

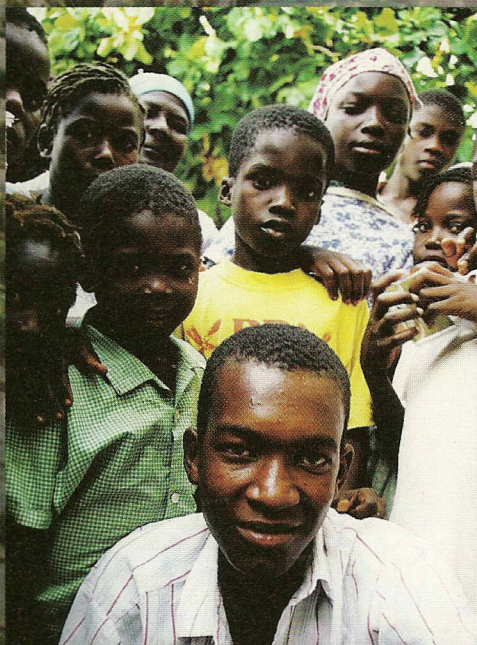
Business NEWS

Linking

the Orthotic and Prosthetic Profession

Haiti:

Land of Hope and Challenge



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Do you want a challenge? Adventure? To make a real difference?

Imparting your skills as a prosthetist/orthotist to others in developing nations along with using your talent and training to aid patients can give you a strong feeling of worth and satisfaction. Poverty, poor government, disease, malnutrition, war, and landmines from previous wars have taken their toll on the children, as well as men and women, in these countries. And, if you want to put your competence, your ingenuity, your adaptability, and your "people skills" to the test, the Third World is the place to do it. Far from TV-and-Couch-Potato Land, even living conditions and facilities are likely to be more basic than what you're used to, so you also can test how tough you are in roughing it.

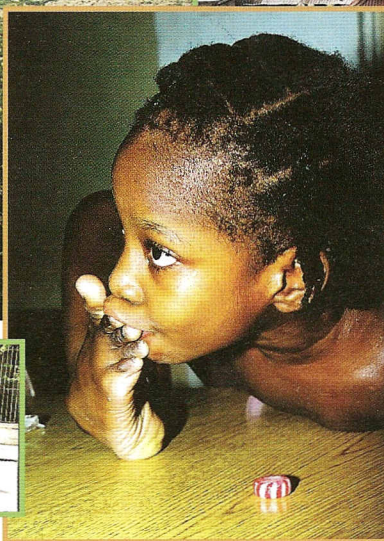
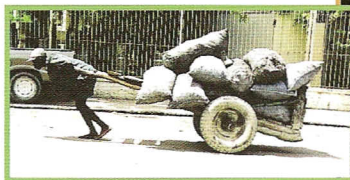
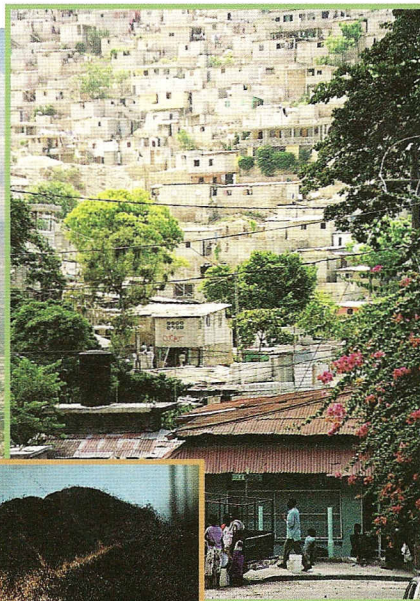
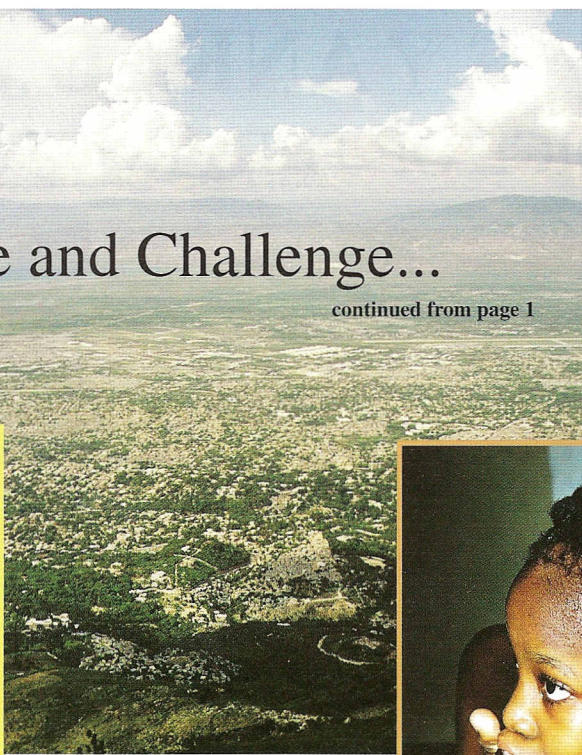
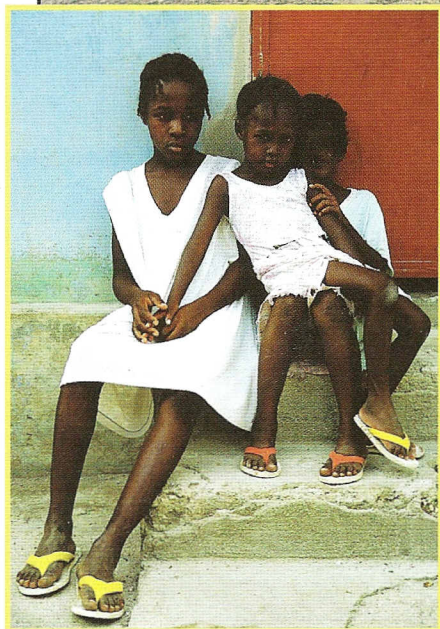
Well, suppose you just can't leave your practice and other responsibilities right now (although some of the humanitarian aid trips are as short as a week or two), is there anything else you can do?

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Yes. Go into that back storage room or down to that basement. See all that outdated prosthetic/orthotic componentry? Do you have some old tools—or more tools and equipment than you really need? All that stuff that is just collecting cobwebs and cluttering up space could be helping practitioners and patients in other parts of the world. So gather it up and send it off to a relief organization. You'll have a cleaner, more organized facility, and tools and equipment that were passively doing nothing are now actively enabling others to lead fuller, more functional lives.

What's it really like in a developing nation? Jeffrey R. Fredrick, MS, C.O., Tallahassee, Florida, who has worked hard in several humanitarian organizations, invited *O & P Business News* to accompany a team traveling to a country right on America's doorstep: Haiti. The team from Adopt-a-Village Missions (AVM) had the objective of evaluating the needs of a village and also of the country's only O & P facility.

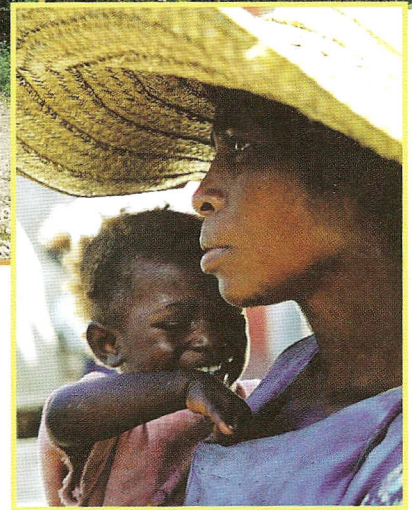
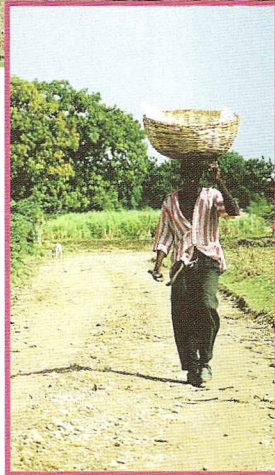
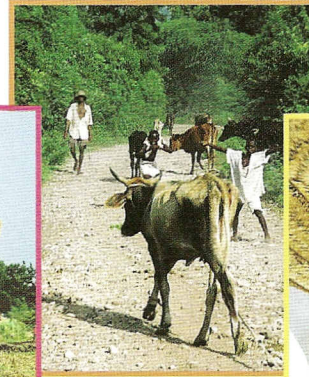
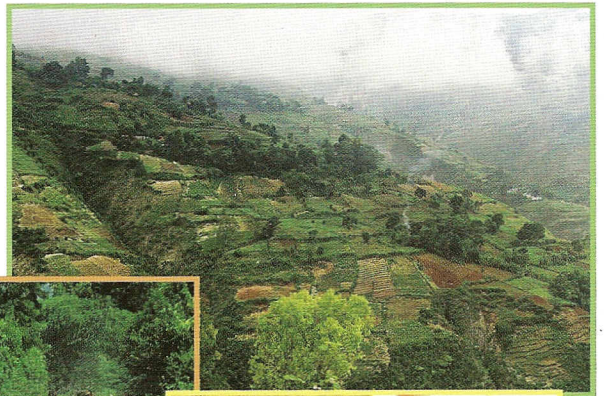
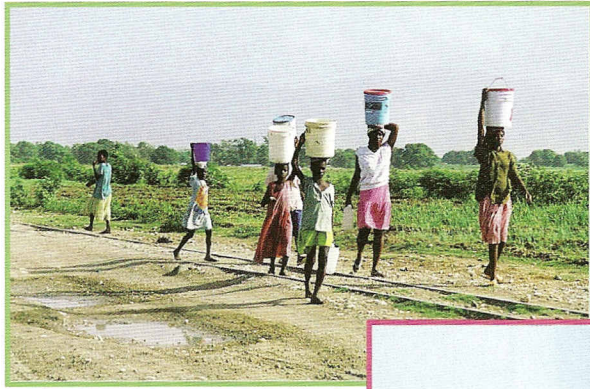
A little background: Adopt-a-Village Missions believes in taking a comprehensive approach to health care: providing an entire medical team—physicians, registered nurses, physical therapists, prosthetists, orthotists, and other health care professionals—along with regular follow-up care in successive visits to the same village, rather than simply providing help in one village, then heading to another, and another, with no continuity or follow-up care. AVM has worked in the village of Dumay,

close to Port-au-Prince, Haiti's capital, for 11 years. Church groups and the state of Florida are also involved in the effort. Another group that Fredrick works with, COSHARE (Collection of Surgical, Health and Rehabilitation Equipment) helps provide needed equipment and medical supplies.

Some pre-trip research about Haiti revealed the following—cold encyclopedia facts (Grolier, 1992) that don't really prepare one for the human reality of life in this Caribbean republic. Haiti, which occupies the western third of the island of Hispaniola (the much more prosperous Dominican Republic occupies the rest), is the second oldest republic in the Western Hemisphere, next to the United States, and is the world's oldest Black republic. Hispaniola lies close to Cuba and Jamaica. Haiti also is the poorest country in the hemisphere and has one of the highest population densities in the world—588 per square mile in 1992. About the size of Maryland, Haiti has a population estimated in 1991 at 6,300,000. The languages are French and Creole, a derivative of French.

The capital, Port-au-Prince, is by far the largest city; most of the population lives scattered across the country in small villages. Agriculture is the major occupation, with farmers cultivating small landholdings and raising livestock. Industry, trade, transportation, government and other sectors also provide jobs, but unemployment is extremely high.

Good quality arabica coffee is a major export, along with



cacao and sugarcane. In fact, the delicious, aromatic coffee is not available in Haiti, this reporter was told—it's almost all exported.

Haiti basically consists of two mountainous peninsulas that enclose the Gulf of Gonave like embracing arms. Two inhabited islands lie nearby—Gonave in the gulf, and Tortuga, a haven for pirates in the 18th century, off the north coast. Rainfall varies from about 20 inches along the coast to about 100 inches in the mountains. Elevation varies from sea level to Pic La Selle, which stands at 8,773 feet.

The political climate has been in turmoil, with governments often changing rapidly. Haiti's history as a nation began when Francois Toussaint L'Ouverture, inspired by the French Revolution, led the African slaves in a rebellion against their French overlords in 1791. In 1802, Napoleon I sent an army to subdue the Haitians. The army did capture Toussaint L'Ouverture but was defeated by Jean Jacques Dessalines and Henri Christophe. Haiti was declared independent in 1804.

For the next 100 years, Haiti suffered under inept leaders vying for power. The U.S. occupied the country from 1915 to 1934. In 1957 Francois Duvalier, known as "Papa Doc," began a brutal rule, aided by his practically private security force, the Tontons Macoutes (bogeymen). Conditions improved somewhat under the rule of his son, Jean Claude ("Baby Doc"). "Baby Doc" was ousted in 1986; other governments followed, sometimes marked by turmoil and violence. Jean-Bertrand Aristide was elected in 1990 but was forced to flee the country in October 1991 when a

military junta seized power. The current president (as of this writing; but the political climate is still unstable) is Rene Preval; the current government is considered by some to be better than most of the past ones; however, one comment was, "The government still doesn't care much about the people."

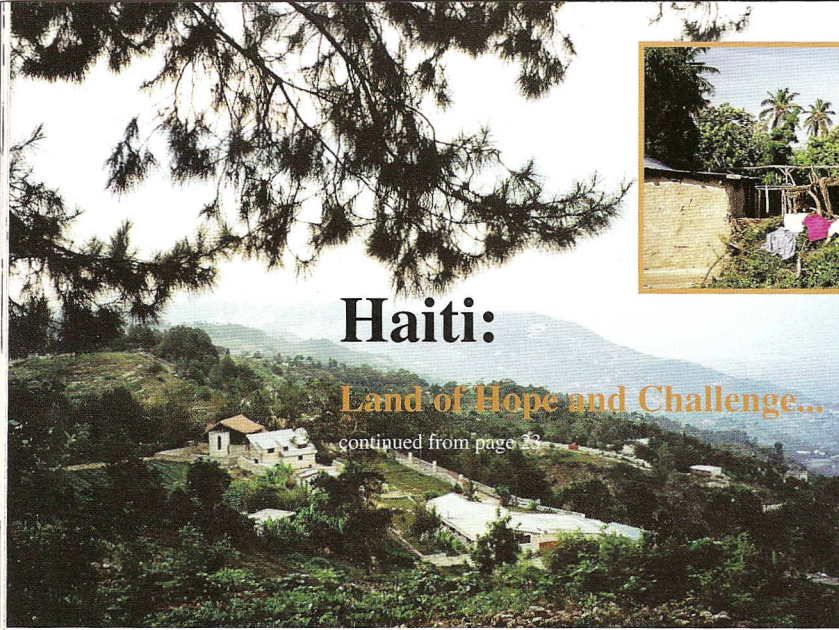
Other statistics paint a portrait of the people: As of 1990, only 53% of the population was literate; life expectancy for men was 52 years; for women, 55; infant mortality was 107 per 1,000 live births.

Against this background, seven of us left Miami to begin our trip. The evaluation team included Jeff Fredrick; Wayne Fichtel, C.P.; Greg Fox, massage therapist; Paula Grimes, with the Florida Vocational Department; John Rickenbacker, a church pastor; and Heidi Voelker, an occupational therapist. For five of us, this was our first trip to Haiti. The medical team, which provides treatment and medications for 400-600 residents of Dumay and the surrounding area, arrived later.

After landing in Port-au-Prince, we got our first taste of the poverty that envelops Haiti as people begging for money surrounded our vehicles. Men vied for the task of hoisting our luggage onto the pickup bed for a tip; a young mother held up her infant; little boys reached out their hands with eager, hopeful expressions lighting up their eyes.

We made our way through the teeming traffic to the attractive, comfortable home of our hosts, Nathan and Wanda Dieudonne. Nathan is the pastor of the Haiti Bethel Church in Dumay, one of the Adopt-a-Village Mission sponsors; Wanda

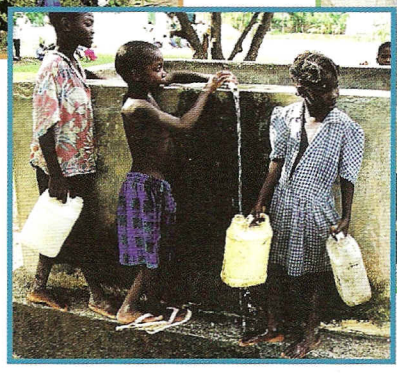
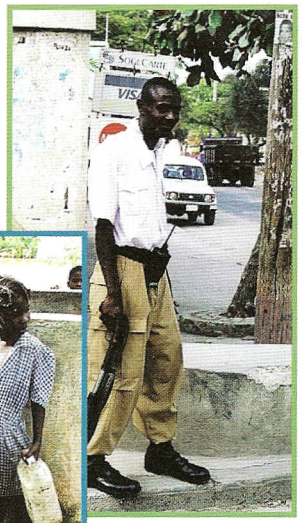
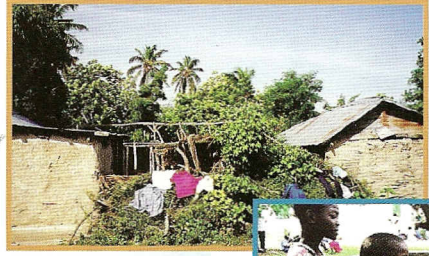
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works for the U.S. Agency for International Development (USAID) in Port-au-Prince. Nathan grew up in the village of Dumay; many of his relatives still live there. We enjoyed the warmth, hospitality, and delicious meals provided by the Dieudonnes during our stay. When the eight members of the medical team arrived, we filled the house and an outbuilding, but Wanda and Nathan, along with some assistants, managed to take care of us all.

Pretty flowering trees and shrubs ornamented the front lawn; the back was mainly devoted to a vegetable garden with okra, breadfruit trees, and other fruits and vegetables. Like many homes, most of the compound was surrounded by a high cinder block wall with broken glass set in the top to discourage trespassers.

What is life like in Haiti?

For most people, there is no electricity. No running water and indoor plumbing. No safe drinking water.

We saw a huge shantytown in Port-au-Prince where hundreds of people live in open-air shelters with rickety roofs supported by poles. Meals often are cooked over small open fires. People go to public wells for water or go to the river. For many people, the river is a drinking fountain, bathtub, and laundromat. Yet, somehow—with no electricity, no washers, dryers, irons (let alone fabric softeners, stain removers, and other standbys of the American homemaker)—people generally manage to be clean and attractively dressed. Women’s hair is usually nicely styled, and many of the little girls are picture-pretty in flounced dresses.

Traffic jams the streets of Port-au-Prince, with almost no traffic lights. “You’re your own traffic signal,” one of our group commented. However, somehow everyone makes it work—honking horns and flashing lights are signals, not expressions of irritation.

Even in Port-au-Prince, electricity is unreliable and goes off frequently. The Dieudonnes supplement the power with their

own generator. Fuel is propane if you’re financially better off than average; charcoal for small cooking fires is more common. At least it doesn’t get cold in Haiti.

Most homes in Haiti, including the two villages we visited, are cinder block or timbers plastered with mud with metal or wood cane roofs. Typically, they have one to three rooms with earth floors.

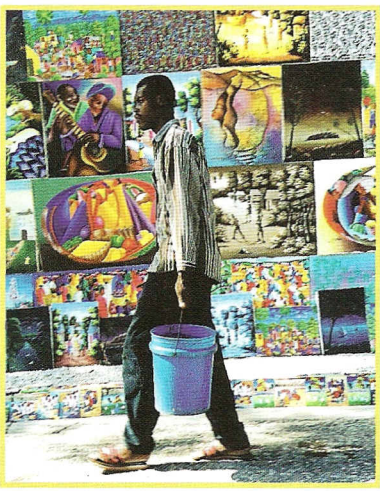
We were able to enjoy running water and indoor plumbing, since the Dieudonnes have a well. However, drinking water still has to be filtered, and we were warned not to use tap water for drinking or brushing our teeth.

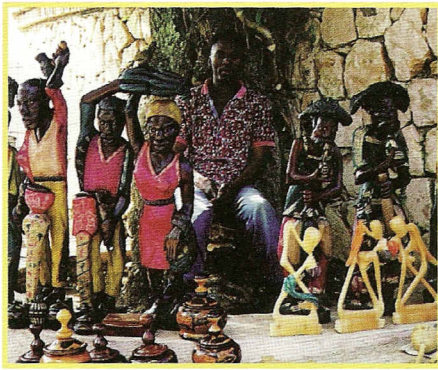
Even in Port-au-Prince and along the main highway which follows the coast, potholes abound. The general driving strategy to cope with these vehicle traps involves zigzagging (and be careful you don’t “zig” when you should have “zagged”!), driving on the wrong side of the road, the shoulder, whatever is the smoothest—then swerving out of the way of oncoming traffic.

When traffic snarls and crawls in the city, vendors take advantage of the opportunity, weaving in and out of the stopped cars to hawk their wares. The colorful “tap-taps,” usually jammed with passengers, some even hanging on to the back, ply the city and the rural roadways. A “tap-tap” is a truck or bus taking paying passengers and following a definite route (although they seem to be going just helter-skelter); they generally liven up the landscape with brilliantly painted signs and colorful slogans. When a passenger is ready to get off, he bangs the side, hence the name. Bicycles—and walking—are other means of transport, as are horses and donkeys in more rural areas.

Lively, open-air markets are the rule, and bargaining is the custom. Artists frequently display their wares: paintings, wood carvings; bowls and vases of highly polished, beautifully decorated wood, and other artworks. Haitian art—vibrant, colorful, full of life and feeling—is justly world-renowned.

Most of the more affluent homes and hotels are situated in





the cooler hills and mountains around the city; views of the city and gulf are spectacular. We also visited historic Fort Jacques, its grim stone walls and ancient cannons watching over the city like brooding sentinels. An enterprising young man even tried to sell Jeff what may well have been one of the original cannon balls; it was quite authentic-looking.

Haiti also hits the emotions by what isn't there. Wildlife. Trees. Fish. There even seemed to be few birds and insects. The country, although still pretty, has been called an ecological disaster. Deforestation because of the need for fuel has caused a huge amount of erosion. On some of the mountainsides, we saw soil virtually leached white, with the nutrients washed into the valley below. The valley soil is fertile, but hillsides are often covered with scrubby bushes and undergrowth or are rather barren—not an ideal place for a small farmer to grow crops or feed his livestock. Many of the horses and donkeys and some of the cattle looked skinny and droopy. Dogs tend to quietly slink around, foraging for food. Goats looked as lively and rambunctious as they usually do; we also saw a few hogs.

Destruction of habitat and a large human population, along with other factors, has severely depleted wildlife and fish. Although we could hardly see the whole country during our short trip, I was told that practically all of the forest is gone, although stands of mahogany, cedar, avocado, orange, and mango trees, along with naturally occurring coconut palms, remain. One observer mentioned that from the air, the visible difference between Haiti's sparser landscape and the lush forest of the Dominican Republic is like crossing a line.

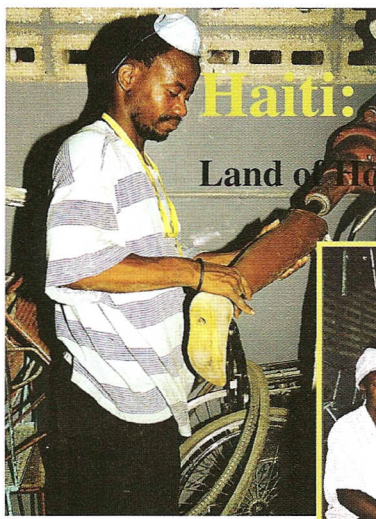
Malnutrition, parasites, and other conditions afflict Haiti's people too. Many people, including infants and tiny children, have reddish hair—due to a protein deficiency, it is said.

Our first journey was to a village about a four-hour drive away. An aid group had requested the help of Adopt-a-Village Missions to expand medical care in the village. As we drove along the coastal highway, the landscape changed from a fertile level valley, to pale, sparse hillsides, to a scene reminiscent of Southeast Asia, with rice paddies dotted by occasional palms and mountains in the distance. Farmers worked busily in the paddies. Livestock wandered along the roadside as people walked along, many balancing five-gallon buckets of water and other loads on their heads. The landscape shifted again to cactus and scrub-covered rocky hills somewhat like parts of Arizona. Finally we reached the village, where we promptly drew an interested crowd.

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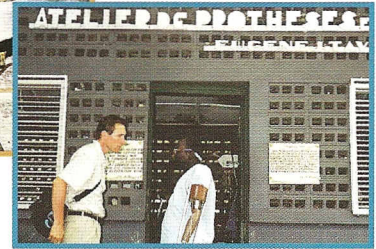
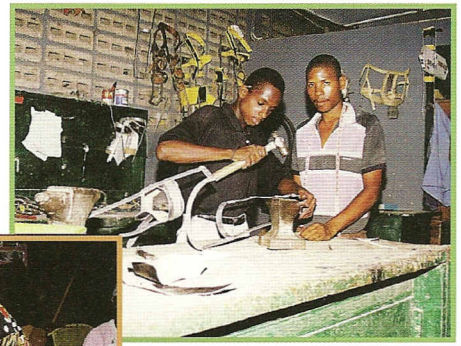
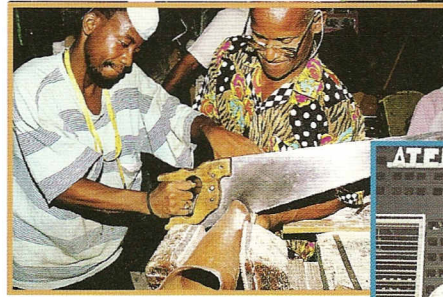
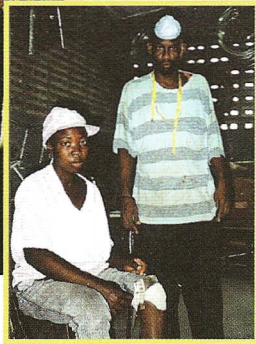
We wrapped in
the softest,
most comfortable
silicone available,
SenSil™. It is...





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The experience of evaluating the village's needs highlighted a pitfall of relief work and the importance of verifying information. AVM had been informed that there was a feeding program being conducted for the village children, but that there was no medical aid. On arriving in the village and talking with some of the involved individuals, the mission found no steady feeding program in place, but after hearing mention of "the doctor," Jeff went up the road and found and talked with the physician who had been treating villagers for 13 years, working through a different aid group.

Although many humanitarian relief groups throughout the world are obviously concerned and compassionate, competition can mar the picture, Fredrick explained. "Some NGOs (non-governmental organizations) end up more concerned it seems with grabbing a share of the funding pie than really helping to alleviate suffering. Other organizations are sincere, but wedded to their own methods and concepts, unwilling to try something else that actually might work better. Persons and groups wanting to help do need to be aware."

One thing Jeff would like to see is governments, when they are funding aid efforts by private groups, assign one group to one task, another group to another area where there is a need, and so on, rather than dealing with groups competing for the same function. With such a huge world-wide need, maximizing and directing available resources should be a priority, he stresses.

Jeff Fredrick, an amputee and Vietnam vet, is a down-home guy with a quick grin and a ready joke. Underneath the easygoing demeanor, however, he's an intense and dedicated man. He works pragmatically to bring different groups together for the sake of children and adults—amputees and others—who need help. And he's no egotist. "If I come across a group who can do a better job of caring for the people, I won't compete; I'll pack up and go home," he declares.

A welcome opportunity has now come Jeff's way: he can expand his humanitarian horizons. Hanger Orthopedic Group recently purchased his company, Rehabilitation Engineering Inc., and is planning to put him in charge of developing Hanger Orthopedic Group's overseas humanitarian aid program.

After returning from the village, we relaxed at the Dieudonnes' compound and prepared for the next day.

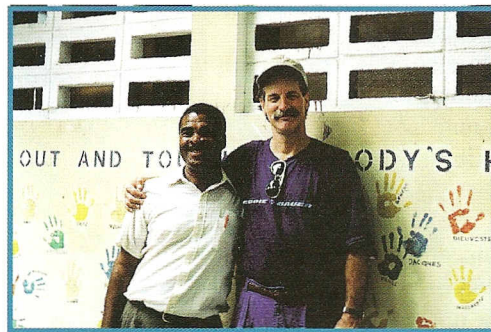
The next morning, we went to St. Vincent's School for Handicapped Children, an institution unique in all of Haiti, which also houses the only O & P facility in the entire country. Located in downtown Port-au-Prince and sponsored by the Episcopal Church of Haiti, the school has provided education and medical help for disabled children for about 40 years. The purpose of St. Vincent's, according to Director Frantz J. Casseus, Ph.D. is "to give new breath to the rehabilitation process and

restore disabled persons to usefulness for both themselves and society." To this end, education, including vocational education to help in learning specific trades, is provided in addition to medical care. The school provides arts, crafts, and physical education courses, along with a varied sports program. Extracurricular activities include a music program, in which all the children are encouraged to participate. A part of this program, St. Vincent's handbell choir, is noted throughout Haiti and has traveled to the U.S., Canada, and Germany.

Visual, hearing, and orthopedic disabilities and neurological disorders are evaluated and treated. Also provided are a complete program of dental care and physical therapy on an outpatient basis.

Besides the full-time staff, other medical professionals and educators assist on a part-time or consulting basis.

If children need braces or prostheses, these are provided by the prosthetic and orthotic shop, staffed by technicians who are hearing and speech impaired graduates of St. Vincent's. And therein lies a tale for orthotists and prosthetists. The six technicians, who communicate in American Sign Language (ASL),



Jeff Fredrick & Nathan Dieudonne

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are conscientious and dedicated. A noteworthy point is that the two fields—orthotics and prosthetics—are more sharply differentiated and kept separate than they are in the U.S. The technicians use everything they can to fabricate braces and limbs, even metal off the street. But componentry, tools, and training are a severe limiting factor. In fact, more sophisticated training, tools, and componentry would eliminate the need for many of the surgical operations the children now undergo. Wayne Fichtel travels frequently to St. Vincent's and will further train the technicians. Sponsoring training in Tallahassee for O & P professionals as well as physical and occupational therapists to help upgrade rehabilitation in Haiti is an avenue being considered, says Fredrick.

The school has other needs also, said Casseus: Operating room equipment, a new generator, new pumps, books and computers (older computers—but not *too* old—can be put to use).

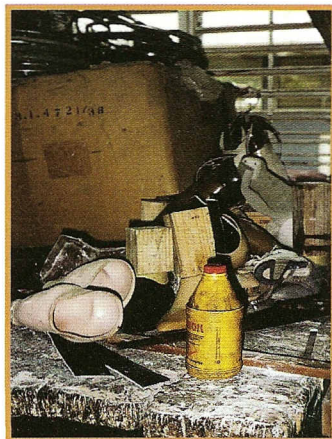
One of the most interesting and encouraging persons we met was Joseph—an outgoing, cheerful man, age 39—a quadrilateral amputee who has been at St. Vincent's since he was three years old.

A moving and heartbreaking experience was meeting the disabled children in the orphan's ward. The children for the most part were as active, bright, and cheerful as most youngsters. As some in our group spread treats for the children out on a table, one

little girl ate quickly and skillfully, scooping up the candy and raisins with her feet and quickly inserting them in her mouth.

On our last day, we went to Dumay where the medical team was treating patients in the clinic. Volunteering their time and skills were Greg Sloan, M.D.; Elke Glazer, M.D.; Andy Scholl, a paramedic; Marlene Brudenell, R.N.; her daughter Joy; Linda Schroeder, MT; Rick Ippolito, a pharmaceutical representative; and Nina Stripper, a medical technician.

Our group was able to help, mostly by breaking down donated OTC medications into manageable sizes, repackaging them, and filling the nonprescription medicines ordered by the physicians for each patient. A nurse took care of the prescription drugs. All was assembled and dispensed under the knowledgeable, watchful eye of Rick Ippolito, who double checked everything before it was given to a patient. As people patiently sat and waited to be seen by the two doctors, lively, curious



From left:
John Rickenbacker,
Wayne Fichtel, C.P., Miki
Fairley, Heidi Voelker,
Paula Grimes, Jeff
Fredrick, C.O., and Greg
Fox

little children peered through the windows at all the interesting activity.

A couple of flat tires on the rough roads necessitated Jeff and Nathan spending most of the day, however, in tracking down and buying new tires. Mission accomplished, they joined us later.

The efficacy of Adopt-a-Village Mission's approach of providing regular continuity of care and addressing multiple needs of the people appeared to be demonstrated by the health, spirits, and general well-being of the people in Dumay as compared with the people in the other village that was evaluated.

The next morning, we boarded the flight for the trip back to Miami. As we headed homeward, I looked down through the incredibly clear water to the sea bottom, plainly visible even from the altitude of our flight. The beauty was stunning—turquoise and azure ocean mirrored turquoise and azure sky, with even the little puffy white clouds below us neatly reflected in the water. A person couldn't help but think what a shame that such beauty is marred for many by human suffering. In Miami, I said good-bye to the rest of the group, and a moving and memorable trip came to its end.

Editor's note: Most photos for this article are courtesy of Jeff Fredrick, MS, C.O.

What's Needed in Haiti

For more information about Adopt-a-Village Missions and COSHARE, contact: Jeff Fredrick, C.O., Rehabilitation Engineering Inc., 1719 Mahan Drive, Tallahassee, Florida, 32308. Phone: 904-878-1108; Fax: 904-656-6240. **All donations are tax-deductible.**

Items most desperately needed at the O & P facility at St. Vincent's School for Handicapped Children include, according to Wayne Fichtel, C.P.:

- **Fabrication Supplies:** Fabrics, PVA bags, rivets, screws, other hardware.
- **Tools:** All large shop tools at St. Vincent's are in poor shape. Any hand tools, new or used, would benefit the efforts of the staff at St. Vincent's.
- **Disassembled O & P componentry, especially in pediatric sizes,** is urgently needed.