Haitian Mental Health Forum

The American Psychiatric Association &
The Haitian Mental Health (HMH) Network

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Intersection


Danielle Legros Georges

Foreword

This Monograph provides a synopsis of the Haitian Mental Health Forum, which was held on October 17, 2010 at the Hyde Park Municipal Building Community Center in Boston, Massachusetts. The Forum was jointly presented by the American Psychiatric Association (APA) and the Haitian Mental Health (HMH) Network.

Massachusetts has the third largest Haitian community in the United States after Florida and New York. U.S. Census data indicate that there are about 40,000 Haitians living in Massachusetts, with some statewide estimates as high as 90,000. Following the January 12, 2010 earthquake, there was a surge of Haitian immigrants relocating to the Boston area. To respond to the growing needs for culturally-competent and linguistically-appropriate mental health services for the Haitian community in the aftermath of the earthquake, a group of Haitian providers came together to form the Haitian Mental Health (HMH) Network. Members of the HMH Network work collaboratively with community-based agencies as well as local, national and international organizations to facilitate access to mental health services that are comprehensive, culturally sensitive, and developmentally appropriate. One of the Network’s main objectives is to promote resiliency in the Haitian community so as to prevent or reduce the long-term impact of trauma on the lives of earthquake survivors and their families.

Over the past year, the HMH Network has offered a host of services in the Boston area, including training for providers, community leaders, and consumers on Psychological First Aid, disaster mental health, psychological reactions to trauma, and self-care; seminars on culturally-oriented, trauma-informed mental health interventions with Haitians; coordination of direct care services that are culturally-sensitive and linguistically-appropriate; and facilitation of consumers’ access to mental health and social services in the communities where they reside. Since the January 12, 2010 earthquake, the HMH Network, in collaboration with the New England Human Rights Organization (NEHRO), has organized two trips to Haiti in April and August 2010 and has provided training to more than 1,200 individuals on disaster mental health, psychological reactions to trauma, self-care and Psychological First Aid. On the first anniversary of the earthquake, the HMH Network, in partnership with Youth and Family Enrichment Services and NEHRO, organized a memorial service in Boston to honor the lives of those who died in the earthquake, celebrate the strength and resilience of the survivors and their families, provide the community with a forum for reflection and healing, and instill hope for a better and stronger Haitian community.

The Haitian Mental Health Forum was organized by APA and the HMH Network to raise awareness about the psychological impact of the disaster of January 12 on the Haitian community, inform members of the community about mental health initiatives aimed at addressing the needs of survivors and their families both in Massachusetts and in Haiti, and provide information about local psychosocial resources that are available to the Haitian community. The HMH Network remains committed to supporting the Haitian community—locally, nationally and internationally—through the rebuilding and healing process.
Welcoming Remarks:

OMNA On Tour

Annelle B. Primm, MD, MPH, Deputy Medical Director and Director of the APA Office of Minority and National Affairs (OMNA), opened the Haitian Mental Health Forum by reiterating the event’s aim to bring together concerned community members for information and resource sharing about the mental health concerns of Haitians in Boston and other parts of the U.S. in the aftermath of the January 12, 2010 earthquake in Haiti.

Dr. Primm noted that the idea of the Haitian Mental Health Forum was borne at the Haitian Mental Health Summit held in Miami, Florida, in June 2010 where mental health professionals and advocates from Haiti, the United States and Canada convened to develop and implement specific action plans to address mental health needs in Haiti and the Haitian Diaspora.

She added that the APA’s Institute for Psychiatric Services Conference in Boston that concluded a day earlier provided the APA’s Office of Minority and National Affairs the perfect backdrop to present and tailor its traveling mental health disparities education program, OMNA on Tour, for Boston, a city with a high concentration of Haitian people. OMNA on Tour is designed to raise awareness of the mental health needs of diverse and underserved populations across the nation and to facilitate collaborations to address unmet mental health needs and eliminate disparities. These programs are customized to the demographics of a given area and have been held in several U.S. cities, including one in New Orleans which focused on the mental health consequences of Hurricane Katrina on underserved populations in that region, and one in Albuquerque, New Mexico, on issues in Native American mental health. The next OMNA on Tour program will focus on indigenous populations in Honolulu, Hawaii, in May 2011.
Marie-Claude Rigaud, MD, MPH, former President of the Haitian Physicians Association, noted that it was a very fortunate coincidence that the Forum, which focused on the mental health impact of the trauma caused by the January 12, 2010 earthquake, took place on October 17 due to the historical significance of that date. She remarked that October 17 is the day the Haitian community commemorates the life and death of Jean-Jacques Dessalines, a former slave who led the Haitian revolution and became the first official leader of the country.

Dr. Rigaud noted that Haitian history informs us that Dessalines was assassinated on October 17, 1806. Even more relevant to the Haitian Mental Health Forum, is that Dessalines’ body was recovered and brought for proper burial by a woman known as Défilée La Folle (i.e., Défilée, “the crazy woman”). She concluded that, as we attempt to address the post-earthquake mental health needs of Haitians living in Haiti, the U.S. and Canada, and commemorate the 204th anniversary of the death of Jean-Jacques Dessalines, we should remember not only Dessalines the hero, but also the woman, Défilée La Folle, who was known as being mentally ill but who took the initiative to care for Dessalines’ remains following his assassination.
The Community Forum

TARGET AUDIENCE

The Haitian Mental Health Forum was open to professionals and community residents interested in Haitian mental health issues. The HMH Network conducted broad outreach through radio and television public service announcements and email of flyers that were distributed to mental health service providers, churches and community-based organizations. As a result of this outreach approximately 80 participants attended the event, representing individuals from various medical, mental health, public health, social and religious sectors of the Haitian community.

GOALS

To raise awareness about the mental health impact of the January 12 earthquake on Haitian communities in Haiti and throughout the United States, the Haitian Mental Health Forum was held to bring together the Boston community to:

1. Learn about mental health relief efforts in Boston and Haiti.
2. Hear the community’s concerns about its unmet mental health needs and on-going challenges in addressing those needs.
3. Inform the community about available resources and ways to access mental health and family support services.

To meet these objectives, two panels were formed—one focusing on Haiti-based mental health initiatives and the other highlighting major mental health interventions being conducted in the Boston area. Below is a summary of the panel presentations.

PANEL PRESENTATIONS

PANEL I: Haiti-Based Mental Health Initiatives

The H.E.A.R.T. Initiative: Mental Health Interventions with Haitian Survivors Following the Earthquake

Gemima St. Louis, Ph.D., Clinical Psychologist at Boston University School of Medicine and Co-Chair of the Haitian Mental Health Network, spoke about the H.E.A.R.T. Initiative. She stated that H.E.A.R.T., which stands for Haitian Earthquake Aid and Relief Team, was borne out of a joint collaboration between the Haitian Mental Health Network and the New England Human Rights Organization. H.E.A.R.T. is made up of a diverse group of Haitian providers, including psychologists, social workers, and other mental health professionals. The main goals of this initiative are threefold. First, to provide trauma-informed training to mental health students in Haiti, in particular on ways to address the mental health needs of vulnerable groups (e.g., children, adolescents, and the elderly). Second, to develop the workforce capacity of Haitian mental health providers to deliver quality mental health services to survivors of the earthquake and their families.
Third, to enhance knowledge exchange and knowledge transfer between providers in the U.S. and Haiti. From April 16-23, 2010 the H.E.A.R.T. team, comprised of approximately 20 individuals, traveled to Port-au-Prince and Petit-Gôave where they provided mental health training and support to more than 1,100 earthquake survivors. The training focused primarily on Psychological First Aid, disaster mental health, and self-care. In Port-au-Prince, the team worked in close partnership with the Faculty of Human Sciences and the Foundation for Democracy. The team then went back to Haiti from August 2-12, 2010 and provided training in Cap-Haitien for approximately 400 students and professionals, and conducted a needs assessment with more than 300 survivors in Port-au-Prince. Next steps for the H.E.A.R.T. initiative are to strengthen collaborations with Haiti-based partners, secure funding to support additional projects, and share with the community the findings from the survey done in Haiti.

**A Community-Based Psychosocial Mental Health Program in Petit-Gôave**

Guerda Nicolas, Ph.D., Chairperson and Associate Professor in the Department of educational and Psychological Studies at the University of Miami, provided an overview of the work being conducted in Petit-Gôave. Dr. Nicolas began by highlighting the fact that, following the January 12, 2010 earthquake, 80% of Leogane’s and Petit-Gôave’s infrastructure was completely destroyed. While Petit-Gôave sustained severe loss of life and structural damages as a result of the quake, coverage of Petit-Gôave by humanitarian organizations was very limited. To respond to the growing need for mental health support in that region, Dr. Nicolas and a team of psychosocial workers from Petit-Gôave developed and implemented a community-based project whose goal was to provide families and individuals in Petit-Gôave with psychosocial support by increasing the capacity of local residents to be able to care for members of their community.

Dr. Nicolas further noted that, earlier on, a Community Advisory Board (CAB) was created to oversee the project. Composed of eleven representatives from the community’s main sectors (e.g., religious leaders, community-based organizations, women’s groups, schools, parents’ groups, and city officials), the CAB guided the project’s relationships with local institutions, and provided constructive criticism and feedback on program development. Program staff received extensive training prior to conducting presentations on psychosocial concepts. They educated community members on stress, depression, anxiety, trauma and related conditions, and attempted to de-stigmatize symptoms and treatment associated with them. To date, the project has reached over 2,300 individuals from diverse parts of the community.

In conclusion, Dr. Nicolas made the following recommendations:

1. It is crucial that we define what “psychosocial” means and develop culturally-tailored interventions to expand on the talent of local individuals to conduct the work.

2. Community engagement and involvement are also critical. Providers should consult with members of the communities to which they will be providing mental health support prior to delivering such services since people from the community not only know the subject matter, but also know the community well.

3. It’s important to expand the talent of local individuals to conduct the work and build community capacity.

Dr. Nicolas also highlighted the need to work with communities before there’s an emergency so that partnerships are already established for when an emergency does happen. The connections already in place can help to better facilitate the delivery of services and support.

**Konbit Sante: Building on Mental Health Partnerships**

Ralph Saintfort, MD, Director of Medical Psychiatry Services, LLC in Moline, Illinois, addressed the topic of building mental health partnerships in Haiti. Dr. Sainfort indicated that, prior to the earthquake, there were many outside organizations doing work in Haiti. However, the on-going work needs to be conducted with the focus of building capacity in Haiti and it must be culturally-sensitive. He further noted that Haitians need assistance from organizations that are going to be in Haiti long-term.

Dr. Sainfort went on to describe the project, *Konbit Sante*, which is a Haitian Creole word that translates to “working together for health”. The project started purely as a volunteer organization in 2000. The goal of *Konbit Sante* is to develop a partnership with Haiti’s Ministry of Health to build capacity of the public healthcare system in Northern Haiti, with maximum local direction. The konbit approach is about building long-term capacity with people with expertise and colleagues interested in working in Haiti.
Dr. Sainfort indicated that having local partners on the ground is key, as it makes providing support and assistance much quicker and efficient. He also suggested that a needs assessment be conducted first prior to starting any new program in Haiti or in any other community for that matter.

Konbit Sante followed this path to develop mental health partnerships with the Family Medicine Program at Justinien Hospital in Cap-Haitien, the second largest public hospital in Haiti. Dr. Sainfort concluded by stating that it's very important for all those wanting to provide mental health support in Haiti to do so in the way that Haitians would be receptive to the services and that they address the mental needs of Haitians in a culturally-competent manner.

Resilience among Earthquake Survivors in Haiti: A Survey of Depression and Post-Traumatic Stress Disorder Symptoms

Sigalit Hoffman, MD, Fellow in Child and Adolescent Psychiatry at Tufts Medical Center, traveled to Milot, which is located about 93 miles from Port-Au-Prince, in June 2010. Dr. Hoffman worked at the Sacred Heart Hospital in Milot where she interviewed 84 individuals, between the ages of 15-88 to determine how well they were coping or functioning in the aftermath of the earthquake. Almost six months later, she found that 46% of the people met criteria for post-traumatic stress disorder (PTSD). She indicated that, in comparison, only 20% of survivors of Katrina had PTSD. Thus, this finding suggests that a large number of Haiti’s earthquake survivors may be experiencing trauma-related symptoms and are in need of mental health services. Dr. Hoffman highlighted several ethical issues to consider, including the need to gather data vs. the need to provide immediate services or support, sustaining mental health interventions for Haitian individuals, and addressing the applicability of Westernized approaches in understanding trauma among survivors living in Haiti. She remarked that it is very important that professionals work with local service providers in order to respond in a culturally-appropriate manner and address the specific needs of the community.

PANEL II: Boston-Based Mental Health Initiatives

An Overview of the Haitian Mental Health Network

Myrtise Kretsedemas, LCSW, MPH, Public Health Consultant and Treasurer of the Haitian Mental Health (HMH) Network, provided an overview of the Network. Ms. Kretsedemas stated that the primary goal of the HMH Network is to facilitate access to culturally-oriented and linguistically-competent mental health services for Haitian communities through collaborative partnerships. It is not a direct-service provider, but a collaborator and convener of others who provide those services. The Network’s activities during its nine-month operation have included facilitating crisis counseling services to survivors, school children and groups as well as outreach to potential partners.

The Network has also conducted training sessions for community leaders and mental health professionals to better help Haitian earthquake survivors as well as developed age-specific curricula on how to work with children, adolescents and adults. Additionally, the Network has developed a Directory of Haitian mental health professionals, as well as conducted two community forums.

Future activities will include conducting a community needs assessment to determine what the community’s mental health needs are, as well as professional development seminars and workshops for Haitian and non-Haitian mental health professionals to learn how to better treat Haitian individuals needing mental health support both locally and internationally.
Joseph M. Smith Community Health Center: 
Local Response to Haiti's Earthquake

Sonia Mee, LICSW, Director of Counseling and Community Services at the Joseph M. Smith Community Health Center, spoke about post-earthquake mental health services targeting Haitian individuals. Ms. Mee indicated that the Joseph M. Smith Community Health Service Center, located in Allston-Brighton, was started by Joseph Smith in the early 1970s to provide health care services to under-served communities. In 2004, the Center opened a site in Waltham, Massachusetts. The Center is currently comprised of five sites from which its medical and support staff provide medical and specialty services. Over 62% of patients are within 100% of federal government poverty guidelines.

Ms. Mee noted that the Center has a specific outreach team to work with the Haitian community. After the January 12 earthquake, the Center saw a huge increase in Haitian patients seeking not only medical and health benefits services, but also basic needs such as housing and food as well as legal support for Temporary Protective Status. The Center established a drop-in support group to provide guidance and referrals to Haitian individuals in need of such services. The Center had received additional funding that enabled it to create another group, called the Newcomers Group, to help with the increase in demands for services. The Center also hired a clinician to help Haitian patients with mental health support and received training for 12 staff from Dr. Gemima St. Louis on how to better work with Haitian victims of the earthquake. The patients served by the Center ranged in age from 4 to over 50 years old. Treatment provided included both individual and group counseling services.

Some of the themes that surfaced included acculturation and parenting issues such as discipline and what’s accepted in Haiti vs. in the U.S. There was a lot of education to young families regarding what Massachusetts expected on how to treat children. The Center did a lot of work in self-care as well with the patients.

Additional issues included worries about finding housing, finances, and caring for families back home. The patients also worried about the future in terms of what to do next, whether they’ll go back to Haiti or stay in the U.S. Unfortunately, funding ended in June 2010 so many of the services had to be curtailed. The Center is currently seeking community-based partners as well as funding to continue providing these services to the Haitian community.

MDPH Emergency Preparedness: Findings from Addressing Trauma Recovery Needs in the MA Haitian Community

Charlot Lucien, Commissioner’s Liaison at the Massachusetts Department of Public Health (MDPH), reported that there was a great response from various organizations across Massachusetts in the aftermath of the earthquake. In a matter of two weeks, Commissioner John Auerbach convened a group to care for the Haitian community in Massachusetts. The Centers for Disease Control and Prevention (CDC) granted funding to help provide the support needed via an emergency preparedness grant for a limited time period, from February 8 to June 30, 2010. During that period, 5,117 Haitian individuals were served through 16 health centers and community-based organizations (CBOs). The project consisted of partnering with all of the relevant agencies serving the Haitian community throughout the Greater Boston Metropolitan area. MDPH funded nine health centers that received between $30,000 and $80,000 each, and seven CBOs which received $20,000 each. Services offered in various settings were individual counseling and psychoeducational groups.
SURVIVING THE QUAKE:
The Moving Testimonies of Two Haitian Women

“It was as if the tremors were saying that they weren’t done with us, that they were still coming to get us.”
Lindza Lubin is a 19-year-old young woman who lived in Bon- Repos, Haiti, at the time when the earthquake struck the island on January 12, 2010. Below is her testimonial account of the event:

“I get very emotional when I talk about my experience of the earthquake. I was in school studying dentistry in Haiti at the University of Dentistry, which was close to the National Palace. When the earthquake took place, I was leaving the school. My parents and younger siblings had come to pick me up and they were in the car. All I felt was the street violently trembling and the shaking threw me against a heavy gate that was in front of the school. I saw my family’s car going up and down, as if it was a little girl jumping rope. The entire city was completely white from the clouds of dust after the thirty seconds of nightmare. I got in the car and my family and I began to pray for we had no idea what was happening. Afterwards, my father tried to drive, but he could not go far because everything was chaos after the earthquake. I watched helplessly as houses were collapsing around me. I heard people crying under the houses and asking for help. I saw the National Palace had completely collapsed. I saw many people running all over the streets, with tears and fears in their eyes. Most of them were completely covered in blood and dust, and they were screaming. Because we lived outside of the capital and because our house was far, we decided to abandon the vehicle and walk to my grandmother’s house, which was at Canapé-Vert. As my family and I were walking, we saw entire schools that had collapsed with the students still trapped inside. I saw this woman sitting on the ground holding this kid who was already dead in her arms. We walked in the middle of the streets and also on the sidewalks where we saw pools of blood. Throughout the whole ordeal, my younger sister never cried until we walked by a friend’s house and saw that the house had been destroyed.

“I saw my family’s car going up and down, as if it was a little girl jumping rope.”

When we finally got close to my grandmother’s house, some people told us that she had been badly injured and that she was lying down and could not move.

My siblings and I started crying while we were calling out her name. We found her sitting on the ground with her legs bleeding. Thankfully, she was alive. So, we all proceeded to find a place outside to stay for the night. We had a blanket, which we laid on the ground and shared with others. There were about 15 people who slept on this blanket. During the night, we felt aftershocks after aftershocks. It was as if the tremors were saying that they weren’t done with us, that they were still coming to get us.

In the morning when we woke up, we had hoped that it was just a horrible nightmare. However, it wasn’t. We spent three days wearing the same clothes, and without brushing our teeth or taking baths. However, none of that seemed to bother us. We were in shock and simply trying to stay alive. Toward the end of the week on Friday, we decided to leave where we were and head back to our house. As we made our way home, I was shocked because the most common thing I saw was the dead bodies piled on top of one another, decomposing because of the heat. The smell was awful and I understood that I was experiencing one of the worst moments of my life. The stench of bodies was really hard to bear. There were so many dead people that they had to use those special trucks for road construction to remove them from the sidewalk.

When we finally reached our house, we slept out in the front yard. To this day, there are many friends that I still don’t know if they survived or not. Since the earthquake, I have not been able to wear red clothes because the sight of red makes me want to throw up. This experience has truly affected me in ways that I could never imagine.

On February 2, my family and I came to Boston, except for my father who had to stay behind. Since then, I have been able to receive physical and mental health services from two community-based organizations — Codman Square Health Center and the Center for Community Health, Education & Research (CCHER). I am really grateful for all the support that my family and I have received from these agencies at a time when we needed it the most. We have truly benefited from the community here in Boston that has helped us a lot. While I am really bothered by the fact that I am not with my father, I hope that some day soon, we will all be reunited.”
“A Terrifying Ordeal”

Sara Joint is a 22-year-old Haitian woman who came to Boston on February 15, 2010 after the earthquake.

"When the earthquake happened, I was on the second floor of a three-story house and the house started shaking. It was a terrifying ordeal but I had no idea what it was. Although my house shook violently, it didn’t collapse. Everyone ran out into the streets. I had no idea that I had just experienced an earthquake. My brother wasn’t home at the time when the earthquake happened and came home crying, screaming and asking if all the members of our family were alive. He saw so many dead people on the streets where he came from. When the earthquake first happened, I didn’t realize the full extent of the damage that took place until I went to the downtown area to help other people. That was when I saw several buildings had completely collapsed. I also didn’t know how my father was until about 11 p.m. that night when I finally heard his voice on a colleague’s cell phone who had called from his job. I am thankful that the lives of my immediate family was spared, but the emotion and shock of witnessing friends and loved ones who lost their lives will haunt me forever.

My mother, my older brother and I came to live in Boston after the earthquake. For several months after I arrived in Boston, I experienced many symptoms of trauma. For example, every time the heating system would come on or whenever I took the train, essentially, every time I did anything, I worried that another quake was going to take place. I was unable to enter basements and was worried that buildings would collapse on top of me. I could not eat or sleep for months. It was so bad that I had to be hospitalized and receive treatment for a while.

When I was back home, I felt that all of my dreams for my future were lost in the earthquake. But it was not until I went to the Haitian support group at Codman Square Health Center and started receiving psychotherapeutic treatment and support from the social workers that I began to feel and get better.

I thank the staff at Codman Square Health Center for helping me psychologically and for sharing with my family and me the many resources and other services in the Boston area that helped us to cope with the effects of a very traumatic experience.”
Cultural Connections:

Celebrating the Rich Haitian Tradition

The Haitian Mental Health Forum focused not only on addressing the mental health needs of the Haitian community but also on celebrating other aspects of the rich Haitian culture. We understood that, despite the experience of such a traumatic event as the January 12 earthquake, Haitian individuals have the capacity to express their feelings, thoughts and emotions in words as well as through artistic expressions and interpretations. Thus, members of the Haitian artistic community were invited to participate in the Forum.

One such artist is Natacha Clerge, an emerging writer who recited a moving poem that she wrote about the earthquake, entitled, “Ede m Rele” (Help Me Scream).

The Haitian dance troupe, Arc-en-Ciel (which means rainbow) performed a moving piece, which captured the traumatic impact of the earthquake when it struck the island of Haiti on January 12. Then, through movements and sounds of drumbeats reminiscent of the island of Haiti, Arc-en-Ciel delighted the audience and lifted its spirits with two energetic dance performances.

The event wrapped up with the “Indigo Circle” a relaxation/self-care activity, led by Social Worker and Member of the Haitian Mental Health Network, Olivia Apollon. The audience was brought to its feet as everyone practiced deep breathing and relaxation techniques to the delightful and rhythmic sounds of Haitian drumbeats. The Indigo Circle was contextualized into the Haitian tradition and culture to incorporate movements as well as visualization of places and sites that linked participants to the mountains, seashores, and other scenic vistas that symbolize the beauty of the island of Haiti.
Major Accomplishments

The Haitian Mental Health Forum was considered a success by the planning organizations as well as the participants. The following highlights how the Forum was able to meet all of its goals.

- The Forum was well attended. We were able to capture an audience that included professionals from diverse fields as well as community residents.
- The breadth of information that was presented by the different organizations and presenters were relevant to both the professionals and community residents that participated. For the professionals in the audience they were able to learn of the research taking place in Haiti and Boston. The general audience was able to learn about where and how to access mental health services and other resources.
- The Forum provided a platform for survivors to share their experiences in accessing mental health services and the positive outcome they have had as a result of engaging in care.
- The inclusion of an entertainment segment, which consisted of Haitian dance, poetry and music helped to bring some levity to an otherwise somber subject matter.

Unmet Needs & On-Going Challenges

The Forum highlighted the mental health needs of survivors of the earthquake as well as the needs of the broader Haitian community.

- The need for mental health providers that are culturally-oriented and linguistically-competent was a recurrent topic cited by mental health service providers as well as community residents. While there are Haitian mental health professionals providing direct care services to this population, there is a significant shortage in this area.
- Lack of financial resources was another challenge that many of the service providers cited as one of the biggest barriers to sustaining mental health services for this population. The Massachusetts Department of Public Health had awarded grants to a group of community health centers and community-based organizations to provide short-term services. There were a significant number of people served by these programs but once the funding ended, organizations were sometimes placed in a tough position of having to limit the number of people served or taking on the financial burden to sustain their programs.
- Whether mental health programs are conducted in Boston or in Haiti, there is a need for more comprehensive mental health needs assessments to determine how the population perceives mental health care and how to best deliver these services. In addition, there is also a great need for linking Haitian individuals in need of services to appropriate mental health providers.
- Cross-cultural training for non-Haitian providers is essential in order to avoid misdiagnosis and uninformed treatment. Mental health providers who are working with Haitian clients must have an understanding of cultural factors that may influence the manifestation of symptoms such as depression, anxiety, and grief in order to work effectively with the Haitian community.
While the Haitian Mental Health Forum was successful in meeting all the goals set forth, there are some recommendations and lessons we have learned that may be helpful to other organizations that are planning to host a similar event in their community.

- **Allocate appropriate time for planning and establish working groups:**

  There were two planning teams that coordinated the Forum; one comprised of two HMH Network representatives who worked with APA personnel to plan the major logistics and a second group consisted of HMH Network members who implemented the ideas generated by the planning group.

- **Develop a realistic budget:**

  Identify the means of financial support (i.e., in-kind, donations, etc.) that will be required to put on the event. Start fundraising activities early. Collaborate with organizations that can provide in-kind services such as the use of a space or personnel.

- **Allocate enough time for presentations:**

  The Forum was very successful in capturing the intended audience. However, the event went over the time that was advertised. Based on this experience, in planning future forums we may need to either extend the time allotted from three hours to half a day or limit the number of speakers. Given the usefulness of the information that was shared we may choose to extend the time of the event.

- **Know your community and intended audience:**

  We knew that the time we were holding the conference, a Sunday afternoon, was the best time to get individuals and families in our community to come out and participate in this event. We also knew that many of them would be coming from church and would be hungry so we planned for light refreshments before the Forum began and a more substantial food reception after the Forum.

- **Provide a personal perspective to the discussion:**

  If at all possible include individuals who have been affected by the issues among the presenters. We invited survivors of the earthquake to share their experiences in accessing mental health services. Their stories were very poignant and provided a personal perspective to the discussion.

- **Invite key stakeholders:**

  It is crucial to have people attend who are decision makers and can influence policy as well as provide necessary financial resources to sustain programs. We invited state mental health and public health decision makers. We should have also outreached to private foundations that have an interest in promoting mental health, especially in ethnic minority and immigrant communities.
Program participants were encouraged to provide written feedback based on their experience of the 
Haitian Mental Health Forum. They were also asked to offer suggestions on future community-based events as well as ways to improve and make such events more responsive to the need of the Haitian community. About 25 individuals returned the completed evaluation form, which was made available in both Haitian Creole and English.

Participants were asked to provide feedback on the following questions:

1. **What did you find most useful?**
   - Listening to the survivors’ testimonies
   - Learning about what others are doing about mental health for Haitians
   - Hearing about the work being done in Haiti
   - Learning about ways to get involved
   - Knowing where to refer people for mental health services

2. **How can the Forum be improved?**
   - Better time management
   - Invite providers from Haiti to participate in the event
   - Have an interactive segment for audience participation (i.e., Q&A session)
   - Have more publicity to attract a larger audience

3. **Would you recommend this Forum to others?**
   - “Yes – because the event was well organized and informative.”
   - “Definitively – it was a great networking experience.”
   - “Absolutely – more people need to hear about what is being done and how others can help.”

4. **Overall, how satisfied were you with the Forum?**
   - “Very, very satisfied!”
   - “Excellent forum!”
   - “I was pleased with most of the presenters and the entertainers were fabulous.”

5. **Other Comments/Suggestions?**
   - Provide more information on ways for people to get involved in these programs
   - Offer on-site services to people who are in need
   - Inform other communities of upcoming forums
   - Reach out to other professionals in the field to get them involved and committed to giving back to their community
   - Offer the forums more frequently

Participants were also asked to rate the (a) format of the Forum, (b) the length of the Forum, (c) facilitation of the Forum, (d) whether the Forum allowed enough time for discussion and participation, and (e) whether the Forum accomplished its stated objectives.

The figure below indicates that, by and large, participants were satisfied with the format, length, facilitation and objectives of the Forum. However, they were not as satisfied with the amount of time allotted for audience participation.
The Haitian Mental Health Forum was borne out of a partnership between the American Psychiatric Association (APA) and the Haitian Mental Health (HMH) Network. This Monograph, which contains the proceedings from the Forum, underscores the need to maintain the focus on the mental health needs of the Haitian community. As we look toward the future, the HMH Network will continue to offer similar community-based events, in collaboration with other partner organizations, to ensure that the mental health needs of the Haitian community are addressed locally, nationally, and internationally.

The outpouring of interest and caring shown by attendees at the Forum served as an inspiration for the APA Office of Minority and National Affairs (OMNA). OMNA on Tour aims to tailor future programming to the specific demographics and mental health needs of other ethnic minority communities. The Forum also gave OMNA the ideal platform to incorporate culturally–expressive elements in the much–needed promotion of mental health in the Boston Haitian community. With that success, OMNA is committed to deliver similar programs in areas of the United States and Canada with large Haitian communities such as Brooklyn, NY; Miami, Florida; and Montreal, Quebec, Canada.

We welcome your suggestions to help make future community-based events as culturally appropriate and as meaningful as possible. Thus, we invite you to complete the Feedback Form at the end of this Monograph (see Appendix C) and forward it to the HMH Network with your comments and constructive feedback.
Suggested Readings


Suggested Readings (continued)


Appendix A:  
Biographies of Presenters

**Sigalit Hoffman, MD**, is a first year Fellow in Child and Adolescent Psychiatry at Tufts Medical Center. This past June she traveled to Milot, Haiti, where she screened and treated earthquake survivors for depression and post-traumatic stress disorder. She is the resident representative for the Massachusetts Medical Society Global Health Committee.

**Myrtise Kretsedemas, LCSW, MPH**, has directed numerous programs in the areas of HIV/AIDS, mental health, research, and primary healthcare for organizations in the U.S., Canada and Haiti. She currently works as a freelance consultant, specializing in resource development, program planning and evaluation as well as quality assessment and improvement.

**Charlot Lucien** served as the Commissioner’s Liaison at the Massachusetts Department of Public Health in the wake of the Haiti earthquake. He helped coordinate response strategies with various other state, city and VOLAGs organizations and oversaw a CDC funded mental health and trauma recovery services grant that supported 16 agencies in the months following the earthquake.

**Sonia Ventura Mee, LICSW**, is the Director of Counseling and Community Services at the Joseph M. Smith Community Health Center (JMSCHC) in Allston, Massachusetts. In this role, Ms. Mee oversees both the Outreach and Mental Health Departments for all JMSCHC sites.

**Guerda Nicolas, PhD**, is the Chairperson of the Educational and Psychological Studies Department and Associate Professor at University of Miami, School of Education. Her research focuses on the integration of race and culture and well-being of ethnically diverse and immigrant communities.

**Annelle B. Primm, MD, MPH**, is a board certified psychiatrist, Deputy Medical Director and Director of the Office of Minority and National Affairs (OMNA) at the American Psychiatric Association. She is an Associate Professor of Psychiatry at the Johns Hopkins School of Medicine. Dr. Primm is the producer and host of two educational videotapes on depression: *Black and Blue: Depression in the African American Community* and *Gray and Blue: Depression in Older Adults*.

**Marie-Claude Rigaud, MD, MPH, DLFAPA** is board certified by the American Board of Psychiatry and Neurology. She is a nationally recognized and published author in the areas of Workplace Psychiatry, Disability and Managed Behavioral care. She is a Distinguished Life Fellow of the American Psychiatric Association (APA) and a former delegate of the American Medical Association (AMA) House of Delegates.

**Ralph Saintfort, MD**, is the Director of Medical Psychiatry Services LLC in Moline, Illinois. Dr. Saintfort has served as Chair of the Department of Psychiatry at Trinity Medical Center, and Director of Medical Psychiatry Services at Robert Young Center. He has been in private practice in Moline, Illinois, for the past three years. Dr. Saintfort is Vice-President of the Rock Island Medical Society in Rock Island, Illinois.

**Gemima St. Louis, PhD**, is an Assistant Professor of Psychiatry at Boston University School of Medicine and a Clinical Psychologist at the SPARK Center at Boston Medical Center. She is the current Co-Chair of the Boston-based Haitian Mental Health Network and the cofounder of H.E.A.R.T. (*Haitian Earthquake Aid and Relief Team*). Dr. St. Louis has led two delegations of mental health providers to Haiti where they have organized training on disaster mental health and provided psychosocial interventions for survivors of the January 12, 2010 earthquake.
Appendix B:
Acknowledgments

The Haitian Mental Health Forum was presented by the Office of Minority and National Affairs (OMNA) at the American Psychiatric Association (APA) and the Haitian Mental Health (HMH) Network. We would like to thank the following individuals for their contribution to the successful outcome of the Forum: Dr. Annelle B. Primm, Dr. Marie-Claude Rigaud, Alison Bondurant, and Rosa Bracey at the APA; the panelists and survivors who took part in the Forum; and members of the Planning Committee, including Dr. Guerda Nicolas, Dr. Ralph Saintfort, Dr. Richard Douyon, Myrtilse Kretsedemas, Marline Amedee, Joelle Auguste, Marie Andree Pierre-Victor, Rachel Sajous and Dr. Gemima St. Louis.

Our deepest gratitude goes to Josue Renaud, President of the New England Human Rights Organization; Mr. Jean and Mrs. Sonnia Borgard, for the use of the Hyde Park Community Center; Joel Piton who served as the Forum’s translator; Kathleen Jeanty, of Innerleaf Communications, for transcribing the event’s proceedings; and the performers, Natacha Clerger and Arc-en-Ciel Dance Troupe. We would like to thank Catering By Convenience; Rico Cajuste, of NLB Productions; and Tommy C. Seggers who photographed the event.

The Haitian Mental Health Network would also like to thank the SPARK Center at Boston Medical Center and the Griffin Foundation for their ongoing support of the H.E.A.R.T. (Haitian Earthquake Aid and Relief Team) Initiative.

CONTACT INFORMATION

For all inquiries pertaining to the Haitian Mental Health Forum or to obtain copies of this Monograph, please contact:

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Appendix C: Feedback Form

We would like to obtain your feedback and suggestions. Please take a few minutes to complete this questionnaire and return it to the address listed below.

1) How would you rate the overall presentation of the Monograph?

☐ Excellent ☐ Good ☐ Unsatisfactory

2) In reference to the content of the Monograph (data and program content), how would you rate its usefulness?

☐ Not useful at all ☐ Useful ☐ Very useful

3) Have you used this Monograph in your work?

☐ No ☐ Yes If yes, how?

_______________________________________________________________________________________
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4) Have you shared this Monograph with other colleagues?

☐ No ☐ Yes If yes, with whom?

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5) Is there any other information that you would have like to see in the Monograph?

_______________________________________________________________________________________
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_______________________________________________________________________________________

Please mail or fax the completed form to:

Gemima St. Louis, Ph.D.
SPARK Center at Boston Medical Center, 255 River Street, Boston, MA 02126; FAX#: (617) 534-2057
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