The Relevance of Cultural Competence to the Practice and Use of Picuristes among Haitian Immigrants in Florida

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WHAT IS CULTURAL COMPETENCE?

• Construct:
  • “Being capable of adequate understanding and sufficient learning of shared meanings and behaviors in a social activity setting with external and internal learning patterns that are constantly changing” (Lum, 2011, p. 18)
  • Meaning:
    • A relational and dialogical process vs. worker’s competence
    • Dialogue: interchange; discussion; mutual understanding involving egalitarian relationship of equal status and rights
    • Must include cultural proficiency as an operational variable
    • Assumption that the worker AND the client must work together to be proficient and competent in cultural ways of coping with life problems

CULTURAL COMPETENCE

• Knowledge about specific cultures, history, health beliefs, strengths and structural violence
• Understanding how organizations and institutions enhance or impede services
• Understanding of culturally based behaviors and expectations
• Understand Social Determinants of health AND HEALTH PRACTICES (Troutman)
• Helper wellness and self-awareness, humility and willingness to learn, respect and open-mindedness, nonjudgmental attitude

TRADITIONAL HAITIAN GREETING

➢ In the Haitian community where I was born, the offering of honor by a visitor is an acknowledgement that the audience merits the respect that is inherent in the offering of honor
➢ The response of the audience in returning a greeting of respect to the visitor allows the visitor to proceed with the purpose of the visit
➢ “Honè!”
➢ Established Community Member (s): “Respè!”

Background

➢ Globally, preventable infectious diseases (infectious diseases that are transmittable through blood and other bodily fluids) continue to impact us, in spite of important scientific advances in the treatment and prevention of such diseases (National Institute of Allergy and Infectious Diseases [NIAD], 2005; World Health Organization, 2007).
➢ Hepatitis A, Hepatitis B, Hepatitis C, tuberculosis, malaria, and the Human Immunodeficiency Virus (HIV) disproportionately impact persons of color (National Center for Infectious Diseases: Division of Viral Hepatitis, 2005; UNAIDS, 2004).

Background (Cont.): Global Impact of HIV

➢ The majority of the more than 40 million people who are HIV seropositive reside in Sub-Saharan Africa, and in the Caribbean where Haiti is located (World Health Organization Working Group on Global HIV/AIDS, 2005).
➢ There are between 800,000 – 1,000,000 Haitians in the United States.
Background: HIV/AIDS and Haitians in NIR Category

- Florida Haitians who are seropositive for HIV
- At one point, over 60 percent recently reported non-identified risk (NIR)
- Haitian mode of acquiring the virus does not fall within the most commonly known risk factors for HIV
  - engaging in risky sexual behavior
  - sharing of needles and syringes in the context of intravenous drug use (Florida Department of Health, Division of Disease Control, 2005; UNAIDS, 2004)

Background: Large Presence of Haitians in the U.S. and in Florida

- Florida has the largest Haitian presence in U.S. followed by New York and Boston
- 117% increase of Haitian immigrants in FL
- MDC’s Little Hall – largest concentration of Haitians in the state
  - Underestimation (Devieux, 2005; Raines, 2001)
  - Economically Disadvantaged (Portes & Rumbaut, 2001)
  - Normally without health insurance (Aparicio & Krestedema, 2004)

Meaning of Picuriste (P-Q-RISTS)

- Picuriste
  - one who injects or one who gives injections
- Picures
  - can refer to the needle used in injections, the substance in the syringe, or the injection process

Practice and Use of Picuristes in Haiti

- Picuristes in Haiti
  - Use needles and syringes to inject vitamins, antibiotics and other substances
  - Reuse needles and syringes discarded by health care professionals (Clérisme, 1979; Clérisme, Antoine, & Lyberal, 2003)
  - Inject Haitians of all ages:
    - 50-70% of children (Clérisme, 1979; Clérisme, Antoine, & Lyberal, 2003)
    - 60-70% of adults (Clérisme, 1979; Clérisme, Antoine, & Lyberal, 2003)
- Picuriste use was implicated in the progression from HIV to AIDS (Pape, et al., 1986)

Summary of Pape’s Study (1986)

- AIDS Patients reported receiving more frequent injections prior to the onset of their diagnosis than “healthy” controls
- Over 94 percent of the AIDS patients reported receiving injections prior to the onset of HIV/AIDS, compared to 58 percent of the controls
- Of the 10 AIDS patients with no known HIV risk factors, 100% had received injections in the 5 years prior to being diagnosed with HIV/AIDS.
  - Source of injections: Picuristes

WHY STUDY INJECTIONISTS SUCH AS PICURISTES:

- Underserved
  - An early National Institute of Drug Abuse (NIDA) memo documented that the use of “picurists” continues among U.S. Haitians, and that it is a possible route of HIV transmission for U.S. Haitians (NIDA, 1985)
  - Lumped into “Black non-Hispanic” category
- There are factors which influence Haitians and others who share their belief system to engage injectionists
  - Cultural Definition of Health Access
Why Study Injectionists such as Picuristes (CONT)

- Criteria for Safe Injections: Do not result in harm or risk to the injector, recipient, or the community (World Health Organization (WHO), 2000)
  - Adequate training or licensure by the injectionist
  - Adequate selection, preparation and sterilization of the site of injection prior to injection
  - Use of sterile rubber gloves by the injectionist
  - Necessity of the injection for the prevention or treatment in the particular case
  - The proper injection of the substance without causing negative side effects such as abscesses or swelling at the injection site
  - Safe and proper discard of injection materials (Simonson, et al., 1999)

Gaps Addressed by Picuriste Study

- Knowledge on the use of picuristes by Haitian immigrants living in the United States was not available
- Knowledge on factors influencing the practice and use of picuristes in the U.S. was unavailable
- Knowledge on the safety of injections administered by picuristes and benefits and risks associated with the health practice in the U.S. were also unavailable
- The use of picuristes had not been considered in relation to the occurrence of preventable infectious disease among Haitian immigrants who report non-identified risk or in relation to whether or not they should be classified as safe or unsafe

Summary of Study Significance

- Florida is currently the number one place of settlement for Haitian immigrants (American Community Survey, 2008)
  - Miami-Dade now has the largest concentration of Haitian immigrants in the nation, followed by Kings County, N.Y. and Broward County, Florida (Florida Dept of Health, 2003)

- In Florida, > 60% of Haitian immigrants who tested positive for HIV/AIDS reported “Non-identified risk” (Florida Dept of Health, 2003)

- Yet, over two decades after the NIDA memo (Sohmer, et al., 1999), we have not been able to understand the practice and use of picuristes among Haitian immigrants

- There remain gaps in social science and health research knowledge on Haitian immigrants

- Research Questions
  1. How is the use of picuristes socially constructed among Haitians in the U.S.?
    a. How do beliefs and meaning about the place and usefulness of picuristes injections develop among Haitian immigrants?
    b. Do traditional Haitian health beliefs influence the practice and use of picuristes in Miami-Dade?
    c. Are there traditional beliefs about the nature of relationships with one’s healer that influence the practice in Miami-Dade?
    d. Are there alternative health options perceived by Haitian immigrant users of picuristes?
    e. Are there benefits or risks perceived?

- Research Questions (Cont.)
  2. Are there sex differences in the practice and use of picuristes?
  3. Are there gender differences?
  4. Does length of time in the U.S. influence picuriste practice and use?
    a. Is language chosen for interview associated with picuriste practice or use?
  5. Do transnational ties with others in Haiti influence health and/or illness for them?
  6. What proportion of a purposive sample of surveyed Haitian immigrants have used picuristes in Miami or in the U.S.?
    a. Within this survey sample, what might emerge as covariates of picuriste use?
Summary of Methods

- Mixed-method design and non-probability sampling procedures
  - Venue-based targeted purpose sampling, snowball sampling, convenience sampling
  - Collected face to face, semi-structured interviews of 10 picuristes and 25 users (to obtain an emic or insider account)
  - Collected 205 surveys, developed based on the findings from the interview data

- Rationale for mixed-method design
  - Allowed triangulating in sampling, data collection, data analysis and articulation of findings (De Paulo, 2000; Flick, 2006; Greene & Caracelli, 1997)
  - Allowed collection of estimate of picuriste use beyond those interviewed
  - Allowed comparison of the data obtained through each method, and confirmation of interview results through surveyed sample (Flick, 2006; Morse, 1994, 2000)

Analysis
- Content analysis (Atlas.ti)
- Univariate, bivariate and multivariate analysis (SPSS 14.0)

Theoretical Framework

To explore both how the practice begins and develops, as well as benefits, risks, and cultural factors involved, I employed triangulation in selecting a conceptual framework

- Symbolic Interactionism (SI) (Blumer, 1969; Goffman, 1959)
  - People interpret the observed actions of others and derive meaning on how to act in various situations through the use of language and symbols, in interaction with those who share their socio-cultural and historical context

- Health Belief Model (HBM) ( Becker, 1974)
  - Cues to action, perceived benefits, barriers and threats, self efficacy and action

- Explanatory Model of Illness (EMI) (Kleinman, Eisenberg, & Good, 1978; Kleinman, 1980)
  - Etiology, social significance, emic and etic distinction, severity

- Explanation of illness and those of the scientific community's (Emic vs. Etc)
  - Emic
    - Cultural distinctions that are meaningful to members of the particular group
  - Etc
    - Outsider's perspective, i.e., that of conventional practitioners

KEY CONCEPTS FROM HEALTH BELIEF MODEL

- Cues to Action
  - Symptoms of disease or environmental factors that motivate to action

- Perceived Threat
  - Susceptibility to and severity of a negative health condition and its anticipated consequences

- Perceived Benefits
  - Bael in the efficacy of the strategy aimed at mitigating the perceived threat

- Self Efficacy
  - Belief in one’s ability to do what it takes to achieve a desired end

- Action
  - Treatment Seeking or Service Utilization

KEY CONCEPTS FROM EXPLANATORY MODEL

- Explanation of illness and those of the scientific community's (Emic vs. Etc)
  - Emic
    - Cultural distinctions that are meaningful to members of the particular group
  - Etc
    - Outsider’s perspective, i.e., that of conventional practitioners

- Etiology
  - Cause of Symptoms

- Severity
  - Nature, course and consequences of illness

- Social significance
  - What constitute appropriate treatment of illness: EM determines what decision they will make when they become ill

Results: Interview Findings

<table>
<thead>
<tr>
<th>Characteristics of Picuristes</th>
<th>Proportion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>10%</td>
</tr>
<tr>
<td>Education Level</td>
<td>10%</td>
</tr>
<tr>
<td>Length of Time in U.S. (years)</td>
<td>10%</td>
</tr>
<tr>
<td>Number of Clients In Miami</td>
<td>10%</td>
</tr>
<tr>
<td>Number of Picuristes Injecting HIV Clients</td>
<td>10%</td>
</tr>
</tbody>
</table>
Findings by Category and Participant Group

**Characteristics of Users**

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Males (n=8)</th>
<th>Females (n=12)</th>
<th>Total (n=20)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years)</td>
<td>13</td>
<td>18</td>
<td>15.5</td>
</tr>
<tr>
<td>Nativity</td>
<td>Non-U.S.</td>
<td>U.S.</td>
<td></td>
</tr>
<tr>
<td>Length of time in U.S. (years)</td>
<td>5</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>Education (years completed)</td>
<td>&gt;10</td>
<td>8</td>
<td>9.0</td>
</tr>
</tbody>
</table>

**Risks reported and/or noted:**

- Improper discard of used needles and syringes
- Reuse of injection equipment
- Improper or overuse of antibiotics
- Improper or unsafe injection practices
- Inadequate hygienic practices
- Improper or unsafe use of healthcare and medical equipment
- Improper or unsafe use of blood, blood products, and other body fluid handling
- Improper or unsafe use of antiviral medications
- Improper or unsafe use of vaccines
- Improper or unsafe use of antiretroviral medications
- Improper or unsafe use of medication
- Improper or unsafe use of diagnostic tests and procedures
- Improper or unsafe use of medical devices
- Improper or unsafe use of medical equipment
- Improper or unsafe use of laboratory tests
- Improper or unsafe use of medical devices
- Improper or unsafe use of healthcare and medical equipment
- Improper or unsafe use of blood, blood products, and other body fluid handling
- Improper or unsafe use of antiviral medications
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- Improper or unsafe use of blood, blood products, and other body fluid handling
- Improper or unsafe use of antiviral medications
- Improper or unsafe use of antiretroviral medications
- Improper or unsafe use of medication
- Improper or unsafe use of diagnostic tests and procedures
- Improper or unsafe use of medical devices
- Improper or unsafe use of medical equipment
- Improper or unsafe use of laboratory tests
- Other specific negative health outcomes:
  - Abscesses, allergies or fevers
  - Improper or unsafe use of healthcare and medical equipment
  - Improper or unsafe use of blood, blood products, and other body fluid handling
  - Improper or unsafe use of antiviral medications
  - Improper or unsafe use of antiretroviral medications
  - Improper or unsafe use of medication
  - Improper or unsafe use of diagnostic tests and procedures
  - Improper or unsafe use of medical devices
  - Improper or unsafe use of medical equipment
  - Improper or unsafe use of laboratory tests
  - Other specific negative health outcomes:

**Finding:**

- **Main Finding: Rekonnèt**
  - Relationship of reciprocal trust among individuals who not only recognize each other physically but the recognition is associated with trust; particularly if this relationship of reciprocal trust originated in Haiti.
  - It is the necessary and sufficient rationale provided by the users and the Picuristes for obtaining an injection from an individual who has not been trained.

**Illustrative Quotes for Rekonnèt (Picuristes):**

- "It is not only here they have come to rekonnèt me. They rekonnèt me since Haiti. It is a moun pa-m (literally, a person on mine, figuratively, a person I am close to) from Haiti— that I trust and the person himself was habituated with me, then they have konfysans (trust) in the person to come and give them a picure (injection)."

**Illustrative Quote for Rekonnèt (Users of Picuristes):**

- "Denise: If you don’t rekonnèt a person, you don’t just go drop yourself in their hands. Because your life is important more than everything else [sic]. You can’t just up and go take a picure from someone who you don’t rekonnèt...

**Findings by Category and Participant Group (Cont.):**

- **Main Finding:**
  - Orals (100% of the picuristes interviewed described rekonnèt as the necessary and sufficient cause for accepting to inject a client and for the client coming to seek their services.
  - All (100%) of the picuristes users stipulated rekonnèt as an essential element in the decision to seek a picuriste for an injection.

**Voice:**

- "One tells the other one refers the other..."
Findings by Category and Participant Group:

**Biological Sex and Gender Influences**

- **Clients**:
  - 50% reported an equal proportion of male and female clients.
  - Remaining 50% reported mostly female clients.
  - 100% stated that substance treatments were gender-specific and that they have the ability to treat people on their biological sex and on their roles as Haitian women.

- **Users**:
  - 66% female.
  - Both males and females described gender roles that increase the vulnerability of women to illness and, therefore, increase the likelihood that they would seek picores for medical injections.
  - 100% stated that women have their own maladies
  - 76% reported using a same sex picores.
  - Of those 95% stated that the same sex picores were chosen on purpose, because of culturally endemic gender mandates related to modesty and because of sex-specific symptoms.
  - Suggests consonance with literature that states gender constructed notions and roles persist even after leaving country of origin.

**Influence of Transnational Ties**

- **Picores**:
  - 90% traveled to Haiti for substances.
  - 90% reported that clients obtained substances directly from Haiti personally, or through friends and relatives who travel back and forth.

- **Users**:
  - 100% reported some combination of the following:
    - Their picores traveled from Haiti to inject them.
    - They had sent to Haiti to purchase the substance injected.
    - They had personally traveled to Haiti for the prescription or substance.

- **Illustrative Quotes for Findings**:
  - 3/7/2012

**Risks and Consequences**

- **Disease (Picores)**: When the person leaves the picores, if he takes him out of the area, he leaves it through the blood. (Specifically, it travels or circulates throughout one's entire bloodstream to the body.)

- **Health Access**:
  - Since (Picores): The person doesn’t have time here, they need help. They might have gone to the sick and — ’til 50 people waiting when they get there, and they get sick, and when they wait, they lose their whole company. That’s really difficult for them, understand?

- **Are there benefits perceived with the use of picores?**
  - Benefits:
    - Direct action of substance in blood
      - **Disease (Picores)**: When the person leaves the picores, if he takes him out of the area, he leaves it through the blood.
    - Health Access:
      - Since (Picores): The person doesn’t have time here, they need help. They might have gone to the sick and — ’til 50 people waiting when they get there, and they get sick, and when they wait, they lose their whole company.

- **Are there risks perceived with the use of picores?**
  - Risks:
    - Negative Health Outcomes for Users:
      - Olig (User): You can take a picores and something gives you a fever and the person who you think is the picores is up. When Picuristes singing, they think it’s a real long time to get better / I thought that’s a piggy tail.
RESULTS: Survey Findings (n=205)

Results: Bivariate Analysis of Survey Data (n=205)

Results: Covariates of Picuriste Use in Survey Sample

Summary

Among Objectives were:

1. To understand the practice and use of picuristé locally
   - Finding (a) Beliefs about benefits, risks, cues to action, usefulness of picuristes' injections, alternative health options, sex and gender influences on health and on alternative treatment options all develop and persist in the same manner.
   - Through SI, beginning in Haiti and continuing locally
   - There does not appear to be a clear effect of length of time in the U.S. or on language chosen for interviews on the decision to practice or use
   - Transnational ties support the practice and use of picuristes locally
   - A core cultural trait that is necessary and sufficient to inject or to accept a picuriste injection
   - Defined: health access
   - Defined: effective disease prevention and health attainment

Proposed Framework Derived from Data: Emergence and Persistence of Picuriste Use in Miami-Dade
Findings from this study inform about factors which are culturally significant in defining health access for those who participated:

1. They can be tested in future studies with other Haitian immigrant enclaves
2. They can be applied to research with other immigrant groups who have comparable health beliefs and expectations of health care, and who face similar economic, cultural and time barriers to conventional health care
3. They can be used to train nurses, public health officials and staff, social workers, educators, and others involved in health service delivery, prevention, education, policy development, advocacy, and disease prevention efforts
4. They can be used in developing policies aimed at reducing costs of conventional health care and associated wait time.

Limitations of Study

1. Targeting a hidden sample of picuristes and users and, therefore, not generalizable, except to those who resemble the participants in the documented characteristics
2. Use of one-time interviews, conducted in the context of a descriptive study
3. Findings therefore provide a snapshot of Miami-Dade Haitian picuristes and users within the particular period of time in which the study was conducted
4. Future research could employ repeated interviews and surveys of the same individuals, as in Stepick and Stepick (1990)

Recommendations

Given how culturally embedded the health beliefs that influence picuriste practice and use in Miami-Dade are, the application of specific findings from this study in developing prevention education, rather than attempting to change or stop the practice itself are suggested:

- Example: Harm Reduction Approach in designing education health interventions that include:
  - Knowledge standards for safe injections
  - Demonstration of findings concerning risks of unsafe injections through the same venues from which participants were recruited
  - Utilizing persons who share the relevant relationship with picuristes, the users and others whom they might recommend in the future
  - Including the various healers (Vodou priests, leaf doctors, etc.) in dialogues about safe health practices

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- Meaning:
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  - Dialogue: interchange; discussion; mutual understanding involving equalitarian relationship of equal status and rights
  - Must include cultural proficiency as an operational variable
  - Assumption that the worker AND the client must work together to be proficient and competent in cultural ways of coping with life problems

Conclusion

Although exploratory, this study has:

- Resulted in a tentative model grounded in the data
- Highlights the importance of cultural competence in relation to Haitian health beliefs and hidden practices
- Has laid out key ideas regarding the development of a conceptual framework for developing future hypotheses about picuriste practice and use, and other Haitian immigrant health-seeking behaviors
- Has documented that language and symbols in interaction with those who share a relational relationship are key in the development of beliefs about the place and usefulness of picuriste injections
- Has documented that Haitian Vodou health and religious beliefs, the importance of traditional texts and the place of conventional healers are learned in the same way and persist in the same way as picuriste use.

Directions for Future

Using the Model Derived from this Study:

- Investigate the practice of picuristes among other immigrant groups
  - 30% of picuristes reported injecting Latino migrants, versus ethnic use of picuristes was reported by 4 of the picuristes users
- Investigate the place of picuriste injections
  - In relation to specific health status indicators
  - In a longitudinal study that follows picuriste users in relation to health and disease
  - In relation to specific economic barriers
- Work in collaboration with health professionals and public health clinics that serve clients who present with similar health beliefs and symptoms as those identified by persons interviewed in this study
- Document use or non-use of picuristes among such clients
- Document the various preventable infectious diseases for which they receive (or) treatment
- Establish whether or not picuriste use is a vector for preventable infectious disease among those clients