

Exploring the Experiences of Patients Undergoing Acupuncture at a Community-based Clinic Using Narrative Analysis

Milagros B. Rabe, MD, MSc, PhD,^{1,2} Janelle P. Castro, PhD, MSN, RN,^{1,3} Macgerald V. Cueto, RMT, MD, MSAHP,¹ Januario E. Sia-Cunco, MD, MHSE² and Celso P. Pagatpatan Jr., DrPH, MSN, RN^{1,4,5}

¹Graduate School, University of the East-Ramon Magsaysay Memorial Medical Center, Quezon City, Philippines

²College of Medicine, University of the East-Ramon Magsaysay Memorial Medical Center, Quezon City, Philippines

³College of Nursing, University of the East-Ramon Magsaysay Memorial Medical Center

⁴College of Medicine, De La Salle Medical and Health Sciences Institute, Cavite, Philippines

⁵Torrens University Australia

ABSTRACT

Background and Objectives. Many patients have received acupuncture treatment to address various health problems and it has been presented in several studies to be effective. However, stories of patients on the use of acupuncture may present some additional information including contextual factors about acupuncture treatment. This study was conducted to explore experiences of patients in a community-based acupuncture clinic on the impact of acupuncture as a treatment modality. In particular, this study aimed to understand how acupuncture has changed patients' lives through a life stories approach, describe how the treatment affected their perceptions about their well-being, and to elicit their views of the acupuncture as an alternative or complementary treatment.

Methods. A narrative inquiry was done using in-depth interviews individually conducted among eight participants, who were selected purposively based on having had at least 12 consecutive acupuncture sessions at a community-based acupuncture clinic. All the interviews were audio-recorded and later transcribed by a professional external interviewer following written informed consent from all the participants. The research protocol was submitted and approved by the Ethics Review Committee of the University Research Institute for Health Sciences. The researchers analyzed the interview transcripts using Murray's narrative analysis approach.

Results. Participants' stories highlighted their personal experiences of how they had come to know about acupuncture, how their experiences have changed their perceptions of the treatment, and how the outcomes of acupuncture treatment have affected their lives. The findings emphasize four narratives: pain relief, acupuncture being complementary to Western medicine, social support, and advocacy.

Conclusion. This study emphasizes qualitative findings that are essential to be considered in the implementation of community-based acupuncture clinics that may help make acupuncture care accessible to community residents as well as maximize the potential of this treatment modality.

Keywords: *acupuncture treatment, patient experience, narrative analysis, community-based clinic*



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Corresponding author: Milagros B. Rabe, MD, MSc, PhD
Graduate School
University of the East-Ramon Magsaysay Memorial
Medical Center, Inc.
64 Aurora Blvd., Barangay Doña Imelda,
Quezon City 1113, Philippines
Email: mbrabe@uerm.edu.ph
ORCID: <https://orcid.org/0000-0001-8606-8775>

INTRODUCTION

Chronic pain is a condition that affects not just the physical and mental health of patients but also their economic well-being. In 2021, the reported prevalence of chronic pain worldwide is about 30%.¹ Pain is an unpleasant sensory and emotional experience; and based on the biopsychosocial model, adversely affects patients' lives if chronic or lasting for more than three months.^{2,3} A systematic review of population-based cross sectional studies in 2019 reported an overall pooled prevalence of 18 % in developing countries.⁴ Low back pain is reported to be a major cause of years of healthy life lost due to disability (YLDs) and more than half a billion people suffer from low back pain worldwide.⁵ In the Philippines, there is a limited number of studies on the prevalence of chronic pain, Lu and Javier reported in 2011 that 10.4% of the general population suffer from chronic pain with an annual incidence of 3.4%. Pain was severe enough to disrupt routine daily work for almost half (48%) of respondents yet, only 80.1% of them received treatment.⁶ When untreated, pain may become increasingly complex in its pathophysiology, and thus can affect multiple aspects of a patient's health, including sleep, cognitive function, mental health and the over-all quality of life, adversely affecting patients' economic status.¹

In addition to Western medicine, acupuncture, a 3,000-year-old healing technique of Traditional Chinese Medicine (TCM) that uses thin needles inserted into the skin to stimulate the body's meridians or energy pathways in order to correct imbalances in energy, is reported to be safe and effective for treatment for many conditions reported by the National Institutes of Health consensus of 1998 and the World Health Organization consultation on acupuncture of 2002.⁷ Currently, it is widely accepted and endorsed in the UK and USA as an adjunct treatment for many conditions. The US National Center for Complementary and Integrative Health (NCCIH) regard acupuncture to be effective for chronic pain.⁸⁻¹⁰

Several studies have reported the effectiveness of acupuncture for a variety of health problems. A meta-analysis of the effectiveness and safety of acupuncture for migraine, using the GRADE tool, was found to be superior to Western medicine.⁹ A systematic review of 29 out of 31 randomized trials reported that acupuncture was significantly more effective for pain control over sham acupuncture and no acupuncture in patients with chronic pain, while a meta-analysis study of 25 high-quality trials reported that acupuncture is not only an effective treatment modality for patients with chronic pain, but also improved the quality of life of patients with cancer and depression.^{10,11}

While numerous international and local quantitative studies have been done to prove its effectiveness, there are a few qualitative studies that document the impact of acupuncture on patients' lives. Most qualitative studies were international studies regarding the impact of acupuncture on

chronic pain, describe the pain relief, and sense of improved well-being that patients experience when they undergo acupuncture.¹¹⁻¹⁴ A qualitative systematic review of 28 qualitative studies by Liu et al. in Australia, selected from a database of 780 studies, and using JBI Qualitative Assessment and Review Instrument (QARI), showed that of the four main themes of patient experiences of acupuncture, two were effects of the treatment on their physical and psychological well-being (feeling of relaxation and calmness, and mind and body effects) and two more — a feeling of last hope and trust prior to the procedures and development of trust with the acupuncturist as their main experiences were related to the patients' beliefs.¹² Based on the study of Chuang et al., patients who respond to acupuncture treatment are reported to have established a trusting relationship with the acupuncturist in response to their expression of empathy, while those who do not respond to acupuncture were not satisfied with the level of reassurance regarding acupuncture safety.¹⁴ None of these qualitative studies investigated the change if any, in the health beliefs of patients, and any social impact that the treatment has had on their lives.

In the Philippines, there is a dearth of studies on acupuncture. In 2012, Dahilig and Salenga reported that the acceptability of complementary alternative medicine is 68% in rural areas and 51.5% in urban areas.¹⁵ With the reported low acceptance of acupuncture as a modality of pain treatment in the country, this study aimed to explore the narratives of patients who underwent acupuncture as a management for various illnesses mostly those suffering from chronic pain. Specifically, to explore how acupuncture has changed their lives through a life stories approach, to describe how the treatment affected their perceptions about their well-being, and to elicit their views of the acupuncture as an alternative or complementary treatment. With an understanding of how acupuncture has affected their lives, their perceptions and beliefs about the treatment modality, it may provide more information on how to increase public awareness and acceptance of this complementary treatment modality.

METHODS

Research Design

This research utilized a narrative analysis design, wherein themes were identified from an analysis of the participants' stories of their experiences.¹⁶ A narrative is an organized interpretation of a sequence of events which involves attributing agency to the characters in the narrative and inferring causal links between the events. It provides us the opportunity to define ourselves to clarify the continuity in our lives and to convey this to others.¹⁷ Further, Polkinghorne states that 'a narrative is a scheme in which human beings give meaning to their experiences of temporality and personal actions,' and the narrative analysis as a method implies a general approach that views the individual within their social environments

as actively conferring meaning onto objects in the world, including themselves and others.^{18,19}

This research primarily used narrative analytical design, wherein themes were identified from an analysis of the patients' stories of their experiences, and the role of the temporal and spatial factors of the research context were explored in order to have a nuanced understanding of the narratives that contribute to why people seek acupuncture treatment in communities. Specifically, the study adopted Murray's episodic interviews, wherein the participant was asked not about his or her whole life story but instead, about specific moments in his or her acupuncture journey.¹⁹ In this case, they were asked about the impact of acupuncture in their lives. A thorough reading of the transcribed narrative precedes both phases. Then from the narratives, focal themes were identified.

Setting

The setting of the study took place at a community clinic located in San Juan, Metro Manila. This clinic was funded by an alumni foundation and was opened by the Graduate School of a private university, in collaboration with the local government's health department. The free acupuncture clinic was held at the community clinic starting in February 2019, paused from March 2020 due to the pandemic and resumed in October 2022 until the present time.

Participant Selection

Prior to the conduct of the study, ethics approval was obtained from the UERM Ethics Review Committee with the approval number RIHS ERC Code: 1543/G/2023/115, which was granted on April 5, 2023. Since the clinic started in 2019, a total of 282 patients have been treated. From the patient's list of all treated patients, a typical case purposive sampling was utilized for this study. In using this type of sampling, we selected participants who underwent acupuncture for at least three months or 12 consecutive sessions, based on the study of Ho et al.¹³ Participants were recruited from the month of May to August 2023. The research assistant explained the purpose of the study and obtained informed consent from each participant in written and verbal format prior to each interview. A total of eight participants were included in the study, and no new participants were recruited after data saturation was reached at the eighth participant.

Researcher Characteristics

The researchers are from the Graduate School of the same university. They are composed of physicians and nurses who are academicians and experienced in qualitative research. The members of the latter have interest in or are practicing Acupuncture, Family Medicine, Social Advocacy, Nursing and Public Health. Furthermore, a professional research assistant, an experienced physician in public health research, was hired. Each of the research team members contributed

their respective points of view in the formulation of the research and analysis of the participants' data and a group consensus was established after thorough discussion.

Research Guide and Data Collection

The researchers used the episodic interview as a method for collecting data in order to contextualize and connect the respondents' meaning-making efforts to the concrete setting where they are receiving acupuncture treatment and the larger socio-cultural context where meaning is produced. More specifically, the interview was conducted by a trained research assistant with a member of the research team for every session, using the guide questions listed in the Appendix. All interviews were conducted during the month of May to August 2023 (Tuesdays between 9 AM to 12 noon), in a private room located in the barangay hall, at the clinic where acupuncture is being done. The duration of the interviews ranged from 23 to 48 minutes. The interview guide focused on the particular participants' experiences of acupuncture starting when they decide to begin acupuncture treatment. They were asked what made them choose to undergo acupuncture, what beliefs and values did they have on their health before they experienced acupuncture, how have these beliefs changed, what significant or critical events or episodes have made an impact on how they saw their health after they started treatments, how did the acupuncture treatment affect their daily tasks, their view of their health and how they view acupuncture as a treatment modality. All interviews were conducted solely by the research assistant in a room separate from where the acupuncture treatments were being done. The acupuncturist who is a member of the research team did not participate in nor observe the interviews. Furthermore, two other researchers, unknown to the participants in the study, observed clinic activities in this barangay clinic that served as an extension work of the University, but did not participate nor observe the interviews. The research assistant transcribed the audio recordings of the interviews, verbatim. It was transcribed using MS Word and each dialogue was numbered, for easier identification and analysis. Patient privacy and confidentiality were maintained by coding each participant using numbers in chronological order. Follow up interviews were conducted, if there were unclear or ambiguous statements from the participants' transcripts for data integrity and accuracy.

Data Analysis

The data analytical approach employed was the Narratives Analysis approach by Murray.¹⁹ This process starts with the thorough reading of the narratives. As soon as the first interview was conducted, the research assistant transcribed the interview and the researchers immersed themselves in the participants' stories. This was followed by a group analysis where they discussed initial impressions and overarching themes from the narratives. As the data collection commenced, the next steps of Murray's approach were simultaneously being done, which were identifying themes and coding the data. The

researchers met regularly, discussed the identified themes and clustered key ideas to come up with more focused themes and to see if the themes were related in one way or another. Also, this was done in order to see whether the themes identified were reflective of the verbatim data and not the researcher's preconceived notions. This enhances the reflexivity of the data analytic process.

The iterative process happened as the researchers sought to see the emergence of focused themes and determined the need for follow-up interviews of some participants to be further clarified about their answers, with additional interviews conducted anew by the research assistant.

In Murray's approach, the researchers then constructed the narrative framework from the individual stories. The researchers then interpreted the coded data and explored the influence of social, cultural, and personal histories of the participants on the narrative framework. After this, the researchers then wrote the findings, using quotes from the narratives to illustrate key points. The last part of Murray's approach was the refinement of analysis. At this point, the researchers did further iterations on the data, going back and forth between the individual narratives to see whether the focused themes reflected in the narrative framework accurately reflected the narratives.

Ethical Considerations and Trustworthiness

After the study objective and protocol were explained, consent for the study participation and recording of the interview was obtained from each participant in verbal and written format prior to the conduct of the interview.

All participants' identifying data were removed by the research assistant to ensure anonymity of the study subjects. All records were kept in a confidential file and all data taken during the interviews were kept anonymous during the recording, transcription, and analysis process such that there were no participant identifiers for all the analyzed data, except to label them as participant 1, 2, and so on.

Narrative analysis of the individual study participants' stories was done in order to derive focal themes at the start, the continuation, and the ending of the treatments for the patients who had undergone at least 12 sessions.

There are various ways done to enhance trustworthiness of this study. Adequacy of information generated was ensured through lengthier engagement with the participants. For some participants, follow-up interviews were conducted during another clinic visit in subsequent treatment sessions. There were also several discussions done with the research assistant to clarify the interview process and context of several vague transcriptions. The acupuncturist also provided inputs about the condition of each of the patients that helped the research team understand better the content of the stories provided by the respondents.

Table 1. Summary of study participants' characteristics

Participant	Age (years)	Level of Education	Occupation
1	72	Post graduate	Retired physician
2	62	College graduate	Retired house-keeping manager
3	31	College graduate	Salesman
4	68	College graduate	Retired nurse
5	67	College graduate	Midwife
6	44	High School graduate	Barangay/ Village health workers
7	60	College graduate	Dentist
8	53	College graduate	Real estate agent

RESULTS

This section is organized into first introducing the demographic characteristics of the participants, then relaying each person's narrative, utilizing pseudonyms for each participant. The stories were set in the context of a small community in Metro Manila, a community where health care services are generally accessible. The section ends with identifying the focal themes for 1) starting/initiation of acupuncture treatment, 2) sustaining the treatment, and 3) ending the treatment.

The demographics of the participants are shown in Table 1. Each participant's narratives are introduced following the table.

Participant 1

Participant 1 is a 72-year-old physician and she first heard about acupuncture treatment from the radio many years back when a former secretary of health talked about this treatment modality. Later, she became more curious about acupuncture and willing to try this treatment as she was still experiencing pain in her cervical areas and other aging-related illnesses. This despite the fact that she underwent physical therapy. But she was adamant about acupuncture:

"Tapos pinapakita ko ang mga pictures [ko] na maraming [needles]. Ay, ano yan? Di yan masakit? Grabe naman ang dami nyang [needles]... mga ganon. So ang una is fear." (P1, lines 33-34)

(Then I showed my pictures with a lot of [needles]. Oh, what's that? Doesn't that hurt? That's too many [needles]... something like that. So, the first thing is fear.) (P1, lines 33-34)

After experiencing several sessions of this treatment, she experienced some relief from pain, and vertigo, and the headaches lessened. But this relief was not immediately felt and she related that her recovery went through a process.

"Nawala yung vertigo ko [at] na lessen ang aking pain na para kong headache na andyan lang palagi, nalessen yon. (P1, lines 39-40)... Pangalawang session

medyo okay na ako... nakakagalaw na ako. (line 70)... Yung vertigo... mga three session. (line 74) (P1, lines 39-40, 70, 74)

(My vertigo got better [and] the pain that felt like a constant headache was lessened. (lines 39-40)... In the second session, I was feeling a bit better... I could already move. (line 70)... The vertigo [got better]... in about three [acupuncture] sessions. (line 74). (P1, lines 39-40, 70, 74)

Her main consideration of trying out acupuncture is the clinic's proximity to her house. In addition, what pushed her to try this treatment modality was the fact that it was free compared to her physical therapy sessions which were expensive. However, she considers both physical therapy and acupuncture as helpful:

"Hindi ko na masyado [macompare]. Since matagal na iyon, di ko na mai-compare." (P1 lines, 168, 169)

(I can't really compare much [one versus the other] anymore. Since it was a long time ago, I can't compare it anymore.) (P1, lines 168, 169)

Since she started these sessions for her arthritis, she has experienced consistent pain relief in response to acupuncture. Eventually, she became advocate of acupuncture and encouraged others to try this treatment

"Actually, meron akong suki sa palengke, sabi ko: Bakit hindi na pumunta dito misis mo? Sabi: 'hindi makalakad eh.' sabi nung isang kasama: 'na stroke daw.' sabi ko: 'i-try niyo kaya yung acupuncture.'" (P1, lines 401-403)

(Actually, I have a regular customer at the market. I said, 'Why doesn't your wife come here anymore?' He said, 'She can't walk.' Then one of the people with him said, 'She had a stroke.' I said, 'Why don't you try acupuncture?') (P1, lines 401-403)

Participant 2

Participant 2 is a 62-year-old retired housekeeping manager who sought acupuncture treatment in the hopes of lessening the symptoms of his movement disorder or motor tics. It was his parents, wife, and children as well as his neurologist who encouraged him to undergo acupuncture. He is currently on medication and undergoing physical therapy as well as *hilot* (massage therapy) that afforded some symptomatic relief of motor tics.

"Bata pa ako, kung saan na ako dinadala ng parents ko - sa pagpapagamot, sa mga albularyo, sa mga ilog, sa mga pamasabe. (P2, Follow up interview, lines 23-24)... Pag may mahusay na manghibilot, magmasabe, dinadala ako ng parents ko doon (P2, Follow up interview, line 36)... Sinabi po sa akin ng mother ko na magpa acupuncture ako. (P2, follow up interview, line 12)... Sinasabi ko (sa Neurologist), sabi niya ok lang

daw yun. Naniniwala din siya sa acupuncture eh." (P2, Follow up interview, line 151;)

(When I was young, my parents took me everywhere—for treatment, to shamans, traditional healers, massage therapists [and the like] (P2, Follow up interview lines 23-24) ... If there was a good traditional healer or masseuse, my parents would take me there (P2, Follow up interview, line 36)... My mother told me to get acupuncture. (P2, follow up interview, line 12)... I told [the Neurologist about it], and he said it was fine. He also believes in acupuncture.) (P2, Follow up interview, line 151)

He has a firm belief that all the treatments he has received will make him well but he thinks that it is the acupuncture sessions that has helped him alleviate the symptoms of his movement disorder and lessened the side effects of his medication.

"Sabi nga ng mga nakakakilala sa akin, 'medyo madalang na iyong sakit mo, ah.'" (P2, Main interview 204)... At saka napapansin nung pamilya ko, ng misis ko, kasi yung misis ko retired nurse, 30 years,... nakita niyang maganda yung ano ko (improvement ko). Sabi niya, 'Tuloy mo lang.'" (P2, Follow up interview, lines 162-164)

(Those who know me [and of my illness] say, Your illness [motor tics] has diminished. (P2, Main interview, line 204)... And my family, especially my wife, who is a retired nurse noticed that my improvement is good. She said, 'Keep it [the acupuncture sessions] up.' (P2, Follow up interview, lines 162-164)

Unlike other participants, he had already been open to acupuncture at the start and had not expressed any fear. Because of the acupuncture clinic's proximity to his residence, he has made it a point to avail of the free sessions being offered. In his perception, the treatments really had helped him maintain the ability to work because since starting the acupuncture treatment, he noticed that the progression of the illness has slowed down. Since he started acupuncture in 2019, he was then able to reinforce his sense of hope and regain the ability to do activities of daily living and be functional.

"Syempre retired na ako, naglilinis ng babay, nagluluto ng tanghalian. Nakakatrabaho ako. Di na ako inaantok." (P2, lines 201-202)

(Of course, I am retired now, so I clean the house, cook lunch. I can work [because] I'm not feeling sleepy anymore.) (P2, lines 201-202)

After his series of acupuncture treatments and after his symptoms have significantly improved and lessened, he is vocal in encouraging others and the public to seek and try acupuncture to alleviate illness and other diseases.

"Sabi ko nagpapa-acupuncture ako, dito lang sa barangay, ine-encourage ko sila eh. Sinasabi ko sa kanila, Pumunta kayo dun, magpagamot kayo." (P2, follow up interview, lines 77-78)

(I tell others [that] I get acupuncture, just here in the community clinic. I encourage them." I tell them, "Go there, get treated.") (P2, follow up interview, lines 77-78)

Participant 3

Participant 3 is a 31-year-old salesman who initially sought acupuncture for fatty liver in November, 2022. Recently, he also consulted the acupuncturist to help control his smoking. He had known about this treatment for a long time, and had previous experience with it. He said he has complete trust in this modality because of the immediate relief it brings him.

"Bago kase ako pumunta rito, ang laki na ng paniniwala ko sa acupuncture... lagpas a decade ago na. Meron kaming kapitbahay sa Antipolo, hindi siya doctor, acupuncturist siya..." Kapag napipilayan kami, siya ang nag-aacupuncture sa amin. Nakita ko instant relief. [Turwing] may pilay ako sa kamay ko tinutuskan nya." (P3, lines 15-18; 57-58)

(Before I came here [community clinic], I already had a strong belief in acupuncture... more than a decade ago. We had a neighbor in Antipolo who was not a doctor but was an acupuncturist... Whenever we experienced sprains, he would perform acupuncture on us. I saw instant relief. [Whenever] I had a sprain in my hand, he would insert the needles.) (P3, lines 15-18; 57-58)

His view of alternative medicine was influenced by his father who also had experience with acupressure and the experience of his cousin who was healed with herbal preparation for fungal infection prescribed by a Chinese doctor.

"Yung father ko very health conscious. Lumaki ako na ayaw nya kami painumin ng kung ano-ano, pain killer at kung ano-anong gamot, basta gamot... Yung cousin ko meron siyang round worm sa kamay at leeg... Bumili ako sa Chinese drug store ng pang fight ng all skin diseases. Alam mo, two weeks niya lang yun ginamit, di na bumalik yoon. Sabi ko, 'ang gagaling ng mga Chinese medicine, iyong way ng pagtreat nila' And then yung father ko, mahilig siya sa acupressure naman. So sabi ko, kung [versus] acupressure, mas effective kung tinutusk mo talaga." (P3, lines 98-99, 87-88, 91-95)

(My father was very health-conscious. I grew up wherein he did not just let us take any kind of medication, painkillers, or any drugs... My cousin had roundworms on her hand and neck... I bought something from a Chinese drugstore that fights skin diseases. You know, she used it for just two weeks, and it never came back. I said, 'Chinese medicine is amazing, the way

they treat things.' And then my father was also fond of acupressure. So, I thought, compared to acupressure, it's more effective if you actually use needles.) (P3, lines 98-99, 87-88, 91-95)

When he learned that there was acupuncture in the barangay, he decided to consult, primarily because it was free.

"Wala po [bayad]... Eto libre na and malapit sa amin. Pero kahit may bayad, willing ako." (P3, lines 183, 173-174)

(None [payment]... This [acupuncture treatment] is free and near our house. But even it has fees, I am willing to pay.) (P3, lines 183, 173-174)

He said that he has full trust in the effectiveness of acupuncture because of his positive experience which is the immediate relief of his symptoms. What also motivates him to take this treatment is the way that the acupuncturist/doctor talks to him.

"Wala [akong hesitation] 100% nagtitiwala ako sa acupuncture... Walang risk sa buhay yung acupuncture. Pero yung epekto ah, pag tinutusk ka ah, talagang ramdam mo talaga... at kahit marami ang tao, aattendan ka agad ni doc, and then, magaan kausap si doc and then, di siya nakakatakot. ...Si doc, very accommodating lalo sa pagsasalita." (P2, lines 135, 137-138, 176-177, 179)

(I have no [hesitation], I trust acupuncture 100%... There's no risk to life with acupuncture. But the effect, when you're being needled, you can really feel it... And even if there are many people, the doctor will attend to you right away, and then the doctor is easy to talk to and not intimidating. ...The doctor is very accommodating, especially when speaking.) (P2 lines 135, 137-138, 176-177, 179)

He considers acupuncture as a procedure that helps his body become stronger, without adverse effects, and because of this, he strongly advocates for it. He says this based on his own personal experience, and from the progress that he saw of other patients who also consulted for other problems. And this treatment made him take care of his health more, so he consults in order to help strengthen his health.

"Yung results talaga yung nagpatibay ng belief ko sa acupuncture... Actually, ako ang pinaka-naghibikayat sa family ko na magpa-acupuncture... Kase may maraming pumupunta dito may mga sakit na eh... Hindi ko hinihintay na may sumasakit sakit bago ako magpagamot, so eto na yung pinaka-nakikita ko na prevention sa mga possible na magiging sakit in the future." (P3, lines 193, 118-122, 142-144)

(The results really strengthened my belief in acupuncture... Actually, I'm the one who encourages my family the most to try acupuncture... Because many people come here already sick... I don't wait for something

to hurt before seeking treatment, so this is what I see as the best form of prevention for possible illnesses in the future.) (P3, lines 193, 118-122, 142-144)

Participant 4

Participant 4 is a 68-year-old female retired nurse, who worked for 35 years in one of the barangays in San Juan. She has been suffering from frozen shoulder and tendonitis. She consulted a physician and underwent physical therapy but did not experience relief until she tried acupuncture, at the suggestion of a midwife colleague at the health center.

"...Kasi nga inirereklamo ko itong kamay ko, masakit, may tendonitis at frozen shoulder. Nagpacheck-up muna ako sa doctor... In-advise ako mag pa-therapy (PT)... Nakailang session ako, Siguro naka lima... Nandoon padin yung sakit." (P4, lines 59, 63, 73)

(...Because I was complaining about my hand, it was painful, I had tendonitis and a frozen shoulder. I consulted a doctor first... I was advised to undergo therapy (PT)... I had a few sessions, maybe around five... But the pain was still there.) (P4, lines 59, 63, 73)

Her curiosity about acupuncture started from seeing it in some Korean TV dramas. Since she didn't get any relief from the usual Western medicine, she tried it as her last resort.

"...Napapanood ko na ito sa Koreanovela... parang naku curious ako.... yun nga nagpa-therapy ako, nag... parang wala paring ano [effect]... kaya sabi ko parang ang last hope ko acupuncture, sabi ko baka makabuti, maganda ang maging epekto sa akin." (P4, lines 87, 92, 140-141).

(...I used to watch this [acupuncture] in Korean drama... and I got curious... I tried therapy, but... it seemed like there was no effect... so I said to myself, acupuncture feels like my last hope. I thought it might help and have a good effect on me.) (P4, lines 87, 92, 140-141).

Aside from these, she mentioned that another reason was that the service was free.

"Unang una, libre... Ang mahal kaya nito sa private." (P4, lines 129, 131).

(Firstly, this is free [in the community clinic]... This is expensive in the private [clinic].) (P4, lines 129, 131).

Because acupuncture has relieved her pain, she now advocates it as a form of treatment because it has lessened her intake of pain medications.

"... ngayon talagang hindi ako umiinom ng pain reliever." (P4, lines 252-253)

(... Now, I don't take pain relievers anymore.) (P4, lines 252-253).

When asked if she had initial misgivings about it, she agreed, but said that she overcame her fear because of the [acupuncturist]'s explanation.

"Oo, kasi, parang, ano bang magagawa nong pag tusok tusok... kasi habang nag gaganyan si [acupuncturist], ine-explain niya eh. Kung ano ung, kung bakit, ... Kaya habang nag gaganyan siya (saan nagtutusok)... pinapaliwanag niya. Kaya naiintindihan mo na." (P4, lines 262-263, 266)

(Yes, because it's like, what could those needle pricks really do... But while the [acupuncturist] is doing it, they explain it—what it's for and why... So, while they're doing it (where they're inserting the needles), they explain it. That's why you understand it.) (P4, lines 262-263, 266)

When asked about whether she would avail of acupuncture even if there was some cost involved, she said:

"Pupunta pa din, kasi nakikita ko na may epekto, at saka ang number one dito yung [magandang approach] ni doctor. Maganda yung kanyang paliwanag, ma eenganyo ka at saka magkakaroon ka ng trust sa tao... kung may tiwala ka sa tao, may magiging magandang result." (P4, lines 160-163)

(I would still go, because I can see the effects, and the number one thing here is the [good approach] of the doctor. The way they explain things is good, and it encourages you. Plus, you develop trust in the person... if you trust the person, the results will be good.) (P4, lines 160-163)

Participant 5

Participant 5 is a 67-year-old midwife who sought acupuncture treatment for her chronic pain. She had a history of dislocated left shoulder joint. Initially she had a fear of needles and was hesitant to try acupuncture treatment. Her fear was founded on the belief that the needles will cause so much pain; however, when she heard a testimony of someone who went through acupuncture treatment from a Chinese doctor, who said that it was not painful, her fear had gone.

"Dati doc, [akala] namin na parang masakit. Pero noong napapanood ko sa interview sa TV noon na hindi naman pala masakit." (P5, lines 34-35)

(Doctor, I had thought before that it was painful [acupuncture]. But I had seen a TV interview about it and it said it was not painful at all.)

Since then, she started convincing patients to have acupuncture treatment. She accompanies patients to their treatment sessions. She also shared that she strongly advocated for the treatment when she saw how acupuncture improved the condition of her relative who has Bell's palsy.

"Maalaala niyo yung pamangkin ko? Yung nagka Bell's palsy. (line 61)... Nirefer namin siya sa [private] ospital, tapos nung natreat na sya doon, pero ngiwi pa

din siya. Noong si [Chinese] doctor, iyong head nila noon, ang nagtutuosok sa kanya, talagang andaming tusok... maganda ang effect, kaya [ginawa] namin na sample siya.” (P5, lines 63–67)

(If you can recall, my niece has Bell’s palsy. We referred her to a private [tertiary] hospital for treatment and management. But her condition did not improve. Then a Chinese doctor treated her with several needles that yielded good results. We often cite her case as a good example of the outcome of treatment.)

Now, whenever she encounters people who divulge health concerns to her, she would promote the acupuncture clinic, citing her own experience of going through the treatment sessions. She also encourages them to try it because it is free in this clinic.

“Ineexplain na namin na hindi masakit. Kasi kami mismo nagpapatungin na doon, sabi namin ‘subukan ninyo, walang mawawala, libre naman, mahal kaya ito sa labas’ [sa private clinics] sabi namin... Kaya sinasamahan namin.” (P5, lines 90–92)

(We often dispel the misunderstanding that the treatment is painful. We cite ourselves too as having regular sessions and encourage them to try it as they will gain a lot from it. The treatment is freely given and costs a lot in private clinics if available there. We also accompany them to the Center.)

When asked about how acupuncture treatment has changed her life, she said that the alleviation of her pain has improved her daily functioning and has lessened her need to take pain medications.

“...Nawawala talaga; narerelieve talaga ako. Pag ka nagacupuncture, narerelieve talaga yung pain na nararamdaman. Kaya pabalik balik ako, kasi pag ano naramdaman ko, pag tusok mo narerelieve kaagad. At hindi naman agad agad bumabalik.... wala [na akong iniinom], pag ganun, di na ako umiinom [ng gamot para sa pain.” (P5, lines 127–29; 131)

(After the acupuncture session, I experienced immediate relief of pain symptoms and it persisted for quite a long time. I don’t feel the need to take pain medications at all. That is the motivation for me to have regular treatments here at the center.)

One of the factors that reinforce her positive experience of acupuncture is her belief that it works. For her, her faith in the effect of acupuncture, or in any other treatment modality that she takes, is what enhances the effectiveness of the treatment.

“Iyong faith ko malakas... iyong may faith ka, parang nawawala talaga yung agam-agam mo. Kasi kung kabiti sa doctor na pupuntahan mo basta may faith ka. Kasi minsan yung iba kasi na pupunta lang pero wala naman silang faith na gagaling sila; kaya hindi

gumagaling. Kinontra ng feelings nila yung dapat na mangyari sa kanila.” (P5, lines 204–207)

(I have strong faith. One’s faith has a strong influence in getting well. It dispels one’s fears and doubts. That is what faith does. Even if one seeks the doctor’s help and undergone treatment too, if faith is lacking, it contradicts the healing process.)

She shared that the acupuncture sessions have given her an avenue to be able to socialize with others. She sees to it that she goes to the clinic and makes this a reason for her to go out of her house. And because the clinic reopened at the middle of the pandemic, it also gave them a reason to “check their health” and see if they have COVID, as the acupuncturists required a swab result before the sessions.

“Kasi mas maganda pagka magkakasama kami.” (P5, line 230) “...Kasi mas maganda pag kamagkakasama kami.” (P5, line 238) “Isang way na din na makalabas kami at saka ok din naman sa amin makapag pa swab. At least alam namin negative kami ganon at saka yung ginhawala na nararamdaman mo after.” (P5, lines 172–74)

(It helps a lot that we are here as a group (during treatment sessions). It is one reason for us to go out and meet. It’s not troublesome to have a prior swab test, at least you know you tested negative as there is a feeling of relief right after.)

Unfortunately, now that the clinic has resumed, as she said, there are some patients who are unable to access the clinic because it is located on the second floor, in contrast to its location in the first floor at Barangay Tibagan when the clinic was operational prior to the pandemic.

“Tapos ngayon, medyo paakyat dito. Kaya yung ibang pasyente pag nagpupunta sa health center sinasabihan ko yung asawa ng isang BHW, dating pasyente nila doctor yun. Kaya lang parang hindi makaakyat dito.” (P5, lines 0–82).

(Now, (with the new clinic location at San Perfecto), one has to go upstairs to get to the clinic. (compared to the old location at Bgy Tibagan), and it may be difficult for some. So when I meet old patients, I encourage them to come here. And I informed the BHW about this possible challenge of going to the second floor in this clinic now.)

Participant 6

Participant 6 is a 44-year-old barangay health worker assigned at the health center where the acupuncture community clinic is located. She sought acupuncture treatment to relieve her body aches and pains, as well as the vertigo that she experiences after her tour of duty. She had her initial doubts and fear about acupuncture and its effectiveness but was eventually enticed to try it because of other health workers and patient positive feedback as well as proximity and it was free.

After initial treatments, she experienced pain relief immediately and since then her initial fears and doubts have changed and is currently having regular acupuncture treatments. She also reported that her vertigo symptoms were relieved as well as her blood chemistry, ability to walk, and well-being have significantly improved.

"...Kaya hindi ako umiinom ng gamot. (P6, line 122)... Pag nagpapa-acupuncture ako (pagkatapos) parang masigla ka. (P6, line 194) ...Hindi na ako sinusumpong [ng vertigo]... kada three months nagchecheck up kami diyan. Ang sugar, cholesterol, uric acid (levels) ko, bumaba. (P6, lines 204-207) ... Dati nagtri-tricycle ako pag-umaga. Ngayon hindi na. Naglalakad na ako." (P6, lines 211-212)

(I don't drink my medications anymore. I feel refreshed right after an acupuncture session. I don't have any vertigo episodes anymore. I have regular blood work and check-ups every three months. My blood sugar, cholesterol, and uric acid (levels) decreased. Currently, I am able to walk to work and not take a tricycle ride unlike in the past.)

She is now a firm believer in acupuncture and found it as a form of self-care. She encourages her husband and advocates to other health workers to try acupuncture as an alternative to medications.

"Yung asawa ko kapag kinukwento ko sa kanya, okay naman gusto rin niya. (P6, line 270)... Sa totoo lang 'yang mga kasama ko hindi 'yan nagpapa-acupuncture. hinikayat ko lang sila." (P6, lines 171-173)

(My spouse is interested to try it out, as I often talk about my experience with him. Truth be told, some of my colleagues here have not tried acupuncture yet. I really encourage them to try it out.)

Participant 7

Participant 7 is a 60-year-old dentist, who is stationed at another San Juan Health Center, and who is being treated for tinnitus and vertigo. Many years ago, she had read about acupuncture, and had also experienced acupuncture in one clinic in Mendiola though she could not recall exactly when it was. She even tried herbal medicines from Ongpin, but decided to also try out this clinic because she wanted to really get better.

"Nagpapa-acupuncture ako dun sa... sa Mendiola (P7, lines 73-74)... Kasi meron na ako noon tinnitus so since hindi na na-cure... kapag nagpapa-check ako parang hindi nacure so parang pumunta... Pumupunta pa ako sa Ongpin (lines 86-88)... Bumibili akong mga herbs tapos iniinom ko. Syempre alam mo naman pag gusto mong gumaling talaga." (lines 92-93).

(I had acupuncture there [at a clinic] in Mendiola because I had tinnitus before. (P7, lines 73- 74)... But,

it did not seem to benefit me, [so] I went to Ongpin (lines 86-88)... I bought herbs there and took them. Of course, you know when you really want to get better [one tries other alternatives].)(lines 92-93).

When she learned from her co-workers about the free clinic here, she decided to try it aside from the fact that it is much closer to her house. She really wanted to get well, so even if her daughter questioned her choice to avail of alternative medicine, she did because she wanted to get better.

"...Sabi daw ng anak ko andali ko raw maniwala sa mga [alternative medicine]. Kasi ang ano ko, syempre ang tao 'pag gusto mo gumaling, minsan nagreresort ka talaga sa [alternative medicine]." (P7, lines 131-33).

(My child actually chided me for easily believing [these alternative options]. In my opinion, if one wants to get better, one will try all possible options, including those [alternative medicine].) (P7, lines 131-33).

Besides, it was even better because it was very near. And that it was helping many patients, not just her, because the acupuncture treatments were free as well.

"...Pwede ko nang puntahan!... ito parang abot-kamay mo lang, bakit hindi 'di ba? (P7, lines 140-41). ...Nakakatulong talaga kung meron talaga tayo nito... kung magbabayad ka, hindi naman labat makaka-afford 'di ba?... Kasi kung hindi, titiisin ko na lang." (P7, lines 245-249).

(I can go there now! It's within my reach, why not, right? (P7, lines 140-41). It really helps if we have this [free acupuncture clinic]. If you have to pay, not everyone can afford it, right? Because if not, I'll just endure it.) (P7, lines 245-249).

Finally, she is of the belief that she prefers to try first the alternative treatments more than Western medicine. She considers it amazing how one point of the body is connected somewhere to affect another part, that manipulation of one part results in healing of the ailing part.

"Ibig sabihin yung katawan talaga natin parang— kasi ang galing nga eh, 'di ba? Ang galing talaga ng mga katawan natin parang crineate talaga siya. Imagine mo kunware may mga points. Kasi sa massage, 'di ba? 'Di ba may points diyan na kapag ginanon mo, hinilot mo (P7, lines 231-232)... Parang— Ewan ko! Ano naman ako, parang mas gusto ko pa nga 'yan kaysa ano [western medicine]." (lines 236 -237)

(It means our bodies are really amazing, right? Our bodies are really amazing, it's like they were truly created [wonderfully]. Imagine if there were points. Because in a massage, right? Aren't there points there that when you do this, when you massage it? (P7, lines 231- 232)... Like— I don't know! It seems [that] I prefer that over, you know [Western medicine].) (P7, lines 236 -237)

Participant 8

Participant 8 is a 53-year-old female real estate agent for more than 20 years, who was diagnosed to have Bell's palsy in 2019. She came to know about the free acupuncture clinic because of her aunt who is a health care worker in one of the Barangays of San Juan City.

Prior to her illness, she worked several jobs, including managing a spa, in addition to her real estate agent work. She believed that it was stress from the work that triggered her illness.

"Yung day na 'yun mainit, tapos parang 'di ko maintindihan. Mainit yung dibdib ko. Parang 'di na ako marunong magmaneho... Sa sobrang bagal, nagbahazard na ako para mag gigive way na yung mga katabi ko. Nakauwi naman ako. Nakapagpark, nakapasok sa bahay tapos okay naman. Natulog ako. Nagpahinga ako sandali, [nag]-iba na yung mukha ko." (P8, lines 42–46)

(That day was hot, and then I couldn't understand, [that] my chest was [also] hot. It's like I didn't know how to drive anymore. Because of my extreme slowness [in driving], I almost caused an accident. The other cars on the road yielded to me. I got home, was able to park, got into the house, and then [I felt that] everything was fine. I slept. I rested for a while, and [then when I woke up] my face has changed.) (P8, lines 42–46)

She immediately went for a check-up at the tertiary hospital where she was diagnosed to have Bell's palsy, and to rule out mild stroke. Her other aunt suggested consulting at a private tertiary hospital, as a charity patient, and the CT scan confirmed the diagnosis of Bell's palsy. She was given medicines to drink, but it seemed to her that her medicines were not working fast enough. She tried acupuncture, on the suggestion of a friend and her aunt who worked at Barangay Tibagan who told her of the free acupuncture clinic given at the Tibagan barangay health center.

"Yung auntie ko kasi may work siya sa Tibagan, yung center. 'Kasi nakuwento 'yun ng kaibigan ko, itry mo sa acupuncture.' Nag-inquire ako, ang mahal pala ng acupuncture! Mga 3.7 [to] 1.8 [K] per session. Sa'n ako kukuha ng ganon kalaking pera? ... Ngayon sabi ng auntie ko, 'Meron kami every Thursday sa Tibagan. Pumunta ka.' ... Ayun. Nung una, kabado ako. First time kasi..." (P8, lines 109–113)

(My aunt works at Tibagan [community health center]. At the suggestion of a friend to try acupuncture, I inquired about it, and it turns out acupuncture is really expensive! About 3.7 [to] 1.8 [K] per session. Where would I get that much money [for it]? Now my Aunt said 'We have it [acupuncture clinic] every Thursday at [the] Tibagan [community health clinic]. Go there.' ... And so, I did. At first, I was nervous, as it was my first time [to try it].) (P8, lines 109–113)

She said that the first acupuncture treatment was very helpful. Although she was initially scared, because it was something new, she decided to consistently have the sessions every Thursday because she felt that it was helping her get well.

"Kinakabahan lang kasi first time, 'di ba? Pero sige subukan, bakit hindi. 'Yun sinubukan ko, gumiginhawa mukha ko, gumaganda!... Gumanda! Bumalik yung mukha ko." (P8, lines 124–125)

(I'm just nervous because it's my first time, right? But okay, let's try it, why not. So, I did, and my face, it [facial paralysis] improved! I got better! My face came back.) (P8, lines 124–125)

In addition, she realized that the acupuncture was complimentary to the medication so she continued the treatments until the pandemic happened.

"Narealize ko na mahalaga pala itong acupuncture. Purwede naman pala pagsabayin yung medication. Actually, natigil ko na rin mga gamot ko eh. Nastabilize yung blood sugar ko, cholesterol ko, tumama na siya. Tapos uric ko, 'di na gano'n. 'Di na rin tabingi yung mukha ko." (P8, lines 133–134)

(I realized that acupuncture is actually important. It turns out that medication can actually be combined [with it]. Actually, [now] I've also stopped taking my medications. My blood sugar was stabilized, my cholesterol normalized. Then my uric acid, it's not like that [high] anymore. My face isn't crooked anymore.) (P8, lines 133–134)

For her and the other patients, the acupuncture clinic gave them the treatment, and also allowed them to be able to support each other – as she said, she noticed how the patients improved. According to her, the acupuncture clinic was something they looked forward to having, as it has given them something to help them get well, as she said:

"Nakikita namin na para bang lahat kami excited pumasok dahil lahat kami gusto gumaling. Lahat kami natuturwa sa isa't isa. Noon hindi. Parang ang lungkot namin, tulala. Sino ba 'tong katabi ko? Ngayon, habang tumatagal—Umabot kaming December eh! December that time ng 2019." (P8, lines 165–167)

(We noticed that we were all excited to come [for acupuncture] because we all wanted to get better. We all enjoyed each other's company. In the beginning, we weren't [like that]. It seemed [that] we were so sad, [and] not mindful [of the others]. Who is this person next to me? We did not notice the passing of time and we eventually reached December. You know, December of 2019!) (P8, lines 165–167)

Because of her experience at the acupuncture clinic, she was also able to change her lifestyle. Whenever she sees patients who have a stroke or Bell's palsy, she recommends

that they also look for this clinic. According to her, the acupuncturists at this community acupuncture clinic are good. She said:

“Sa alam niyo po ba, kapag may nakikita ako na Bell’s palsy, nastroke? Nirerecommend ko dito na mag-pa-acupuncture... Pero nang dahil din dito, natanggal ko yung paninigarilyo ko.” (P8 lines 186–187; 221).

(You know, when I see someone with Bell’s palsy or if they had a stroke, I recommend acupuncture at this clinic... Because of this [experience of acupuncture], I also quit smoking.) (P8, lines 186–187; 221).

In summary, the focal themes of the patients’ stories included narratives of pain relief through acupuncture, that they may not all have widely accepted initially; that is related to narratives indicating their advocacy for acupuncture as a complement to Western medicine, after they experienced pain relief through the treatment; and narratives of their social support for each other to sustain their adherence to the treatments using acupuncture to alleviate or treat chronic pain.

From these individual narratives, four main focused narratives emerged. These narratives are: *pain relief, complementary therapy, social support, and advocacy.*

Narratives on Pain Relief through Acupuncture

The participants shared a variety of illnesses that convinced them to try acupuncture as a treatment modality. Many of these are physical in nature, which affect their ability to function at home or at work.

Most of the participants were experiencing some level of pain and discomfort that had been persisting for quite a period of time. Many of them relayed that they were dissatisfied with their usual treatment because they experienced very little improvement in their physical conditions. Majority of the respondents’ narratives revolved around this dissatisfaction, which compelled them to seek an alternative approach to managing their pain and discomfort.

At first, many of the participants were hesitant to try the acupuncture, primarily due to the belief that it is painful due to the involvement of needles. Some of them had a fear of needles, and that this would cause discomfort and pain.

The themes in the initial storylines revolved around them giving their reasons for seeking acupuncture as an alternative treatment. Though the stories were varied, most of the themes evolved around trying to figure out a way to work around the lack of mobility and functionality that they experience secondary to the pain that they are suffering. Through acupuncture, the participants experienced a relief of pain, which improved their mobility and overall well-being.

Narratives of Acupuncture as Complementary to Western Treatments

All the participants utilized acupuncture as complementary to the existing treatment or therapy that they are undergoing. This is aligned with the recommendations of

the NCCIH, regarding the complementary nature and mechanism of acupuncture for treatment of chronic pain.^{11,20} Majority of the participants were hesitant to try acupuncture treatment at first, but when they tried, it has produced an immediate relief to the discomfort or pain that they are feeling. Most of the reasons for consult were physical in nature such as pain in several areas of the body (e.g., shoulder, joints, muscles, cervical areas), motor tics, Bell’s palsy, tinnitus, and vertigo. There was a narrative, however, that talks about the participant’s need to control an unhealthy behavior such as his smoking. Their experience after trying out acupuncture was generally good and encouraging.

However, when asked whether they would substitute acupuncture with the current Western treatment regimens that they are undergoing, a majority of them agreed that having the treatments were better than taking oral medications, as they were not also exposed to side effects of oral drugs. They consider it something that will augment the effect of the oral drugs to control their pain symptoms, in that it generally lowered their dose of the medicine, hence complementary.

Social Support Narratives

The importance of social support was salient across the majority of the participants’ narratives, and this particular finding is unique to this study of participants’ experiences of acupuncture treatment. One aspect of this social support in this study is the acupuncturist himself. In their stories, the acupuncturist, whom they refer to as “doc” was integral to them sustaining the practice of going for acupuncture. They described this person as someone who listened to them and provided them with a thorough explanation of what is causing them pain or disability, and how the acupuncture is playing a role in their healing process, thereby providing *informational support*, which is a form of social support, allowing the patients to better understand their health condition and thus facilitating better patient adherence to treatment. These healthcare provider behaviors also facilitated the establishment of trust with the patients, which, in turn, gave the patients a motivation to continue with the treatment during the start of the therapy. The finding of a more trusting relationship between the patient and the acupuncturist perhaps leads to better patient adherence to health teaching and advice, that may lead to improvement of their health habits and lifestyle. This is similar to the findings of Liu et al., in that 10 out of the 28 qualitative studies they reviewed, the practitioner-participant relationship plays a vital role in shaping the perceived experiences of acupuncture.¹² The development of a positive rapport between the study participants with the acupuncture practitioners was as a positive reinforcement for their continued treatments, as also reported by Chuang et al., where patients who were treated individually rather than in a group, felt they had a better experience of acupuncture, having had a direct trusting relationship with the acupuncturist compared to that of the group treatment.¹⁴ Ho et al. reported

that in their study, those who responded to acupuncture treatment had a more trusting relationship resulting from their response to the acupuncturist's expression of empathy towards them.¹³ Moreover, the acupuncture treatments in this study were given at a clinic within easy access to their location and for free, therefore the clinic itself is a form of *instrumental support*, because it provided a concrete or material service. Although the present study was done in an urban area, it is similar to the findings of Luu et al. who reported that based on their study, Filipino women in a rural area, who were experiencing poverty, used social networks as a support to access healthcare.²¹ In a resource constrained environment, people who have difficulty accessing health care, do use their social networks to be able to access health services that they can, particularly when it is free. In a sense, it is one demonstration of a public-private partnership because the location of the clinic is provided by the local government unit, but the free service for acupuncture treatment is provided by a private institution of higher education, funded by its alumni.

Lastly, several respondents in the present study relayed that they adhere to the treatment schedule because it provided them the opportunity to interact with other patients. From their socialization with fellow patients, some shared that they get affirmed of the progress that they are making with regard to their illnesses or disabilities. Also, for others, when they see the effect acupuncture has on other patients, it gives them hope that this same improvement will be felt by them if they go on with the treatment. This group setup for acupuncture sessions were unintentional as each session was intended to be dedicated to an individual patient, but the acupuncturist had to accommodate them together because of limited clinic schedule (once a week, four hours per clinic session). This setup, however, proved to be beneficial as the majority of the participants perceive their fellow patients as their social support, particularly in the form of affirmational support.

Advocacy Narratives

As a result of improvement of physical conditions that they were experiencing since starting acupuncture treatment, many of the participants had an improved outlook on acupuncture. This then translated to them advocating for acupuncture to people they encounter in their communities. Whenever they encounter someone with an ailment of any kind, they would encourage them to try going for acupuncture treatment. All interviewed participants had this conviction to advocate for the effectiveness of acupuncture and actively convince others to try it out.

DISCUSSION

Utilizing the key story elements, the researchers came up with a working framework to understand the experiences of the people who decide to undergo acupuncture treatment.

Table 2. Four primary storylines within overarching framework

Exposition	Rising Action	Climax	Falling Action and Resolution
Narratives on pain relief	Narratives on the role of acupuncture as complementary	Social support narratives	Advocacy narratives

The main setting of the stories is the acupuncture clinic that was established in an urban area, situated within the barangay hall of the community. This clinic is free and accessible, which are key to the stories of the participants.

In analyzing the storied lives of participants who undergo acupuncture, the researchers aligned the four primary storylines within the overarching framework of a narrative: exposition, rising action, climax, and falling action and resolution (Table 2).

At the start of all the shared stories, the participants were all experiencing pain and discomfort from the varied health conditions that they had. These participants were compelled by their unresolved pain to seek another way of relief. Moreso, these experiences were accentuated by their dissatisfaction with their existing treatment regimens prescribed by their primary physicians. Their urge to seek an alternative way is stronger than their initial hesitancy to try acupuncture due to fear of needles. This finding aligns with the findings of many studies both qualitative and quantitative regarding the pain-relieving effects of acupuncture.⁶⁻¹⁵ Systematic and meta-analytic studies by Vickers et al. and by Asano et al. discussed the effectiveness of acupuncture in the treatment of chronic pain and non-specific low back pain, respectively.^{10,22} In addition to pain relief, the systematic and meta-analysis study of Liu et al. reported that acupuncture was also an effective treatment of insomnia resulting from chronic pain.⁹

In the rising action of these participants, they begin their journey of undergoing acupuncture. As they go for the sessions, they find it as effective in reducing their unrelenting pain, improving their mobility and overall quality of life. Though this is the case, all of them did not stop their current treatment regimens. They used acupuncture as complementing the Western medicine regimen.

The role of social support then becomes crucial. As participants begin to take acupuncture as complementary to their existing treatment regimens, their trust in the acupuncturist and the emotional bonds that are fostered with their fellow patients make their healing journey much more effective. Furthermore, the support that comes from family and friends are considered as drivers for them to adhere to their therapy sessions. According to Taylor, social support is the 'perception or experience that one is loved and cared for by others, esteemed and valued, and part of a social network of mutual assistance and obligations, and it may come from a partner, family, friends, co-workers, and community ties.²³ The research of Taylor, and Heaney and Israel explain that social support may come in different forms,

such as: *informational support*, where information is provided in order to better understand and thus cope with illness; *instrumental support*, which provides tangible service or financial assistance; *emotional support* which provides warmth and nurturance that reassures the value and importance of the individual; or *appraisal support* that provides one with constructive feedback and affirmation.^{23,24} In particular, emotional support in the form of hand holding of a supportive partner, reduced the recorded skin conductance nociceptive pain transmission in response to painful stimuli.²⁵

Although the socialization of the participants during the group acupuncture set up was reported also in the study of Chuang et al., what was different in this particular study, was that the participants in the present study not only interacted positively during the acupuncture sessions, but that they developed a degree of affirmation and social support that propelled them to adhere to the treatments.¹⁴ The finding of establishing social support amongst and between some participants as supporting their adherence to treatment is a unique finding in this study. Although it may be similar to the report of Chuang et al. that some patients in the group acupuncture treatment felt comfortable with each other that helped them relax during the group treatment sessions, the participants in the present study developed a degree of social support beyond their interactions at the treatment sessions, as they 'encouraged each other to adhere to the treatment and the individual change in health habits'.¹⁴ This is an important finding, as it can be used to foster patient adherence to treatment protocols in the future.

As their health improves, the participants gain more confidence in the effect of acupuncture on their health and well-being. As they gain this confidence, they are more motivated to tell other people about the positive effects of acupuncture. In the resolution phase, these participants become advocates for acupuncture, sharing their stories of relief and transformation to their immediate community. This springs from the participants' positive satisfaction of the acupuncture treatment session rendered weekly. According to the user's satisfaction theory, satisfaction results from an experience of a service or product that exceeded one's expectation. In healthcare, patient satisfaction is a psychological experience resulting from positive patient outcomes in the form of improved general health, eradication of disease, improved patient understanding of the disease, and compliance with treatment, that is the result of the service rendered by healthcare professionals that in this study is the relief of chronic pain with acupuncture treatment.²⁶ Furthermore, the physician's behavior has an optimistic and positive moderating influence in the correlation among healthcare services and patient satisfaction. All these translate to patient adherence to treatment thus improving patient health outcomes. The high favorable participant satisfaction is associated with their advocacy of acupuncture towards others.

Implications

Highlighting the stories of the participants revealed several contextual and social factors surrounding the decisions that they make with regard to choosing to go for acupuncture.

Firstly, the exposure of the participants to acupuncture in the context of family interactions and "word of mouth" from neighbors and other people who helped them make the decision of trying out the therapy amidst their fear of it. This could guide health care providers to develop information and communication strategies for the community members that would help promote a better understanding of alternative and complementary medicine and in what ways may these be helpful for patients to make informed choices.

Secondly, on a social level, the participants maintained the behavior of going to regular acupuncture sessions due to relationships they have built with the acupuncturist and their fellow patients. Trust was an underlying theme that permeated the way the respondents described their interactions with the acupuncturist and the other patients. This implies that trust is an important aspect of the patient-doctor relationship, similar to the findings on a meta-analysis on the positive effects of integrated social support on the final treatment outcomes for drug-resistant tuberculosis (DRTB) patients, and the study of diabetic patients, where a higher doctor-patient trust is a statistically significant predictor of better health outcomes.²⁶⁻²⁸

Lastly, as all participants verbalized in their narratives, the easy accessibility of the treatment was an important factor for their adherence to treatment. This aligns with the value of social support on treatment outcomes similar to the treatment of patients with drug resistant tuberculosis in the study of Wen et al.²⁷ The importance of social support in treatment of the participants in this study is emphasized in the results, six out of eight participants developed social ties with other patients that positively influenced their adherence to treatment.

Limitations

Although there were many patients seen and treated in the clinic, the main limitation was to interview participants who had at least twelve consecutive session treatments by the time the research was implemented, thus selection of the participants was purposive. The research was also conducted only in the clinic area, and only during the time they had come for treatment. There could have been more participants interviewed, but because of the temporary cessation of the clinic during the pandemic (from March 2020 to end of September 2022), many patients who would have fulfilled the requirement of at least 12 consecutive sessions, were lost to follow up by the time the research was conducted. In addition, the participants' characteristics could have influenced the results of the study. Most of them are healthcare workers, and had completed a college education, and these characteristics would have made them more capable of putting a premium on health so that they would be more open to other modes of

treatment if regular medical regimens are unable to alleviate chronic pain. They would also be in a better position to understand the need to adhere to treatment protocols even if it meant at least 12 consecutive sessions of acupuncture treatments, that the study required. These characteristics could have also affected the acceptability or openness to avail of the acupuncture treatment.

CONCLUSION AND RECOMMENDATIONS

The study has shown that acupuncture has affected the lives of those who have availed of it. Half of the participants interviewed were health care workers, who were all aware of the pain of needle pricks, but all of them had changed their belief about the possible pain of needles used in acupuncture because of their experiences with it. In addition, they were able to encourage each other to continue with their treatments, as they were able to provide social support for each other. And that the acupuncturist was able to establish good relationships with the participants, who then were able to follow advice to adapt to a healthier lifestyle. Taken together, these all point to the importance of making the public more aware of what acupuncture is, and how it can help alleviate pain, particularly chronic pain, as well as the importance of providing a holistic approach to treatment.

The unique contribution of this paper, however, does not rest primarily on the effects of acupuncture, to which many studies have already been documented. However, in this study, the manner of providing the acupuncture in a group setting provided an avenue for them to foster a social support system among themselves serendipitously. This proved to be helpful in improving patient health outcomes for the participants in this study. Because the treatment and the results from these treatments take a long time for patients to feel and appreciate, looking forward to the company of other patients who were “cheering” them on made them more adherent to the sessions. This enhanced the impact of the treatment being free, as cost in a resource-constrained situation is often a deterrent to access to treatment. In addition, accessibility of the free treatment, in the sense that it was offered in their locality is another factor.

The researchers recommend that promotion of acupuncture as an effective complementary treatment for chronic pain be made more widely disseminated. It is also recommended that public-private partnerships like this clinic be made more widely known to the public as a possible model or approach, because there are several private institutions that provide training for acupuncture that may then partner with government or other non-government institutions to partake in providing social support for patients who otherwise could not afford relief of their chronic painful conditions. The researchers also recommend for other social science researchers in health, to further take a look at the value of social support and its effect on healing of patients, and their attitude and behavior change as a consequence of their experiences. Lastly,

the researchers recommend that more varied participants particularly to include those who are not healthcare workers, and those who have not completed a college education, be included in the future research, in order to validate the findings of this study in these groups of patients.

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Statement of Authorship

All authors certified fulfillment of ICMJE authorship criteria.

Author Disclosure

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APPENDIX

Interview Guide

1. Can you narrate your story on how you got to know about the acupuncture clinic here in Brgy. San Perfecto?
 - a. How did you know about acupuncture treatment? When did you get to know about this?
 - b. What made you choose to undergo acupuncture treatment? Why did you decide to undergo this treatment?
2. What are your beliefs and values regarding health and treatment before you experienced acupuncture?
 - a. Did you have prior knowledge, belief or experience about acupuncture before your treatment?
 - b. How has it changed since then?
3. Since you started your acupuncture treatment, what are the critical or significant events or episodes that made an impact in the way you see your own self/health?
4. How has experiencing acupuncture changed the way you live your life/ function in your daily tasks? Can you describe specific episodes in your life that would highlight these changes?
5. What are your activities and/or practices that you think may have contributed to your current health status/well-being at the moment?