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Article

A Culturally Grounded Responses to Crisis: The Blaan Tribe's Experience of COVID-19 in Southern Mindanao

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Abstract

This study explores the multifaceted impacts of the COVID-19 pandemic on the Blaan Indigenous community in Southern Mindanao, Philippines. Employing a purely qualitative design through ethnographic fieldwork, key informant interviews, and document analysis, the study examined the cultural, health, and socio-economic challenges experienced by the community from 2020 to 2024. Thematic analysis revealed five major themes: disrupted cultural practices and rituals, altered health-seeking behaviors, erosion of traditional livelihoods, limited access to public health services, and emerging resilience mechanisms rooted in indigenous knowledge. Participants expressed concerns over the loss of communal traditions, economic marginalization, and the inadequacy of mainstream health interventions in addressing their cultural realities. Findings underscore the urgency for culturally grounded public health strategies, inclusive policy-making, and sustainable livelihood support systems. The study contributes to the growing body of research highlighting the intersectionality of health, culture, and indigenous resilience in times of crisis. It emphasizes the need for participatory and culturally respectful responses that empower indigenous peoples, safeguard their traditions, and strengthen community-based support mechanisms for future emergencies.

Keywords: *Blaan Tribe, COVID-19 Pandemic, Cultural Health Practices, Ethnography, Indigenous Communities, Public Health*

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Introduction

The COVID 19 pandemic, while widely recognized as a health emergency, has generated significant ripple effects across social, economic, and cultural landscapes. Upland indigenous communities, especially, have been markedly impacted yet remain underrepresented in broader narratives. A poignant example is the Blaan people of Southern Mindanao, whose pandemic experiences encompass more than physical health concerns—they highlight the convergence of cultural resilience, systemic neglect, and the insufficiencies of uniform public health approaches.

Indigenous populations frequently face heightened vulnerability during public health crises due to long-standing structural inequities—limited healthcare access, unstable subsistence livelihoods, and exclusion from policymaking (King, Smith, & Gracey, 2009). The COVID 19 outbreak intensified these issues, disrupting physical well-being and undermining traditional economic systems, spiritual practices, and communal cohesion. For the Blaan—whose identity is deeply rooted in agriculture, communal rituals, and indigenous healing traditions—the pandemic's impact has been both pervasive and profound.

This study is built on the premise that indigenous perspectives are essential for developing culturally attuned health responses (Gone, 2013). It employs a relativist perceptual approach, which foregrounds indigenous epistemologies and cultural frameworks to examine how the Blaan have interpreted and responded to pandemic challenges. Unlike conventional epidemiological models, this approach values subjective experience, ancestral knowledge, and localized meaning-making as critical to understanding indigenous resiliency and adaptation in crisis contexts (Kirmayer, 2019).

Despite a growing body of literature on the general impacts of COVID-19, a critical research gap persists in examining its culturally embedded effects on specific indigenous communities in the Philippines. Much of the current data remains generalized, offering little insight into how traditional knowledge, spiritual beliefs and community values influence pandemic resilience and response. Moreover, national public health frameworks often fail to integrate indigenous perspectives, thereby creating policies that are culturally misaligned and practically ineffective for marginalized groups.

This study contributes to the literature in several keyways. First, it documents how an indigenous community—specifically the Blaan—experiences, interprets, and navigates a modern health crisis through traditional and contemporary means. Second, it highlights the compounded impacts of the pandemic on indigenous livelihood systems, which are largely dependent on farming, craftwork, and

communal exchange. Third, it reveals how the suspension of traditional rituals and gatherings, driven by lockdowns and social distancing protocols, threatens cultural continuity, collective identity, and social cohesion.

Finally, by capturing the culturally specific perceptions and coping mechanisms of the Blaan people, this study provides practical insights for public health professionals, educators, and policymakers. These insights can inform the development of responsive, inclusive, and culturally grounded health interventions that honor indigenous identities while addressing urgent pandemic-related needs. In doing so, the research advances a more equitable understanding of resilience, vulnerability, and recovery in the face of global disruptions.

The study intends to offer insightful analysis by using this all-encompassing strategy that can guide efficient, polite, and culturally sensitive solutions to handle the significant influence of the COVID-19 epidemic on indigenous upland communities. This is consistent with the general conversation on the need of cultural awareness in public health and initiatives of community involvement. This research intends to:

1. With an eye toward the Blaan tribe especially, look at how the COVID-19 epidemic affects indigenous populations living in upland regions.
2. Look at how these indigenous people view their health, way of life, and financial effects.
3. Examine how conventional wisdom interacts with contemporary interventions reacting to the epidemic.

Methodology

This study employed a purely qualitative research design grounded in an ethnographic framework to explore the lived experiences and cultural interpretations of the Blaan tribe in Southern Mindanao in response to the COVID-19 pandemic. The primary aim was to understand how indigenous worldviews, traditional knowledge systems, and social structures shaped the community's perception and response to the health crisis.

Data were gathered through three primary qualitative methods: in-depth key informant interviews, participant observation, and document analysis. Triangulation methods were integrated to ensure a rich and multi-perspective understanding of the phenomenon under investigation.

From June to August 2023, the researcher lived within the Blaan communities, engaging in participant observation. This three-month immersion allowed for close interaction with the community's daily routines, rituals, and coping mechanisms, offering firsthand insight into how the pandemic disrupted traditional practices,

livelihoods, and communal activities. Cultural rituals, local health practices, and adaptations to public health measures were observed and documented in detail.

A total of 25 key informants were purposively selected based on their relevance and depth of knowledge regarding the community's cultural, health, and social practices. These informants included tribal leaders, local health workers, traditional healers, government representatives, and ordinary community members. The interviews, conducted in the local dialect with the aid of a cultural translator, when necessary, followed a semi-structured format to allow for both guided questioning and emergent insights. Themes such as traditional healing, pandemic beliefs, changes in communal life, and perceptions of modern healthcare systems were explored.

In addition to fieldwork, 37 textual sources—including local health bulletins, government advisories, and culturally relevant literature—were reviewed to support the contextual understanding of the Blaan community's pandemic experience. These documents spanned from January 2020 to March 2024, providing background and supplementary information on policy impacts and official responses relevant to indigenous peoples.

The study site comprised three upland barangays in Southern Mindanao, home to significant Blaan populations. These locations were selected based on their cultural richness, accessibility, and diversity in socio-economic status. Together, they offered a representative lens through which to understand broader Blaan experiences during the pandemic.

All ethical protocols were strictly observed. Prior to data collection, the researcher obtained formal consent from both the Barangay Local Government Units (BLGUs) and the Blaan Tribal Council. Each participant was informed of the study's objectives and ethical safeguards. Verbal or written consent was secured, and confidentiality was maintained by anonymizing all participant information.

Thematic analysis was used to interpret the qualitative data. Field notes, transcriptions, and document excerpts were coded and categorized to identify recurring patterns, beliefs, and culturally embedded meanings. Through this method, the study captured not only the factual impact of COVID-19 on the Blaan tribe but also the symbolic and experiential dimensions of how the community made sense of the crisis within their cultural framework.

Despite pandemic-related limitations, including restricted access to some remote areas and reliance on verbal histories for pre-pandemic context, this qualitative inquiry offers deep, culturally nuanced insights into the ways indigenous knowledge systems and social structures shaped the Blaan tribe's resilience and adaptation in the face of a global health emergency.

Results and Findings

The Blaan Tribe: Cultural Identity and Historical Struggles

The Blaan tribe, one of the major indigenous groups in Southern Mindanao, Philippines, derives its name from the words bla (opposite) and an (people), signifying "the other people" or "counterpart tribe." Historically, they have settled across areas such as Sultan Kudarat, South Cotabato, Sarangani, and Davao, with ancestral territories primarily located near the foothills of Mt. Matutum. For centuries, the Blaan have lived in harmony with their environment, maintaining sustainable farming systems and preserving forest resources, making them natural stewards of ecological balance.

However, the Blaan's history is marked by displacement and cultural marginalization. Colonial incursions, religious conversions, land encroachment, and militarization have repeatedly forced them from their ancestral lands. According to cultural writer Renato Jong, the Blaan continue to experience pressure from armed groups and state-sanctioned development projects that compromise their land rights and socio-cultural autonomy. These displacements have fragmented their settlements and challenged their traditional governance systems, with their tribal leaders—datu—struggling to maintain authority amidst external pressures.

Culturally, the Blaan are rich in material and intangible heritage. Their subsistence economy revolves around hunting, dry-rice cultivation, root crop farming, and food gathering—livelihoods closely tied to their spiritual relationship with the land. Traditional crafts such as mabal tabih (abaca weaving) and fais (brass and copper works) embody both aesthetic value and cultural identity. These crafts, often adorned with symbolic geometric patterns, express cosmological beliefs and environmental awareness.

The Blaan language belongs to the Bilic linguistic group and is related to Tiruray and T'boli, distinct from languages in Central and Northern Philippines. Oral traditions, including epics like The Great Datu Ulo E'el and Datu Ba Sabung, reflect their mythological and historical consciousness. Leadership remains localized, with community-based datu presiding over various neighborhoods, preserving social coherence through customary laws and oral history.

Yet, despite these cultural riches, the Blaan face increasing pressures to assimilate. Many tribal members have moved toward urban areas or adopted modern lifestyles, often abandoning indigenous languages, rituals, and governance structures. While official statistics on the Blaan population remain sparse, estimates suggest there are over 450,000 members dispersed across South Cotabato, Sarangani, Sultan

Kudarat, and parts of Davao. They are further divided into subgroups like the Tagalagad, Tagcogon, Buluan, and Vilanes, reflecting linguistic and geographic distinctions.

The Blaan tribe, despite centuries of displacement and marginalization, continues to maintain a rich cultural identity rooted in land, tradition, and community life. Participant accounts reveal both resilience and grief over cultural erosion:

> *"Dati po, lahat ng kabataan ay marunong maghabi at manghuli ng hayop. Ngayon, mas gusto nila ang cellphone kaysa sa mabal tabih." (Before, all youth knew how to weave and hunt. Now, they prefer cellphones over weaving.) – Participant 7, Female Elder, 58*
>
> *"Ang aming datu ay parang libro ng kasaysayan. Kapag nawala siya, mawawala rin ang kwento ng aming pinagmulan."(Our datu is like a living history book. If he dies, the story of our origins may disappear too.) – Participant 12, Male Leader, 63*
>
> *"Sa taas ng bundok kami nagtago noong unang lockdown. Takot kami sa sakit, pero mas takot kaming mawalan ng lupa." (We fled to the mountains during the first lockdown. We feared the disease but feared losing our land even more.) – Participant 20, Farmer, 38*

These responses underscore the continuing threats to Blaan identity—from digital assimilation to generational gaps and land insecurity—amplified by the pandemic.

Pandemic Vulnerabilities of Indigenous Communities

Pandemics have historically revealed and deepened the vulnerabilities of indigenous communities. As emphasized by Smith and Sharp (2015) and King et al. (2017), indigenous populations often suffer disproportionate morbidity and mortality due to intersecting factors such as limited healthcare access, poor living conditions, and marginalization from national health systems. These vulnerabilities were starkly evident during COVID-19, where structural inequalities left many indigenous groups without adequate medical services or culturally appropriate information.

Global data reveal a troubling trend: out of 195 countries, only nine documented COVID-19 mortality rates by indigenous identity (UN Permanent Forum on Indigenous Issues, 2021), pointing to a systemic gap in data-driven policy. Moreover, age and comorbidities—though crucial determinants of COVID-19 outcomes—do not fully capture the risks faced by indigenous populations, whose social vulnerabilities amplify exposure and impact.

This study of the Blaan responds to this gap by highlighting not only health outcomes but also the socio-cultural implications of the pandemic. The lack of targeted responses for groups like the Blaan undermines both epidemiological understanding and public health efficacy.

Participants described the pandemic as a time of uncertainty and disconnection from basic services. Their responses reflect systemic neglect and cultural misalignment in health messaging.

> *"Hindi po namin maintindihan ang mga bilin ng gobyerno. Walang nag-translate sa amin. Ang alam lang namin, bawal lumabas." (We didn't understand government instructions. No one translated for us. We only knew we weren't allowed to go outside.) – Participant 5, Community Mother, 29*
>
> *"May mga namatay dito, pero wala pong doktor. Ang hilot lang namin ang tumulong."(People died here, but there were no doctors. Only our traditional healer helped.) – Participant 11, Traditional Healer, 49*
>
> *"Wala kaming koneksyon sa health center. Ang tingin sa amin, parang wala kaming karapatan sa serbisyo." (We had no connection to the health center. It's like we don't deserve basic services.) – Participant 16, Youth Leader, 22*

These reflections highlight both infrastructural gaps and cultural disconnects that rendered the Blaan community invisible in the pandemic response framework.

Cultural Understandings of Health and Illness

Health perceptions among indigenous peoples like the Blaan are deeply rooted in cultural and spiritual frameworks. Unlike biomedical models, indigenous health systems often merge physical, emotional, environmental, and ancestral dimensions. This aligns with Arthur Kleinman's (1980) theory of explanatory models, which underscores that individuals interpret illness through culturally constructed narratives and respond with culturally specific practices.

For the Blaan, disease is not merely a biological dysfunction but a disruption of cosmic balance, often addressed through rituals, herbal medicines, and the guidance of elders or traditional healers. These practices reflect a holistic worldview that contrasts with formal public health approaches. Paul Farmer (2004) builds on this by situating cultural beliefs within broader structures of inequality, describing how structural violence—poverty, displacement, and systemic neglect—shapes indigenous health behaviors and outcomes.

Byron Good (1994) furthers the discourse by emphasizing the importance of understanding patient narratives in their cultural context. For the Blaan, storytelling,

mythology, and communal memory frame not only responses to illness but also resilience in the face of crises. Recognizing these cultural foundations is essential for any meaningful health intervention within the community.

The Blaan's worldview sees health as interconnected with nature, spirits, and communal harmony. COVID-19 was often perceived through a spiritual-cultural lens.

> *"Hindi lang ito sakit. Ito ay galit ng kalikasan sa mga tao na sumisira sa lupa." (This is not just an illness. It is nature's anger at people who destroy the land.) – Participant 3, Spiritual Elder, 65*
>
> *"Nag-alay kami ng ritwal para maprotektahan ang aming pamilya. Mas panatag kami doon kaysa sa gamot na di namin alam." (We performed rituals to protect our family. We felt safer with that than with medicine we don't understand.) – Participant 15, Woman Healer, 41*
>
> *"Ang gamot sa amin ay hindi lang tableta. Kailangan buo—katawan, isipan, at kalikasan." (Medicine to us is not just tablets. It must be holistic—body, mind, and nature.) – Participant 23, Farmer, 33*

These statements affirm that effective health responses in indigenous settings must incorporate cultural beliefs and spiritual practices.

Economic Disruption and Livelihood Loss

The pandemic has compounded long-standing economic vulnerabilities among indigenous groups. For the Blaan, whose livelihoods are intimately tied to land, nature, and traditional crafts, the disruption caused by COVID-19 was not merely financial—it was existential. Coulthard (2014) argues that indigenous economies are not only material systems but also cultural ones, intertwined with identity, knowledge transmission, and community cohesion.

Lockdowns, mobility restrictions, and health risks severely disrupted the Blaan's capacity to engage in swidden agriculture, forest gathering, and artisan trade. Brosius (2010) warns that when traditional livelihoods collapse, so too does the intergenerational transfer of skills and knowledge, threatening the community's social fabric. Furthermore, exclusion from mainstream economic safety nets and limited digital infrastructure marginalized Blaan families from pandemic-era recovery programs.

This economic precarity, in turn, affected food security, access to healthcare, and mental well-being—demonstrating the cascading effect of livelihood loss in indigenous communities.

Lockdowns and restrictions severely disrupted the Blaan's livelihoods, with cascading effects on food security, income, and cultural roles.

> *"Nabubuhay kami sa paghahanap ng ugat, palay, at saging. Pero noong lockdown, hindi kami makapunta sa gubat."(We survive by gathering roots, rice, and bananas. But during the lockdown, we couldn't go to the forest.) – Participant 4, Elder Farmer, 60*
>
> *"Dati po may kita kami sa pamamalengke ng habi. Ngayon, wala nang bumibili kasi sarado ang bayan."(We used to earn from selling woven cloth at the market. Now no one buys it because the town is closed.) – Participant 14, Weaver, 45*
>
> *"Nagkakautang kami para sa bigas. Hindi sapat ang ani, at walang ayuda mula gobyerno."*
>
> *(We're in debt just to buy rice. Our harvest isn't enough, and we received no government aid.) – Participant 19, Family Head, 36*

These accounts confirm the deeply interwoven relationship between land, culture, and economy—and the vulnerability of indigenous subsistence systems during global crises.

Cultural Preservation and the Role of Culturally Responsive Interventions

As external crises threaten indigenous ways of life, the role of culturally sensitive interventions becomes paramount. Scholars such as Smith (2013) and Chandler and Lalonde (1998) argue for health and development strategies that incorporate traditional knowledge systems and empower local decision-making.

In the context of COVID-19, public health campaigns that excluded indigenous languages or ignored traditional healing practices often failed to gain trust. For the Blaan, integrating customary healing, community consultations, and rituals into health interventions not only enhances effectiveness but affirms cultural identity. UN General Assembly (2015) emphasizes that respecting indigenous epistemologies leads to better community engagement and health outcomes. Similarly, Chandler and Lalonde (1998) highlight that when communities have autonomy over their health strategies, outcomes are more sustainable and culturally congruent.

This study affirms that cultural preservation is not merely a matter of heritage, but a strategy of survival. Supporting the Blaan's resilience requires interventions that align with their worldviews, livelihoods, and communal values—not imposed models but co-designed solutions grounded in respect, reciprocity, and relevance.

Participants called for development approaches that respect their knowledge, practices, and autonomy. Many felt that external responses overlooked what they value most.

> *"May sarili kaming paraan ng pag-alaga sa may sakit. Sana kinilala nila iyon, hindi kami hinusgahan." (We have our own way of caring for the sick. I wish they had respected that instead of judging us.) – Participant 2, Tribal Midwife, 54*
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> *"Ang pinakamagandang tulong ay iyong tanungin muna kami bago gumawa ng programa."*
>
> *(The best help is to ask us first before making a program.) – Participant 10, Youth Organizer, 27*
>
> *"Kung gusto nilang tumulong, dapat kasama kami sa pagpapasya. Hindi pwedeng laging sila lang ang may alam."(If they want to help, we should be involved in decision-making. It shouldn't always be them who know everything.) – Participant 21, Local Datu, 61*

These insights support the call in literature (Smith 2013; Chandler & Lalonde 1998) for co-designed, community-led solutions that embed cultural identity within health and development efforts.

Discussions

This study explored the multidimensional impact of the COVID-19 pandemic on the Blaan indigenous community in Southern Mindanao using a qualitative, culturally responsive approach. Through in-depth interviews, immersion, and document analysis, several key themes emerged: cultural disruption, health perception, economic vulnerability, exclusion from systems, and resilience. These findings underscore the pandemic's role as both a public health crisis and a catalyst for exposing deeper structural inequalities faced by indigenous communities.

Cultural Disruption and Identity Erosion

The COVID-19 pandemic significantly intensified long-standing threats to the cultural integrity of the Blaan people. Health protocols such as lockdowns, curfews, and social distancing directly impeded communal gatherings, intergenerational rituals, and the informal transmission of knowledge—core aspects of indigenous cultural continuity. Skills such as mabal tabih (traditional weaving), hilot (indigenous healing), and udul (oral storytelling) faced a noticeable decline as physical proximity between elders and youth was curtailed. These findings affirm the argument of Smith (2013), who contends that colonial and modern interventions often silence indigenous knowledge systems by disrupting their natural modes of transmission. Similarly, Chandler and Lalonde (1998) argue that cultural continuity—especially in youth engagement with traditional practices—is a critical determinant of indigenous well-

being. Without active preservation efforts embedded in emergency response systems, pandemics can accelerate cultural erosion, leaving communities like the Blaan at greater risk of identity fragmentation and loss of ancestral memory. This underscores the urgency of including cultural safeguarding in long-term resilience frameworks for indigenous communities.

Health Perceptions and Indigenous Worldviews

Health, for the Blaan, is not limited to the absence of disease but is a dynamic balance between physical well-being, spiritual harmony, and environmental alignment. This holistic view aligns with Kleinman's (1980) theory of explanatory models, which proposes that communities interpret illness through culturally defined beliefs and practices. Among the Blaan, COVID-19 was not simply perceived as a virus but also as a spiritual disruption, requiring ritual offerings, plant-based medicine, and ancestral guidance. The reliance on traditional healing was not rooted in ignorance of biomedical science but in a distinct epistemology grounded in generations of lived experience and spiritual understanding. However, the public health response largely failed to acknowledge this worldview. As noted by Kirmayer (2019), indigenous healing systems are often marginalized in favor of universal biomedical models that neglect local narratives. This lack of culturally adapted communication—combined with the absence of translated health advisories—led to misinformation, fear, and reduced compliance with government mandates. The Blaan case reflects the pressing need for health communication strategies that are linguistically and culturally congruent with indigenous populations.

Livelihood Vulnerability and Economic Fragility

The economic consequences of the pandemic were deeply felt among the Blaan, whose subsistence-based livelihoods depend heavily on forest gathering, small-scale farming, and traditional crafts. Travel restrictions and market shutdowns disrupted food supply chains, impeded income-generating activities, and constrained access to essential goods. These disruptions resonate with Brosius (2010), who argues that when indigenous livelihoods are interrupted, cultural practices and ecological relationships also suffer. For the Blaan, livelihoods are not merely economic; they are cultural acts that reinforce identity, transmit knowledge, and maintain social order. Buncag (2022) further explains that indigenous economies are tied to collective stewardship and community reciprocity, not individual profit. When income from weaving or farming disappears, so too does the structure of communal roles, ritual responsibilities, and the transmission of ecological knowledge. Compounding the problem was the

community's limited access to government relief programs. Their invisibility in census-based aid distribution reflected a broader structural neglect, echoing the findings of Anderson et al. (2016) who emphasize that indigenous communities are often excluded from mainstream recovery efforts due to lack of data disaggregation and culturally blind policymaking.

Exclusion from Governance and Public Health Planning

The Blaan community reported minimal involvement in pandemic-related decision-making processes. Tribal leaders were rarely consulted, and health responses were designed without consideration of indigenous realities. This disconnect aligns with observations by the United Nations Permanent Forum on Indigenous Issues (2021), which highlights that in most global contexts, indigenous peoples were not meaningfully included in COVID-19 governance. In the Blaan case, this exclusion fostered mistrust, with some participants expressing skepticism toward government interventions that neither acknowledged traditional leadership nor addressed cultural priorities. The top-down nature of public health policies resulted in confusion and rejection, particularly when programs conflicted with traditional practices. Moreover, the absence of ethnicity-specific health and economic data prevented targeted support, reinforcing historical patterns of marginalization. As Bonoan et al. (2021) point out, meaningful inclusion of indigenous perspectives in governance structures is not just a matter of equity, it is essential for the efficacy and relevance of public health interventions.

Cultural Resilience and Adaptive Strategies

Despite these challenges, the Blaan community displayed remarkable resilience, rooted in cultural identity, spiritual practice, and social cohesion. Elders adapted rituals to smaller group settings, herbal knowledge was revitalized, and informal education continued within household units. These adaptive practices mirror what Chandler and Lalonde (1998) call "cultural continuity" as a buffer against external disruption. Rather than abandoning tradition, the Blaan innovated within its framework, integrating safety measures into their healing and communal activities. This resilience is often overlooked in formal disaster planning, yet it offers valuable lessons. As emphasized by Gone (2013), indigenous responses to crisis are most effective when grounded in cultural logic and self-determination. In the face of structural exclusion and economic adversity, the Blaan turned to community-centered strategies that reaffirmed their identity and ensured cultural survival. Their experience

demonstrates that culturally grounded responses are not only more sustainable but also more effective in promoting collective well-being during emergencies.

Synthesis and Broader Implications

The findings of this study highlight the intersectional nature of vulnerability in indigenous communities during health crises. For the Blaan, the COVID-19 pandemic exposed not only health-related risks, but also deep-seated issues related to cultural preservation, economic marginalization, and political exclusion. The experience of the Blaan tribe reveals that public health and development interventions must be inclusive of indigenous voices, respectful of traditional knowledge, and aligned with local realities.

Importantly, the study fills a gap in national and regional literature on how pandemics affect specific indigenous groups in the Philippines. It reinforces the need for culturally competent health systems and community-driven approaches to policymaking. Sustainable solutions must be grounded not just in modern science but also in cultural understanding, partnership, and mutual respect.

Conclusion

This study explored the lived experiences of the Blaan indigenous community in Southern Mindanao during the COVID-19 pandemic through a culturally grounded, qualitative lens. The findings reveal that the pandemic not only posed a public health threat but also exacerbated long-standing structural inequalities, disrupted traditional livelihoods, and challenged the cultural integrity of the Blaan people.

Culturally, the Blaan maintained a holistic understanding of health—one deeply rooted in nature, spirituality, and community. The onset of COVID-19 was interpreted not only as a biomedical event but also as a spiritual imbalance, prompting the use of traditional healing rituals alongside selective engagement with modern medicine. However, the lack of culturally appropriate health communication and the absence of indigenous language support alienated many community members from accessing critical services. This reinforces the need for localized and culturally responsive public health frameworks in indigenous contexts.

Economically, the pandemic disrupted the Blaan's subsistence-based livelihoods—particularly farming, gathering, and weaving—exposing the fragility of traditional economies when external crises limit mobility and market access. The lack of direct government support, compounded by exclusion from mainstream relief systems, forced many households into deeper poverty and indebtedness. These effects were not only financial but also cultural, as the interruption of traditional economic roles weakened intergenerational knowledge transfer and community cohesion.

Socially, the prohibition of gatherings and rituals significantly affected the transmission of oral traditions, the authority of tribal leaders, and the community's spiritual practices. The findings affirm that cultural preservation and health resilience are interdependent in indigenous settings. The cultural narratives, leadership structures, and spiritual beliefs of the Blaan must be acknowledged not as obstacles to modern health interventions but as foundational to their identity and coping mechanisms.

Ultimately, this study affirms that the impact of the pandemic on the Blaan tribe cannot be fully understood without accounting for the complex interplay of culture, identity, and marginalization. The absence of culturally inclusive data and policy responses has only deepened their invisibility within national crisis frameworks. It is therefore imperative for government agencies, NGOs, and health institutions to co-create solutions with indigenous communities—solutions that integrate traditional knowledge systems, ensure linguistic inclusion, and restore trust through meaningful participation.

This study contributes to filling a critical gap in literature on pandemic impacts in upland indigenous communities in the Philippines. It calls for future research and policy efforts that elevate indigenous voices, recognize cultural epistemologies, and ensure that no community remains unseen or unheard in the face of global emergencies.

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Conflicts of Interests

The author declares that there are no conflicts of interest regarding the publication of this paper.

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