4-29-2020

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Understanding Haitian Immigrants Health Practices

A Senior Capstone Project

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Abstract

Due to the growing population of Haitian immigrants in the United States, it is important to increase nurses’ cultural competency by understanding Haitians’ health practices as they may differ from western medicine. Google scholar and online databases through Northern Illinois University’s online library were used to access research articles regarding factors related to the health practices of the Haitian people. Factors include the use of religious practitioners for management of chronic conditions, preference for traditional remedies over western medicine, mistrust of healthcare professionals, and cultural barriers, such as language.
Introduction

Migration to the United States increases due to economic, environmental, social, and political factors. Nursing is a career that seeks to provide safe, quality care for patients, and nurses are expected to respond to the needs of clients from different ethnicities and cultures. Culture is a learned behavior that includes a set of beliefs, values, and assumptions shared amongst a group of people and transmitted across generations (Degazon & Perdue, 2018). Immigrants’ ethno-cultural backgrounds influence their health practices, which may not reflect that of western medicine. Therefore, it is important to increase nurses’ cultural competency to create a milieu that accommodates the cultural needs of their clients in a medical setting.

Haitians include the fastest growing Caribbean immigrants’ populations in the United States (Schulz, J. & Batalova, J., 2017). According to the Census Bureau, there is about 830,000 Haitians living in the United States (Allen et al., 2013). The largest communities are located in Miami, New York City, and Boston, with some Haitians choosing to move to other states including Illinois. Due to political instability, endemic poverty, and natural disasters, Haitians remain in the United States and migration continues to increase. They are often uninsured due to lower rates of public and private healthcare coverage as a consequence of unemployment and low-income jobs. In addition to financial constraints on providing healthcare, cultural factors such as, religious beliefs, health attitudes, and language barriers are also considered. Due to vast migration of Haitian immigrants to the United States, this paper analyzes the cultural factors affecting Haitian immigrants’ healthcare practices.

Haiti

Haiti is a country located in the Western hemisphere between the Caribbean Sea and North Atlantic Ocean. It shares about one-third of the island of Hispaniola, west of the
Dominican Republic. Majority of its population include descendants of African slaves, who won independence from France in 1804. Its economy thrives on agriculture, forestry, and fishing, with agriculture being the largest sector despite only one third of the land being suitable for cultivation (Ferguson et al., 2020). Due to its location, Haiti is prone to earthquakes and tropical storms. This causes soil erosion from deforestation. Over the centuries, Haiti have become susceptible to chronic poverty due to economic, political, and social difficulties, as well as natural disasters. On January 12, 2010, an earthquake of a magnitude of 7.0 struck Haiti. Approximately 300,000 citizens were injured and an estimate of 220,000-300,000 were killed. Homes and institutions, such as hospitals, airports, and schools were severely damaged, thereby propelling migration to the United States (PAHO/WHO, 2019). In 2010 there was an estimated 587,000 Haitian immigrants in the United States, which increased by 89,000 in 2015 ((Schulz, J. & Batalova, J., 2017).

**Health and Welfare**

According to Durham et al. (2015), “Haiti is the poorest country in the Western Hemisphere and one of the highest aid-recipient countries in the world. This extreme poverty reflects on social indicators such as literacy, life expectancy, infant mortality, and child malnutrition.” The Mortality, Morbidity, and Service Utilization Survey (EMMUS-V) reported that life expectancy at birth is estimated to be 62 years. It also estimates that Haiti has a higher incidence of HIV as compared to other countries in the Western Hemisphere with a prevalence rate of 2.2 %. The prevalence rate of acute malnutrition amongst children under the age of 5 is 5% and 22% of chronic malnutrition. This contributes to a higher infant mortality rate than any other country in the Western Hemisphere. Due to inadequate housing and living conditions, there is an increasing prevalence of infectious and parasitic diseases. These infectious diseases
continue to cause deaths in Haiti. An undersupply of safe drinking water from lack of storage systems, chronic shortage of healthcare personnel, and lack of medical resources also contribute to the death toll. There is a high incidence of mental health problems amongst the Haitian people caused by exposure to trauma related to political violence, socioeconomic hardship, cholera epidemic, and natural disasters.

**Religious Beliefs**

Most of the Haitian people’s religious beliefs include a combination of Judeo-Christian doctrines and indigenous beliefs giving rise to “Voodoo”; one of the most popular religions in Haiti. Voodoo believes in the worship and possessions by spirits that was first introduced by African slaves in the 16th century and modeled by the Dahomean, Kongo, Guinean, and other African ethnic groups. The Africans were later forced to convert to Christianity by their slavers; however, most of the characteristics of voodoo are preserved today (Cavana et al., 2013; McAlister, 2020). The Haitian people identify voodoo as a powerful force that allows themselves to understand and to be influenced by a larger spiritual context. Spirits are believed to guide the living and to interact with them (Auguste & Rasmussen, 2019). There are classes of spiritual beings in voodoo. “Iwa” or little angels are a part of the lowest rank and are able to communicate with the living or voodoo practitioners, such as Hougans and Mambos directly. “Le Bon Dieu” is the God of the Christian bible that creates the universe and the spirits which help govern the living (McAlister, 2020).

Most of the Haitian people believe that not all illnesses, like mental illness, can be treated by medical doctors. Mental illnesses are believed to be caused by God and other spirits; therefore, they believe medical professionals cannot manage the signs and symptoms. They often seek assistance from Hougans and Mambos to manage psychological manifestations by
interacting with spirits. Manifestations are often distinguished between problems of the *tet* (head) and problems of the *ke* (heart). Manifestations of the head include forgetfulness, poor concentration, and worry, while manifestations of the heart include emotional and physical distress (Auguste & Rasmussen, 2019).

In western medicine, major depressive disorder includes an array of somatic symptoms, such as headaches, back pain, feelings of emptiness, and fatigue; however, Haitian people attribute these symptoms to *depression mentale*; a health disorder commonly associated with malnutrition or *malady moun fe mal* (magic used by envious individuals to hurt others). They believe that not all illnesses are individualized but may be caused by possession of evil spirits by envious individuals. Voodoo practitioners, family members and social support systems are preferred in managing *depression mentale* over mental health professionals (Auguste & Rasmussen, 2019).

Hallucinatory and delusional symptoms are usually indications of psychotic disorders in western medicine, but Haitians reject this as contradictory (Auguste and Rasmussen, 2019). In Western medicine, for example, voices, auditory hallucinations, and disorganized speech are characteristics of schizophrenia; however, it is identified as a way to communicate with spirits by many of the Haitian people. Therefore, nurses and other members of the health care team should be aware of these practices, so when they are being displayed by the clients they will not be misdiagnosed.

Cavanna et al. (2010), also found that Haitian patients attribute epileptic seizures to possession of voodoo spirits. Most of the patients had also been seen by a mambo prior to seeking medical help. Often, the mambo interpreted the epigastric aura followed by complete loss of consciousness and convulsions as voodoo spirit possession. Patients, however, often
report a decrease in seizure frequency when correctly diagnosed and managed with antiepileptic drugs (Cavanna et al., 2010).

When caring for individuals with epilepsy or mental illnesses, the healthcare team must consider the use of cultural and religious beliefs to unexplainable occurrences. These beliefs help nurses and physicians to understand why Haitian immigrants may choose to avoid seeking medical help from mental professionals. It also reduces the incidence of misdiagnosing individuals with mental illnesses.

Health Attitudes and Service Utilization

Haitians prefer the use of traditional cultural remedies over traditional western medicine, which limits their use of health services in the United States (Jennifer et al., 2013). Haitian immigrants are more likely to depend on the advice given by family and friends and homemade remedies consisting of herbs and exotic plants to manage common health conditions. Often, herbal remedies include young leaves and shoots, roots, stems, bark, and flowers. Plant extraction is favored over other methods in preparation of herbal medicines (Volpato et al., 2009). Juice extraction and infusion are other forms of preparation. Juice extraction is commonly used for topical applications for conditions, such as rashes. Baths containing the herbal medicine are also given to children as the Haitian people believe that this application is adequate in treating rashes caused by measles and smallpox. It is also used to alleviate itching and to treat skin boils (carbuncles) caused by infection (Volpato et al., 2013). Baths are often prepared with different species of plants, such as Chenopodium ambrosioides and Momordica. Decoction of leaves and aerial leaves are left to cool and then added directly into the water. Ingestion of herbal medicine is used to treat gastro-intestinal afflictions, such as stomach pains. Other therapeutic uses include asthma, colds, vaginal infections, and menstrual disorders.
Haitian immigrants also choose to avoid healthcare services due to their mistrust of healthcare providers. Reported feelings of fear and dread related to detainment and deportation by illegal Haitian immigrants make it difficult to access those services (Jennifer et al., 2013). Many Haitian immigrants are undocumented because they were able to cross the borders into the United States illegally or their permission to stay may have expired. As a result, they are least likely to use health care services despite being eligible for emergency medical services, immunizations, and treatment for the symptoms of communicable diseases (Degazon & Perdue, 2018). Focus groups of Haitian immigrants also reported that they have had successful experiences with traditional remedies. A shortage of health providers in Haiti has also inspired many Haitians to manage their health concerns without medical assistance (Allen et al., 2013). Western medicine is often the last resort when adverse outcomes cannot be resolved elsewhere.

In addition to herbal medicine, there are also cultural practices regarding the use of colostrum amongst Haitian mothers. Colostrum is a nutrient-rich secretion, often yellow and thick, from the mammary glands prior to the release of breast milk. Some Haitian mothers believe that it should not be given to their newborns due to its color and texture. (Lauredent, Eveillard & Kalve, 2016). Traditional practices include the administration of “lok”, a purgative that contains a mixture of bitter tea leaves, juice, sugar cane syrup, and oil. It is used to cleanse the newborn’s bowel of meconium by Haitian caretakers.

**Cultural Barriers**

The national language of Haiti is creole, a language similar to French but is also influenced by Spanish, English, and West African languages. A limited availability of translators and shortage of Haitian creole speaking providers create a barrier to communication with healthcare providers. Haitian immigrants are less likely to seek care due to misunderstandings. It
is common for miscommunication to result in medical errors. Due to the inability to understand creole, a Haitian client may fear receiving the wrong medication or procedure; therefore, this further influences the Haitian people to seek traditional practices over western medicine.

In relation to literal terms, cultural terms may differ in meaning of medical or anatomical words. This impedes access to services due to confusion and mistrust among the Haitian people (Allen et al., 2013). For example, a Haitian client may point to the chest when asked about the location of their pain; however, the client may be referring to stomach pain. There are also different terms used to describe health screenings (Allen et al., 2013). Focus groups sometimes used depista, which is solely associated with HIV screening, but chache and fouye are also used to describe screenings as they translate to “search” or “dig deeply.”

**Discussion**

The population of Haitian immigrants in the United States is increasing due to several factors, such as economic, environmental, social, and political factors in Haiti. After reviewing the literature, it is certain that their healthcare practices differ from western medicine. Religion, health attitudes, such as mistrust of healthcare providers and the medical system, and communication barriers influence their healthcare decisions. This limits the likelihood of seeking medical assistance and increases emergency room visits. Nurses can influence a positive attitude towards the healthcare system by studying the Haitian immigrants’ culture and understanding how various aspects, such as their religious beliefs regarding their anatomy, traditional cultural remedies, and language are incorporated in their daily lives.

Open communication and empathy establish a trusting relationship with patients which foster participation in their health care. The ability to understand and respect a Haitian immigrant’s religious belief and to encourage shared feelings amongst their family members also
inspire a positive perspective towards the healthcare system. The use of interpreters and translators reduces medical errors which decreases anxiety amongst Haitian immigrants, encouraging them to seek medical assistance. Continuous learning regarding Haitian immigrants’ cultural terms as opposed to literal terms and providing education regarding the definition and purpose of screenings and other medical treatment also alleviate feelings of fear and mistrust. These all increase cultural competency promoting the opportunity to explore the medical system, therefore decreasing the number of emergency room visits.

**Conclusion**

Due to political instability, endemic poverty in Haiti, and natural disasters, there is a growing population of Haiti immigrants in the United States. It is important to increase nurses’ cultural competency to provide care for this population by understanding their healthcare practices. Voodoo is one of the most popular religion that believes in the worship and possession of spirits and has a profound impact on healthcare in Haiti. Many Haitians seek assistance from voodoo practitioners to manage illnesses by interacting with the spirits. Haitians also seek advice from family members and friends. Often, professional help is a last resort. Fear of deportation and mistrust of healthcare providers also limit access to healthcare. The use of natural remedies, such as herbal medicine is preferred over western medicine and there are cultural practices regarding the care of infants. The creole language spoken by the Haitian people also creates a communication barrier due to a shortage of translators and creole speaking healthcare providers. This further contributes to mistrust of the healthcare system.

As nurses it is important to consider the patients’ healthcare practices creating a milieu that will encourage clients to seek medical assistance. By providing education regarding the purpose of medical treatment and definitions of medical or anatomical terms can further decrease
medical errors in the healthcare system. Understanding that one’s cultural practices may differ from that of the provider also decreases the incidence of misdiagnosis.
Reference


University Honors Program
Capstone Faculty Approval Page

Capstone Title (print or type)
Understanding Haitian Immigrants Health Practices

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_______________________________________________

Department of (print or type) Nursing

Date of Approval (print or type) March 25th, 2020

Date and Venue of Presentation April 6th, 2020

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