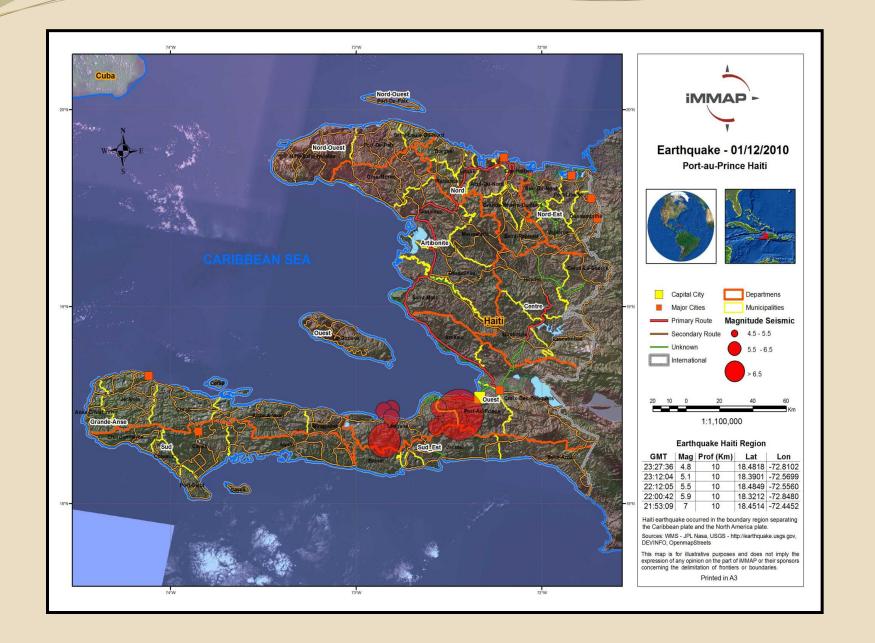
# THE MENTAL HEALTH SYSTEM IN HAITI AND THE 2010 EARTHQUAKE: THE NEED FOR A CHANGE

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# PROVIDING HELP TO THE QUAKE SURVIVORS

- January 12, 2010
  - Earthquake hit Haiti at 4:53 PM
  - Lasted for 35 seconds
    - After school programs still going on
    - Classes in various Universities
    - Factories still open (they close at 5PM)
    - Government buildings open
    - High ranking bank officials still working
    - Private offices of doctors, lawyers, engineers open

# PROVIDING HELP TO THE QUAKE SURVIVORS

• Casualties (as of February 19, 2010)

Deaths	217,366
Injuries	300,912
Amputations	4,300
Homeless	1,237,077
Displaced	511,405



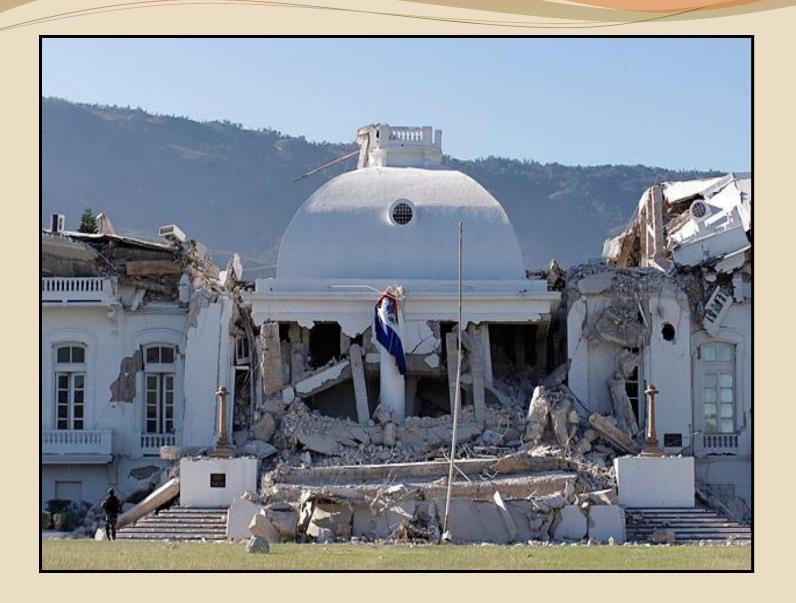










Fig. 5-11 Ecole d'infirmières et au fond le bâtiment pédiatrie





Fig. 5-13 Ecole d'infirmières



Fig. 5-14 Ecole d'infirmières











# HAITIAN HISTORY

A HISTORY OF REPEATED TRAUMA & VIOLENCE

# PRE-INDEPENDENCE ERA

NATIVE POPULATIONS DECIMATED

SLAVE TRADE

FORCED LABOR

BLOODY BATTLE FOR INDEPENDENCE

### **POST-INDEPENDENCE**

MASSACRE OF THE MASTERS

MISTRUST OF THE LEADERS

CLASS FORMATION

MASSACRE OF THE LEADERS

#### **POLITICAL VIOLENCE**

- INSECURITY OF THE POLITICAL OFFICE
- ABUSE OF POWER
- CORRUPTION
- DESTRUCTION OF THE ENNEMY
- LACK OF CONTINUITY

#### **DUVALIER ERA**

- ABSOLUTE POWER
- INTIMIDATION
- PHYSICAL ELIMINATION
- EXODUS
- DEEP MISTRUST
- REPRESSION OF FEELINGS

#### **POST-DUVALIER ERA**

CRAVING FOR FREEDOM

ANARCHY / BANBOCHE DEMOCRATIQUE

VIOLENT RETALIATION

MASS EXODUS

# ARISTIDE ERA

UNREALISTIC EXPECTATION

FALSE PROMISES

MISTRUST OF INTERNATIONAL POWERS

# POST ARISTIDE ERA

UN PEACEKEEPING MISSION

KIDNAPPPING (POLITICAL/FINANCIAL)

# THE BIG PICTURE

CYNICISM

NO REINVESTMENT

TEMPORARY STATUS AT HOME

NO LONG TERM GOALS

# **COPING MECHANISMS**

ESCAPING

FIGHTING BACK

DENIAL

DESPAIR

# **EXODUS**

LOSS OF BRAIN POWER

LOSS OF WEALTH

LOSS OF HOPE

LOSS OF COMMITMENT FOR PROGRESS

## IMPACT OF THE FAMILY

• ABSENTEE FATHER

RISKS OF EXTRA MARITAL AFFAIRS

SUBSTANCE USE

ANXIETY/ GUILT

## **VIOLENCE IN FAMILY**

• IDENTIFICATION WITH THE AGRESSOR

EXPLOITATION OF THE WEAKEST

FAMILY VIOLENCE

SUBMISSION OR REBELLION

# FIGHTING BACK

BUILDING A DEFENSE

SECURITY GUARDS

# **DENIAL**

HUMOR

CARNIVAL SONGS

• J.P.P.

REPRESSED EMOTIONS

SOMATIZATION

# **PSYCHIATRIC FALL OUT**

ANXIETY

PTSD

DEPRESSION

PARANOIA

# **CULTURE COUNTS**

- Common heritage or set of beliefs, norms, and values (DHHS, 1999).
- It refers to the shared attributes of one group.
- Anthropologists often describe culture as a system of shared meanings

# **CULTURE**

 Culture bears upon whether people even seek help in the first place, what types of help they seek, what coping styles and social supports they have, and how much stigma they attach to mental illness

• Cultures also feature strengths, such as resilience and adaptive ways of coping, which may buffer some people from developing certain disorders.

# HAITIAN CULTURE

- MISTRUST
- FASCADE
- EXTENDENDED FAMILY
- SPIRITUALITY

#### MENTAL HEALTH IN HAITI

- COUNSELING CENTERS
- SHELTERS FOR BATTERED WOMEN
- FOSTER CARE
- EMERGENCY SERVICES- HOT LINES
- ORPHANAGE
- ACCESS TO MEDICATIONS

#### MENTAL HEALTH SYSTEM IN HAITI

- Lack of Psychiatric Facilities and Clinics
  - Mars & Kline Psychiatric Center
    - *University affiliated hospital: 50 beds*
  - Psychiatric Hospital of Pont Beudet
    - State Hospital in outskirts of P-au-P: 110 beds
  - 3 small Private Psychiatric Hospitals
    - Totalling less than 100 beds
  - Few Haitian Psychiatrists in Haiti (12 to 18)
  - Very few Psychologists and Social workers
  - Haitians reluctant to seek psychiatric help
    - Religious Stigma Cultural Other Factors

### REBUILDING

The basic foundation of a rebuilt Haiti must include the establishment of a Mental Health System that will provide satisfactory Behavioral Health Care to 10 million Haitians living in all

Departments of the Republic.

## THREE STEPS

- 1- Implementation of an immediate plan of intervention in the aftermath of the January 12, 2010 earthquake disaster: 1 to 3 years.
- 2- Reorganization of the mental health system : 1 to 7 years
- 3- Long term change of the Haitian approach to mental health: 1 to 10 years

## WHO MUST TAKE THESE STEPS?

 Considering the history, the culture, the language, and the beliefs of the Haitian people,

Psychiatrists of Haitian descent, with solid experience in mental health are best placed to take the lead in rebuilding mental health in a 21<sup>st</sup> century Haiti, with the help and support of all other mental health professionals, as well as the Haitian Government, and the International Community.

# HAITIAN COMMISSION OF MENTAL HEALTH

- A group must be formed that will coordinate the implementation of the Behavioral Health Plan in Haiti for the next 10 years and beyond.
- Commission led by a Commissioner of Mental Health who should be appointed by a Board of Directors that might be composed of: the President of HAPA, the Chairman of Psychiatry of a well established academic institution, the Haitian Minister of Public Health, a legal adviser, a financial adviser, and 2 distinguished representatives of the Haitian community.

#### **HCMH**

- Commissioner must be a Board Certified Psychiatrist of Haitian descent, with 10+ years of experience in Mental Health, 5+ years of experience in psychiatric administration, and preferably have a faculty appointment at well established academic institution
- Commissioner is appointed for 3 years, renewable at the discretion of the Board of Directors
- With the approval of the Board of Directors, the Commissioner will appoint a Deputy Director, an Assistant Director for Clinical Services, and an Assistant Director for Education and Training. All individuals will be certified psychiatrists, psychologists, psychiatric social workers, or psychiatric nurse practitioners of Haitian descent.

## **HCMH**

- The Commissioner also appoints a Financial Manager, a Personnel officer, a Quality Care Manager and a Community Organizer
- The Executive Committee of the IHSM will then be composed of the IMD and the 8 above-mentioned voting individuals (with the IMD as a tie-breaker).
- This Executive Committee is responsible for the implementation of the plan.

# **SMART**

The 3 step plan must be SMART SPECIFIC
 MEASURABLE
 ACHIEVABLE
 REALISTIC
 TIMELY

• This a 10 year plan.

# STEP #1: POST-EARTHQUAKE

- TARGET: Survivors of the disaster (children, adult, elderly) living in the affected areas in and around Port-au-Prince
- Other areas of the country will be assessed and targeted accordingly for need of immediate help
- The Quality Care Manager and the Community Organizer contribute to this aspect of the plan with the active support of the Deputy-Director.

# STEP #1

- Survivors suffering with any psychological problem caused or complicated by the earthquake will be provided adequate care
- Education through radio, TV, and print media; outreach to homes, camps, and tents, in all the localities; easy access to trained professionals and assistants. The Deputy Director is responsible for this aspect of the plan with assistance from the Community Organizer
- Temporary Behavioral Health Clinics will be established inside multi-disciplinary health centers

### STEP #1

- All Behavioral Health Clinics staffed by trained psychiatrists, and /or psychologists, social workers, nurses, therapists, counselors, and supportive staff. The Personnel Director takes care of the hiring.
- Survivors/clients will be evaluated and treatment provided as appropriate.
- Treatment may include crisis intervention, grief counseling, psychotherapy, medication, and hospitalization.
- The Mars & Kline Psychiatric Center and the Beudet Hospital must be appropriately rebuilt, furnished, staffed, and equipped to accommodate acute admissions and short or long term hospitalizations.
- Training of staff will start immediately and continue throughout all the phases of the plan

## **TRAINING**

- Assistant Director for Education and Training will organize a training program for staff in the clinics.
- Disaster training with focus on Haitian culture will be available for all professionals and non-professionals affiliated with the Commission.
- Training in all areas of mental health will continue beyond the first phase
- Certification in areas of case management, mental health counseling, substance abuse counseling, group and family interventions, will be generated.
- Continued supervision to be provided for the psychiatrists, psychologists, nurses, and social workers in the clinics

## STEP #1

- Clinic administrator will report all statistical data to the commissioner once a month.
- Data to include number of clients and visits, demographics, diagnosis, types of interventions.
- Data will help the Commissioner in making decisions about staffing and expansions, as well as equipment, medication, focus of training and research.
- Research is the domain of the Director of Education and Training.

# STEP #2 : A HAITIAN BEHAVIORAL HEALTH CARE SYSTEM

- In addition to the two existing Psychiatric Hospitals, there should be:
  - ➤ Inpatient Psychiatric Units incorporated inside the main Government hospitals.
  - Community Mental Heath Centers inside the main health clinics.

# STEP 3: EDUCATION

- Education in counseling for folk healers.
- Parents' education, collaboration with teachers in primary schools, psychological courses in secondary schools and at the professional and university levels.
- Training and educating psychologists, social workers, mental health counselors, nurse practitioners.
- Psychiatry courses and externship in Medical School, affiliation with foreign universities and institutions
- Residency training program in general psychiatry, with subspecialties in child psychiatry, geriatric psychiatry, and community psychiatry.







