Understanding and Working with Haitian Immigrant Families

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SUMMARY. This conceptual analysis explores the Haitian cultural experience in the U.S. and offers a model for working with Haitian families. Relevant factors include: (1) an understanding of the history and culture of Haiti; (2) migration patterns of Haitian families to the U.S.; and (3) the experience which most Haitian families must endure upon arrival. [Article copies available for a fee from The Haworth Document Delivery Service: 1-800-342-9678. E-mail address: getinfo@haworth.com]

McAdoo (1993, p. 30) suggests that “the notion of family ethnicity has come to mean the interaction of all elements that occur within ethnic family constellations.” Working with Haitian families presents a distinct challenge in engaging persons whose interaction with others has resulted in their having learned passivity as a coping mechanism. For many Haitians, being passive has been a survival technique both in Haiti and in the United States. Through the generations, Haitian people have found that the maintenance of non-assertiveness can be useful in social functioning.

Several points are germane to successful practice with Haitian families. These include: (1) an understanding of the history and culture of Haiti;

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(2) the migration patterns of Haitian families to the United States; and (3) the experiences that most Haitians endure upon arriving on these shores. In the past two decades, thousands of Haitians fled the continued poverty, violence, and political repression and risked their lives to immigrate to the United States. They have been greeted with mixed responses. Alternatively, the federal government has labeled them as economic, rather than political refugees and/or as carriers of dreaded diseases (Stepick, 1992; Wilk, 1985/86). Haitians have heighted the conflict between Cubans and African-Americans and other Caribbean immigrants by accentuating the disparity between the official treatment of Cuban “rafters” and Haitian “boat people” (Feagin and Feagin, 1993).

The social work practice literature on working with Haitian families is relatively sparse. Bastien (1995) recently offered a foundation for beginning to understand the nature of the Haitian-American culture and experience at home and in this country. He presents a broad-brushed description of the Haitian culture and perspective. Wilk’s (1985) exploratory study concluded that Haitians are a unique people whose determination to survive can be used productively in practice. Most of the remaining work useful in practice with Haitian families is derived from the sociological and/or anthropological literature. Of special note here is Laguerre’s seminal work on Haitians in New York, American Odyssey: Haitians in New York City (1984). It provides an excellent understanding of many of the cultural adaptations to life in urban America, particularly in relationship to health, illness, and housing. One notable contribution to mental health practice with Haitians comes from a Haitian scholar, Claude Charles. Charles (1986) points out that there are usually three types of Haitian clients: (1) persons coming for reunification with families already in this country; (2) persons who have friends that form a support network; and (3) those individuals who come alone. Bastien (1995) also identifies the family household patterns: (1) families with children who were born in this country; (2) those with children born in Haiti and who joined parents already economically established in this country; and (3) those “mixed families” with children born in Haiti and those born in this country. These typologies are important in understanding the nature of the Haitian personal and family ethnicity.

It is a central premise in this article that the elements of Haitian individual and family life result in a pattern of behavior that might be referred to as a culturally induced form of passivity. This paper will explore the impact of the socio-historical, cultural, and migratory experience of Haitian families on the processes of social interaction and social functioning. Finally, we shall suggest several important qualities that social workers
can incorporate to enhance practice effectiveness in working with Haitian families.

**THE HAITIAN HISTORICAL EXPERIENCE**

It is impossible to imagine the saga of a people more fraught with disappointment and denial than that of the people of Haiti. Born out of the revolution of the slaves of French plantation owners, led by African slave generals, who successfully defeated their colonial masters, Haiti emerged from this glorious beginning only to be treated as a pariah by its neighbors in the western hemisphere.

The nation of Haiti geographically covers the western portion of the island of Haiti, "land of mountains" as the original native people called it. Renamed "Hispaniola" by Columbus who arrived on the island in early December of 1492, the Spanish developed the eastern portion, now known as the Dominican Republic, but had little interest in the island's western half. Later colonized by the French, Saint Domingue, as the French called the colony, had at the turn of the 19th century, a total population of almost 600,000. Of these, 500,000 were slaves while 50,000 were mulattos and free people of color.

Beginning in the early 1790s, the Haitian independence revolution continued for 13 years and was characterized by brutality and bloodiness. When it ended, over 100,000 persons had been killed including almost all of the whites who were unable to escape. Following the revolution, the immediate concern was establishing a government and providing for a national defense since the European colonial powers and the newly independent United States with its slave population in the American South some 900 miles away, presented threats to the newly freed populace. Unfortunately the remaining segments of Haitian society, the mulattoes and the African peasant masses, had very different ideas as to the best direction for the country's future (Bellegard-Smith, 1990).

Haiti's political and economic isolation set the stage for the development of much of its subsequent turmoil. Originally created to foster much needed educational reform, a repressive, elitist government soon emerged. In addition, the early rulers spent much of the new nation's meager economic resources in fortifications to guard against intervention by foreign colonial powers.

In 1915, the United States sent the marines supposedly to protect Haiti from European intervention during World War I. Yet, they remained and ruled the nation for nineteen years, leaving in 1934. Unfortunately, the military occupation simply "perpetuated the atmosphere of arbitrary au-
thorititarianism to which Haitians were long accustomed” (Rotberg, 1988, p. 104). Little was done to stimulate economic growth. In fact, the most significant result was the creation of an armed military that would become the focal point for much of the continued instability of the Haitian 20th century. Throughout this period, Haitians had little say in the running of their country. America’s attitude toward Haiti was perhaps best typified by a comment attributed to then Secretary of State William Jennings Bryan who expressed his astonishment at having to diplomatically negotiate with “niggers speaking French” (Bellegard-Smith, 1990, p. 77).

In 1957, the oppressive Duvalier regime came to power with the advent of Francois Duvalier, known as “Papa Doc” who declared himself as President for life. He died in 1971 and was succeeded by his son, Jean-Claude “Baby Doc” Duvalier who ruled until his exile in 1986. The Duvalier period was distinguished by its brutal repression and economic excesses. In the cities, the severity of the repression was marked by the fanatically cruel paramilitary called the “Tonton Macoutes.” In rural areas, petty government officials regularly extorted the population with no fear of reprisal from either the people or the elitist government in Port-au-Prince (Stepick and Portes, 1986). Typical of the economic excesses were the multi-million dollar wedding of Jean-Claude and the subsequent rape of the national treasury by his wife, Michelle, whose shopping trips to Paris and New York became legendary (Segal, 1988). After several successive military dictators, Haiti elected its first democratically elected President, Jean-Bertrand Aristide in 1991. Overthrown via a military coup after only a few months in power, Aristide was returned to power by the American-led invasion of 1994.

The Haitian people have historically been deprived and abused. Never has there been a period of stability and social change when the general population could expect its government to provide the resources necessary to enhance social and economic growth, and yet it is this distinct history and culture which sustains and connects all Haitians to one another.

THE HAITIAN CULTURAL EXPERIENCE

Language

Although isolated and subjected to ongoing internal political strife and economic injustice, the Haitian people have a rich and diverse cultural tradition. Foremost among these was the development of a linguistically unique language called Creole which was accepted in 1987 as Haiti’s
second official language. The slaves in Haiti created this language by melding their various African dialects with the French of their former masters. The devaluation of Creole by the elite mulatto classes and their preference for a neo-colonialist style of education had previously branded Creole as the language of the illiterate poor. However, its rich folklore and other oral traditions continue to make it useful in work with virtually all Haitian families (Bastien, 1995).

**Religion**

Religion is extremely important in the Haitian culture. Catholicism, the official religion of Haiti, has always been practiced by elite and poor alike. This fact notwithstanding, the African-based folk religion, “Vodoun” is also a powerful force in much of Haitian life. While not practiced by all Haitians as a religion per se, this belief system still shapes much of the world view of the Haitian people. An understanding of its importance, particularly as it affects attitudes about mental health, is essential in working with Haitians (Charles, 1986).

Also strong among Haitian immigrant families are the various fundamentalist and evangelical Christian denominations, including Baptist and Pentecostal. These groups have grown in importance in Haiti as well, with missionaries providing resources and medical assistance to impoverished families in both city and countryside.

**Identity**

A strong sense of cultural identity is evident in the Haitian people. Charles (1986) points out that Haitians feel a sense of national pride, while simultaneously feeling a sense of personal impotence and loss of self-esteem based on the low valuation of Haiti and Haitians by the rest of the world. This strong cultural identity is typified by the fact that unlike other countries who have endured protected American military presence, Haitians have resisted many American cultural influences. One interesting example is that baseball is not played there.

With the exception of those Haitians whose families have been in this country for more than three decades, most Haitian families do not wish to be identified as African-Americans (Stepick, 1923). Recent immigrants from Haiti perceive Black Americans as a “downtrodden group,” and though Haitians are sensitive and appreciative of the support in combating racism that African Americans have provided, Haitian parents worry that their children will begin to acquire negative behaviors and attitudes popularly associated with Black urban youth.
Haitian youngsters are often ambivalent about the negative commentary about their nation and culture perpetuated in the popular press and media. Miller (1984) gives accounts of Haitian youths in Miami who denied their Haitian identity by refusing to speak Creole in order to evade the personal pain of association with this poor, illiterate, and powerless country. In point of fact, Haiti continues to be among the world’s most destitute nations with 45% of the wealth owned by 0.8 percent of the population (Bastien, 1995; Stepick and Portes, 1986).

**Family Constellations**

Haitian family life is central to understanding the ethnicity of these people. Extended family life is central to understanding the ethnicity of these people. Extended families are the rule with even distant relatives, playing significant roles in the acculturation and assimilation process. Families with children born in the United States have enhanced legal status and legitimacy when compared to other Haitian born family members since the American born children automatically receive U.S. citizenship.

Haitian born children brought to this country are sometimes less valued by Haitian families. An anecdote by a Haitian colleague elucidates this point.

A Haitian mother is going home with her two children one born here and the other born in Haiti. She stops at McDonalds and buys a hamburger for the American born child. When the other child asks for a hamburger as well, he is told that he can eat mushroom rice since he is Haitian. His brother must eat American food since he was born here and is an American.

Marriages among the Haitian middle class are typical of marriages in this country. However, among Haitian refugee immigrants, several types are evident. These include the "placage" which is an informal union that may last for life. It is common for men who migrate to this country to leave a wife and children in Haiti and form another household and conjugal relationship in the United States. Some men may have several such relationships simultaneously. Though less common, there are also instances of women initiating such relationships after leaving husbands in Haiti.

Sex roles in Haitian families follow a male-dominated model. Haitian men are the primary decision makers. However, family councils are often used to problem-solve major issues (Bastien, 1995). Among recent Haitian
immigrants, sex roles have become blurred. Women can sometimes secure employment more easily than their husbands. Thus resultant economic independence has implications for both middle-class and poor Haitian women. Charles (1986) points out that in Haiti, all middle-class women had help to do the housework where in the United States, they must take care of a household and hold a job. For poorer Haitian women, employment gives them increased power over household decision-making, which can sometimes lead to conflict and even violence between the partners.

Although some scholars suggest that spousal and child sexual abuse are new phenomena in the Haitian community (Charles, 1986), it must be pointed out that such behavior has historically existed in Haiti. However, due to cultural and legal constraints, little official attention was paid to it. Charles also believes that the problem of sexual abuse (particularly of children) is more a question of opportunity than cultural acceptance. In Haiti, living patterns and home architecture allows for the ever-present "third eye." That is, there is always somebody monitoring the behavior of those within the family and the neighborhood. This is particularly true with girls and young unmarried women. In the United States, housing styles were designed with privacy as a major concern. Having this closed-door environment allowed people to engage in behaviors for which there would have been less opportunity in Haiti. Nonetheless, growing anecdotal evidence with Haitian adolescents suggests that there may have been more sexual abuse of children in Haiti than was previously suspected.

Another aspect of Haitian family life causing difficulties in the acculturation process is the issue of how best to discipline children. As Stepick et al., point out, "Haitian discipline is swift and physical. This conflicts with American family values which frequently view such corporal punishment as abusive. Haitian parents have found themselves in trouble with protective services because of their disciplinary patterns, and some children have now learned to manipulate parents by threatening to report their parents to the authorities" (1994, p. 21).

**Occupations and Employment**

Stepick (1992, p. 67) writes that the official government and other group discrimination made for policies "of persecution legal confusion and social isolation [that] have all contributed to Haitians' dismal socioeconomic conditions in the United States." With median earnings of $680.00 per month, Haitians in Miami have made less progress than other immigrant groups such as Mariel Cubans or Vietnamese refugees (Stepick, 1992). Those employed tended to have low wage service sector jobs that required little skill or formal training. Many Haitians are self-employed in
small businesses that cater to the Haitian community rather than to the community at large (Stepick et al., 1994). Laguerre (1984) pointed out that among Haitians in New York, many work in the health care and eldercare industries.

*Education*

Because education was so limited in Haiti and so many people were denied access to formal learning, education is important to many Haitians. Some Haitians view learning English and advancing one's education as a means to improving their economic opportunities. Large numbers of Haitians can be found in English as a Second Language (ESOL) classes and taking advantage of community college and night school courses. However, other Haitians are less aggressive and merely seek proficiency at a basic level that will allow them to function in unskilled jobs.

Some older Haitian students have run into difficulties with American schools (especially higher education) since education in Haiti is primarily based on rote learning. Abstract thinking and conceptualization may initially be problematic until Haitians adjust to American teaching styles. As more Haitian children complete their schooling here, problems similar to those of other oppressed groups in the United States are increasing with parent-child conflicts over education becoming more common place. In their recent report to the Dade County Public Schools, Stepick and his associates conclude that “the most disturbing [educational] trend is an apparently increasing proportion of Haitian students who are succeeding academically but not behaviorally and are acting out in disruptive and anti-social ways” (Stepick et al., 1994, p. 18). While no empirical data is currently available to support the contention, anecdotal data suggests that Haitian students who are expelled from school rarely return.

*Health and Illness*

In Haiti, only the elite could be assured of access to adequate health care. In fact, there are more Haitian physicians in Montreal and New York than there are in Haiti (Laguerre, 1984). Additionally, those physicians in Haiti tended to practice in urban centers leaving rural people with little or no access to western medical care. Most families treat themselves with home remedies and folk medicines. Some illnesses are attributed to physical factors such as “hot-cold equilibrium” in which the person believes that body temperature fluctuates in response to certain actions and activities thus leaving the body susceptible to illness from the opposite tempera-
ture extremes. It was this very belief that made Haitian immigrant mothers reluctant to take baths immediately after childbirth. Other illnesses are attributed to "gaz" (which involves such maladies as headaches).

Mental health problems may be attributed to supernatural origins (Charles, 1986). Severe mental disorders, including depression and anxiety, are sometimes explained through denial that the symptoms exist or through projection that the illness is caused by spirits summoned by an enemy. Family members or others may be accused of jealousies and of having employed supernatural means of responding to some interpersonal conflict. Social workers should be mindful of the potential for supportive therapy from Haitian healers in a collaborative fashion if the person's cultural reality suggests such treatment. In order to effectively work with Haitian clients, workers must first understand and then validate the client's particular cultural beliefs and experiences.

THE HAITIAN MIGRATORY EXPERIENCE

Haitians have been coming to the United States since the 17th and 18th centuries. Many Frenchmen traveled between Louisiana and Haiti with their families and servants during the slavery era in both countries. During the Haitian independence revolution in 1804, plantation owners fortunate enough to escape the wrath of the slave army, fled to the United States.

Since Haitian independence, migration patterns to the United States have come on the heels of internal political instability. Large numbers of Haitians migrated to the United States during the 19th century (especially following the Civil War) and established themselves primarily in Northern cities. Some went directly to Canada while others fled to Europe. Haitians who migrated during the United States military occupation of 1915-34 largely assimilated into the African-American population and lost much of their cultural distinctiveness. However, those who migrated later, have tended to remain somewhat identifiable as a separate immigrant group.

Prior to the recent exodus of "boat people," the primary migration era from Haiti to the United States occurred during the Duvalier regime. Initially, many of "Papa Doc's" upper class political opponents left. They were followed in the mid-1960s by the middle classes and later by the impoverished poor. The first boatload of undocumented Haitians detected by the U.S. Immigration arrived in 1963 and immediately requested political asylum (Stepick, 1992). However, U.S. immigration officials refused to accept the claim and returned the boat and its human cargo to Haiti.

By the late 1970s, boat loads of Haitians began to arrive in Florida in significant numbers. Estimates range from 50,000 to 70,000 illegal immi-
grants arriving by boat during the period 1977-1981 (Stepick, 1992). Several studies of migration patterns suggest these immigrants were rural peasant Blacks who were perceived by the American public as being disease ridden and poverty-stricken (Fjellman and Goodwin, 1985; Portes and Stepick, 1985; Stepick and Portes, 1986; Stepick and Stepick, 1990). In the eyes of the American government and its constituents, the Haitians were economic and not political refugees.

Because the Haitian “boat people” were seen as economic refugees by the United States government, they were not allowed into the United States, but were held in detention instead. During the 1980s, a little-used missile base left over from the Cold War located south of Miami was converted into a holding area for undocumented immigrants from Haiti and other parts of the Caribbean and Latin America. The facility is spartan and the American media played up the images of men, women, and children being held behind barbed wire. These were not scenes that Americans were accustomed to seeing in “the land of the free.” The most poignant examples were those unaccompanied children who were being held pending identification of relatives in the United States.

Once Haitian refugees arriving in the U.S. are released into the community, many find housing with relatives or friends pending their ability to secure work documents and employment. Resettlement programs assist with temporary housing for those who require it. Recent efforts to disperse refugees into other states have been somewhat successful, but most Haitians prefer to settle in Miami or in the New York area in order to be close to large Haitian populations and the social supports such clusters provide.

While many Haitians were admitted to this country, thousands more were returned to Haiti due to their inability to demonstrate a need for political asylum. The United States government recently opened an outdoor camp at the Guantanamo Naval base on the eastern tip of Cuba for refugees from Haiti and Cuba who were interdicted on the high seas while attempting to enter the United States.

CURRENT ISSUES FOR HAITIAN IMMIGRANTS

The previous discussion of the socio-historical cultural, and migratory experiences highlights some of the key issues that social workers should consider when working with Haitians. Many Haitians living in South Florida (and increasingly in other regions of the United States) have not been assigned immigrant status by the INS and remain in immigration limbo. Others are illegal immigrants who have never had any contact with INS and seek to maintain anonymity (Charles, 1989; Stepick, 1992). This
ongoing struggle with U.S. immigration sentences many Haitians to "a life in the shadows" (Stepick and Stepick, 1990). Many Haitians seek to minimize contact with any kind of authorities, since they may be uncomfortable in some dealings with social workers, particularly those from public agencies whose authority might threaten their tenuous legal status.

Access to health care is also a problem for Haitian immigrants. Many have no health insurance and must rely on public health facilities and programs (Wilk, 1985). Many tend to postpone seeing health professionals, fail to keep appointments, and do not bother with preventive health measures.

Social workers must be aware that family relationships have been affected by the acculturation and assimilation process. Children's traditional roles have been changed since they tend to assimilate faster and quickly learn to speak English. Children are called upon by schools, agencies, and other official institutions to translate for parents whose English proficiency is inadequate. The role shift assigns more power to children than is normally accorded them in Haitian families (Elisme, 1995).

Finally, Haitian attitudes toward themselves, their country, and their interaction with other groups (including African-Americans) are colored by their history, culture, and migratory experiences. Understanding and working with Haitians requires a sensitivity to this national attitude. "Nearly all [Haitians] share attitudes of rivalry, suspicion, and intrigue that are so apparent in national life" (Rotberg, 1988, p. 100). When combined with the immigrant experience these attitudes result in a family posture that is passive and disengaging.

**HAITIAN PASSIVITY AND SOCIAL WORK PRACTICE**

Social work practice has paid relatively little attention to work with passive clients. Passivity has traditionally been associated with an involuntary or resistant client (Epstein, 1985). Clients who are passive are frequently described as resistant. Clients who are resistant are seen as "reluctant, hesitant, evasive, withdrawn, hostile, sarcastic, or overly submissive" (Epstein, 1985, p. 262). Breton's (1985) taxonomy of "hard-to-reach" clients is illustrative of such passivity in involuntary clients. These include persons who, for their own reasons, are seen as "non-seekers," of services, "unpredictable," in their follow-up to services or "uninvolved," in the process of services provision. Haitian families frequently exhibit manifestations of these behaviors traditionally associated with such "hard-to-reach" clients.
However, Haitians have been conditioned to accept their circumstances as harsh and unresolvable. They have often come to believe that they have little choice in accepting whatever treatment they receive from others with little reaction. Feeling that their pain is inevitable, they frequently use their spiritual and physical capacities to hold out rather than to speak out.

The unresponsiveness of many Haitian families stems from the scarcity of practitioners who are knowledgeable about Haitian culture and family life and who can assist them in feeling comfortable when engaging social agencies. Sufficient Creole-speaking staff still are unavailable in most agencies, hospitals, or schools.

Haitian clients are uncomfortable in saying “no” because they feel that asserting their true feelings could result in reprisal, as it would have in Haiti. For instance, they may set appointments and not show up.

Haitian clients are socialized to accept what they perceive as the reality and would rarely suggest to the agency that its services are not meeting their needs. Access to services may be the real reason for failure to meet appointments. Locating services in the Haitian community is one possible solution to this dilemma. However, these agencies must involve Haitians when designing and planning services targeted at their community.

Lastly, Haitian families are typically “uninvolved” and will shrink from participation in the helping process. Breton (1985) suggests that at the core of the behaviors of the “uninvolved” is the issue of control. The notion of control is important to vulnerable groups such as immigrants since they experience such a lack of control or mastery in their own lives (Drachman, 1992). Yet in pursuing control, Haitians are cautious since their past experiences with control have ranged from disappointing to terrifying.

**PRACTICE IMPLICATIONS FOR WORKING WITH HAITIAN FAMILIES**

The practice model suggested for work with Haitian families and clients is an empowerment developmental stage model. As suggested by Solomon (1976) and Lee (1994), empowerment approaches that seek to counteract powerlessness through increasing power and resources are useful in addressing the needs of oppressed populations. Empowerment practice models encourage families and oppressed groups to pursue action-oriented behaviors that result in increased association with others with similar problems (Breton, 1994).

The empowerment model involves three stages: motivation, competence, and influence. Practice activities and strategies are identified with
each of these stages and directed at increasing the power of the clients, so that they can positively affect their environment and overcome those negative valuations that affect their social functioning.

**Motivation**

The motivation stage involves activities with the target client aimed at increasing self-esteem and decreasing powerlessness. Motivation has both internal, (goal directed) and external, (incentive) aspects (Gold, 1990). Focus in working with Haitian clients may initially prove more effective when using incentives. Identifying problems with U.S. Immigration (INS) or with Haitian students in school who need guidance can help convince Haitian families that social work services can be useful.

A Haitian child was referred to the social worker by a health provider when no medical reason was found for the child’s constant headaches. The worker learned that the child was caring for several other children (both siblings and cousins) with no adult supervision in the home. The child’s parents had died in New York and after a brief stay in Haiti, the children moved with relatives to a third country. The relatives subsequently decided that the children would be better off in the United States and brought them here. The worker found out that the relatives were coming at a particular time each month to bring money for the children’s rent and timed her home visit accordingly. She discussed the fact that the children were in danger from immigration officials, state child abuse investigators, and from potentially negative influences in the neighborhood. She suggested ways that the relatives could support themselves and the children in this country as well as use previously acquired skills to work toward the documentation of the family. Once the stress of responsibility was lifted, the child’s headaches diminished.

The social worker had to help the family identify how its interests and the interests of various members could be enhanced by addressing external issues that the family saw as unresolvable.

Moreover, the use of groups can also be helpful to individual family members to learn that they are not alone and that there are others with similar problems from their community. Schools and community centers can provide excellent opportunities for social workers to develop mutual aid groups that can motivate and benefit Haitian clients.
Competence

Within the context of this discussion, competence refers to the ability to control their own lives. Competencies are built through (1) learning about resources, (2) gaining knowledge, (3) increasing personal and social skills, and (4) self-assessment. Haitian families and clients are disadvantaged in their social functioning by a lack of understanding of many aspects of North American daily life. They are also hampered by racial and cultural barriers.

Simply providing needed information can be helpful to Haitian families. Identifying resources that exist in the community for individual betterment creates opportunities for families to grow and flourish. For many Haitians who may be ashamed of aspects of themselves or of their experience, relating to others in the workplace or the larger community may be quite difficult.

Consequently, learning new competencies in dealing with persons in authority can sometimes be more important than simply knowing about their rights.

A 48 year old Haitian mother with limited English skills and a work history of unskilled jobs had an epileptic daughter who was being seen by the social worker from the local public agency. The mother had previously relied upon her younger sister who was more acculturated to handle most of her financial and other matters. It appeared to the worker that she had become passive and disinterested in addressing the problems of the family—particularly concerning the child’s illness.

Epilepsy, and those who have the disease, are viewed very negatively in Haiti. The mother became lax about administering the child’s medication resulting in needlessly frequent seizures. The social worker learned that the child was being seen by an English-speaking doctor whose instructions to the mother had not been adequately translated. The worker arranged for a Creole-speaking health aide to accompany the mother upon subsequent visits and to spend time with her explaining the nature of the child’s illness. In subsequent home visits, the social worker discussed behavior modification techniques with the mother to address ways that the mother could deal with the child’s medication side effects.

In this case, the social worker knew that the family was subject to attracting the attention of abuse investigators who might remove the child from the home without her intervention. She was able to teach the family about epilepsy, assist in decreasing isolation, and provide resources and information to the
family. As such she averted punitive action from the system and empowered
the mother to care for her daughter more appropriately.

**Influence**

The final stage of the model involves the client's use of the new skills
and abilities to institute permanent change for the benefit of the client's
identity group. Empowerment practice is incomplete unless the newly
acquired power and competence is actually used to modify those forces
that oppress the client's identity group. Activities in this stage include
participatory responsibility in which the client takes leadership in achiev-
ing change. This stage is sometimes referred to as, "the era of commit-
ment" (Kieffer, 1984).

The following case vignette demonstrates this stage:

A professor first encountered a Haitian undergraduate student in a
BSW program. Initially the student was quiet and somewhat passive
(due in part to her insecurity about her English language skills). What
struck the professor was the student's values, ethnic strength, knowl-
dge, and leadership potential. During the course of the program, her
abilities matured. Upon graduation, she was invited to lecture to other
students on Haiti and on Haitian culture in the professor's courses.
Over the years, she has gained additional confidence and presence and
now lectures with conceptual and factual ease. The student subse-
quently completed an advanced standing MSW program and has been
in practice for several years. During that time, she and the professor
have collaborated on several projects, including national conference
presentations. The former student has become a community activist
and role model for other young Haitian-Americans. She is untried in
her work to make non-Haitians more aware of her culture and
constantly promotes the importance of a true and fair assessment of
her community's strengths and weaknesses.

**CONCLUSIONS**

In work with Haitian clients who exhibit passivity and who benefit
from an empowerment model, social workers must be aware of the need to
accentuate several qualities in their interaction with this population. These
qualities include: energy, endurance, educability, innovation, and involve-
ment. Incorporating these traits into practice with Haitian clients will
result in greater participation, knowledge, and understanding of the situa-
tions impacting these clients and will empower both workers and clients.
Working with passive clients requires a great deal of energy. Home visits and trips into the community are necessary to gain broader understanding of the problems and the issues affecting Haitian families. Contracting with the client and encouraging action on the client's part is important so that motivation is enhanced and the client is prepared to move to subsequent stages of the model.

Trust is often a major issue for a people who have experienced the kinds of personal and interpersonal disappointments that this group has undergone. Haitian families will frequently test workers to see if they can be trusted. Social workers are seen as having authority and power. While Haitians are usually compliant to ensure that their safety is not threatened, they may allow workers opportunities to prove themselves. Endurance is one key to effectively dealing with this challenge.

Working with any culturally distinct group requires learning about the client's reality. Building effective relationships with Haitian families requires that the worker understand the complex web of dynamics that can exist in these families. "Educability" requires that the worker leave all assumptions and allow the client to, in their own time, share with the worker where they are on the continuum of cultural acculturation and assimilation to this country.

Social workers practicing with Haitian families also need to adopt "innovation" as an essential aspect of practice. These families have multiple needs but the usual resources available for mainstream families may not fit Haitian families' specific needs. Openness and flexibility along with the willingness to collaborate with non-traditional service providers and community change agents will result in more effective intervention with Haitian clients. In addition, becoming able to assume varying roles, appropriate to the worker's ability and comfort, can likewise be critical in enhancing growth.

The final quality is "involvement." This refers to joining with these families and getting to know each member's specific needs, and their own particular story. Creating a positive connection through acceptance, trust, and respect will do much for building the rapport necessary for effective social work practice.

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