



# Haitian Immigrants' Experiences of Life and Health in Rural Maryland

Emily C. Sheffield, Emilia M. Guevara, and Thurka Sangaramoorthy, Ph.D.  
Department of Anthropology; BSOS Summer Research Initiative, 2016



## Introduction

Despite expanding populations of immigrants in new receiving communities in the United States<sup>1</sup>, many resources aimed to serve these communities remain largely underdeveloped and difficult to access<sup>2</sup>. Barriers to health care access are particularly burdensome for immigrants in rural Maryland, and tend to increase with rapid population growth. This analysis aims to illuminate particular vulnerabilities that Haitians experience as an immigrant community in rural Maryland.

Qualitative analysis was employed to identify prominent themes surrounding Haitian individuals' experiences on the Eastern Shore of Maryland. Those interviewed raised general concerns regarding:

- Lack of health insurance coverage
- High cost of health expenses
- Language barriers
- Poor treatment by health providers
- Poor treatment in low-skilled labor occupations
- Barriers to education services

All of the above, among various other concerns, impact immigrants' everyday life and wellbeing. Haitians tend to experience racism, exclusion, and marginalization as an immigrant group, largely because of the geopolitical situation in which Haiti is found and the tumultuous history its peoples experienced. The kinds of experiences that generated the concerns above indicate broader issues that increase the vulnerability of Haitian communities, of which conceptions of health and care are indicators.

## Methods

10 interviews of Haitian community members were conducted by those engaged with the multiyear, ongoing ethnography in August of 2014 and June of 2015. The immigrant participants were all willing and able to give informed consent, were all over 18 years of age, and were all residents of Maryland's Eastern Shore. Interview participants were recruited as part of the larger project through community-based organizations and through referrals by other participants.

The participants were asked generally about their lives on the Eastern Shore, their family and community relationships, their work experiences, their general health concerns, and their usage of and access to health care services, among other topics of interest. The majority of the questions were open-ended to allow for individuals to expound upon their experiences as they wished.

Data resulting from the interview transcriptions were analyzed through open coding to illustrate subjective experiences with Haitian immigrant life on the Eastern Shore and with health and health care access.

## Results

### Lack of Health Insurance Coverage; High Cost of Health Expenses

- **Participant 1:** When she was without papers, she would go to the hospital and sometimes they would care for her, but they would not give her all the care that she would need. There are some cares they wouldn't give her.
- **Participant 2:** Yeah, it's for the rest of it. The rest is a lot of money still and I don't see how I could pay it. Insurance doesn't pay as much as they say. While I was in the hospital, I had Perdue's insurance, but it got cut. So I went through Obama's insurance. I pay \$135.02 every month.
- **Participant 3:** No, I had just came. They told me I must have five years living here to be qualified. And at that time I did not have five years yet.
- **Participant 3:** For the hospital, sometime the doctor does not even accept the public insurance. When I go to the hospital they said they do not accept this type of insurance.

### Language Barriers

- **Participant 4:** If you don't know English, most likely what they do is they always have a family member come with them. But like for the Spanish speakers, there will be somebody on site working, so they can go get someone and get help in the language. But it's not like that for the Haitian community, so pretty much they will have somebody with them who can help them.
- **Participant 5:** And we started to talk, and he was over her dose because he could not understand her medication. He could not work, he could not...
- **Participant 5:** He was in pain, he had high blood pressure, and he was diabetic-
- **Participant 6:** And he couldn't tell them- he didn't know how to tell them in English.

### Poor Treatment By Health Providers

- **Participant 4:** I would say now, it's more of a money thing than anything else now. I don't think they really care for health or the patients. It's more like, you know, 'get you in, get you out.' Even if they need to prescribe you, I think they're sort of afraid of prescribing things. I mean it's easy for them to just write "go get this done so we can tell what's wrong." So I don't know, I don't really feel no connection between the providers and the patients. I don't see it. So you're just like- it's a business, so.
- **Participant 4:** It was like you come and they have so many patients waiting, they just come and do the quick checkup.

### Poor Treatment in Low-Skilled Labor Occupations

- **Participant 5:** There are now more people trying to get in. So they don't care about you. "You don't want to do this? I have 10 other people."
- **Participant 3:** They take people for their robots, and we are human. We cannot do the same thing like a machine. It's really painful, physically. And they consider it like it's slaves because they need your blood. They don't allow you to do whatever you want when you need it. Like I need to go to the bathroom, when you need to go they don't want you to go.
- **Participant 2:** We get humiliated because we're Haitians. They don't do that to the Americans, but they do whatever they want with us.

### Barriers to Education Services

- **Participant 4:** Yeah, it is hard. It is hard. It is not easy. It's very hard to balance children, full-time work, and then school.
- **Participant 3:** The way we are working, we don't have time... they just cannot go together. For me, it is not easy for me.

## Discussion and Conclusion

Analysis of the results suggests that a lack of health insurance coverage, the high cost of health expenses, language barriers, poor treatment by health providers, poor treatment in low-skilled labor occupations, and barriers to education services, among other difficulties, have a significant impact on immigrants' experiences regarding their lives on the Eastern Shore more generally and their access to quality health care more specifically.

A lack of health insurance coverage and the general high cost of health expenses create affordability barriers for immigrants, particularly those who do not speak English and are working in low-skilled employment. Language barriers complicate access because of inability to communicate with health providers or read prescription instructions. Barriers to education services exacerbate existing language barriers and add another component of financial stress for Haitian immigrants. Poor treatment by health providers, though certainly not a universal problem, discourages Haitian immigrants from seeking health care when it is needed. Poor treatment in low-skilled labor occupations often forces immigrant workers to choose between seeking health treatment and attending work to avoid termination.

Attitudes of racial discrimination and 'otherness' as they are applied to those within the Haitian community exacerbate the impacts of these smaller barriers. This affects the overall life experiences of Haitian individuals living on the Eastern Shore, which include but are not limited to individuals' experiences with health care.

## References

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