G. B. A., & Suwena, I. W. (2017). Eksistensi Balian Usada dalam Pengobatan pada Masyarakat Desa Tiga, Kecamatan Susut, Bangli. *Humanis*, 20(1), 1–9.
- Sarwono, S. W. (2017). Pengantar Psikologi Umum (E. A. Meinarno, Ed.; 1st ed.). Rajawali Pers.
- Suatama, I. B. (2019). MULTIKULTURALISME USADA BALI. Widya Kesehatan, 1(1), 11–17.
- Suatama, I. B., Kumbara, A. A. N. A., & Dewi, A. A. S. K. (2019). Commodification of usada bali: between profit-oriented and negotiation of sasana balian. *International Journal of Social Sciences and Humanities*, 3(2), 136–144.
- Sugiyono. (2015). Metode Penelitian Kombinasi (Mix Method). Alfabeta.
- Sukarma, S. (2013). Sistem Pengobatan Bali. Bali Puseh.
- Triyono, S. D. K., & Herdiyanto, Y. K. (2017). KONSEP SEHAT DAN SAKIT PADA INDIVIDU DENGAN UROLITHIASIS (KENCING BATU) DI KABUPATEN KLUNGKUNG, BALI. *Jurnal Psikologi Udayana*, 4(02), 263–276.
- Weck, W. (1976). Heilkunde und volkstum aufBali. Trans. W. Bhadra et al. Jakarta: Bap Bali and Intermasa.
- Widayanti, A. W., Green, J. A., Heydon, S., & Norris, P. (2020). Health-Seeking Behavior of People in Indonesia: A Narrative Review. *Journal of Epidemiology and Global Health*, 10(1), 6. https://doi.org/10.2991/jegh.k.200102.001
- Widayati, A. (2016). Health seeking behavior di kalangan masyarakat urban di kota yogyakarta. Jurnal Farmasi Sains Dan Komunitas (Journal of Pharmaceutical Sciences and Community), 9(2).
- Wulanyani, N. M. S., Wahyuni, K. M., Bajirani, M. P. D., & Immanuel, A. S. (2020). Why do People in Bali Meet Traditional Healer? *Annual International Conference on Social Sciences and Humanities (AICOSH 2020)*, 131–136. https://doi.org/10.2991/assehr.k.200728.029
- Yusuf, A. M. (2014). Penelitian: Kuantitatif, Kualitatif & Penelitian Gabungan. Prenadamedia Group.