

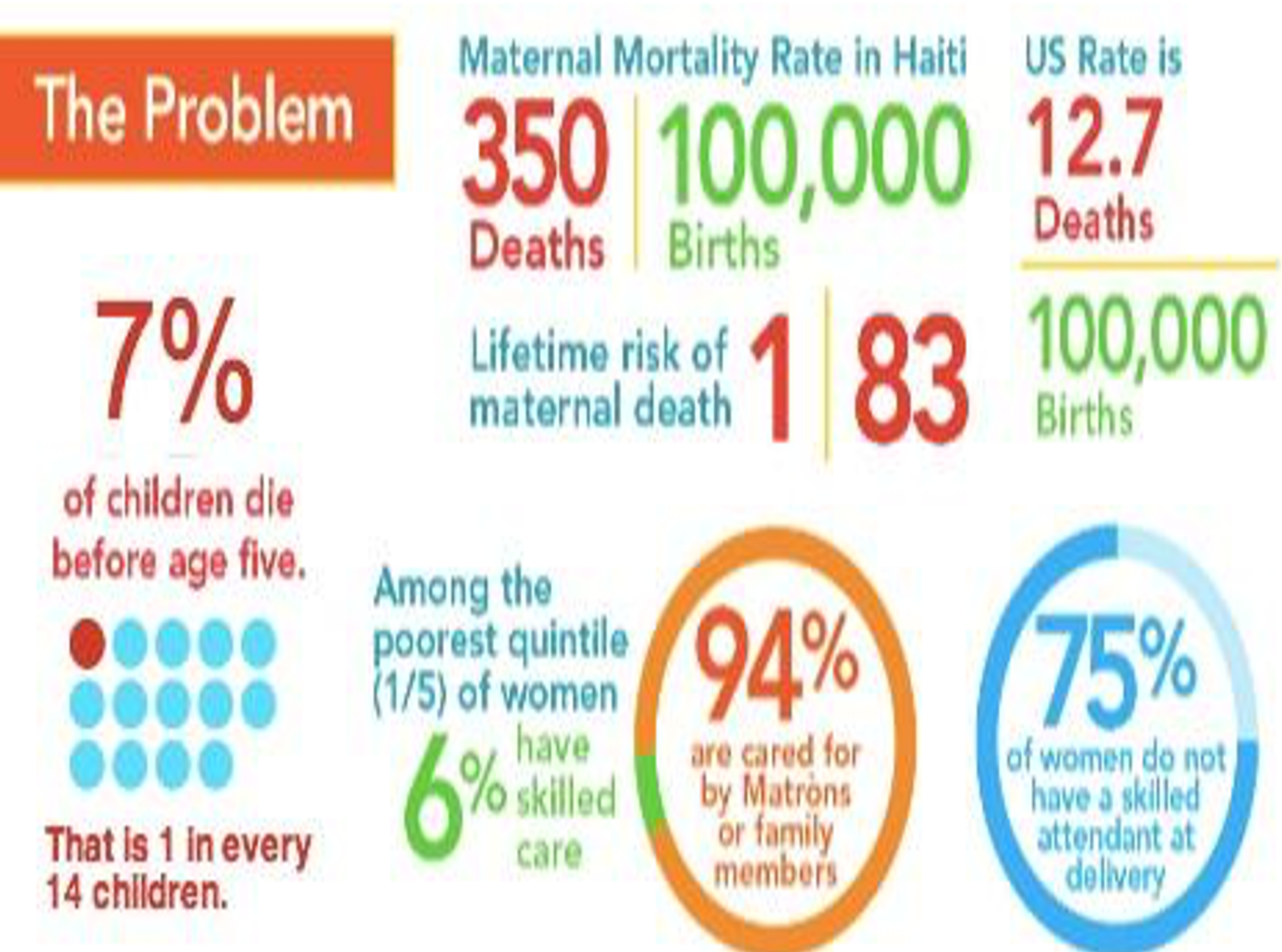
Prenatal Care and Resources in Rural Haiti

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Introduction

Haiti has upheld the title of being the most indigent of healthcare systems for women in the Western Hemisphere. In addition to the extremely limited facilities and resources, these pregnant women have a substantial lack of knowledge about prenatal care and the resources that are available to them. This lack of knowledge is leading to high mortality rates among pregnant women and many of the conditions they are succumbing to are treatable with access to the right medical services. Our proposed solution to this problem is to educate these women with the goal of motivating them to seek out healthcare when they think they are ill. Therefore, we are posing the question, "will a yearly trip of nursing students to hold an education conference/workshop for obstetrical health promotion decrease the knowledge deficit of these low-income women in rural Haiti?".

The Problem



Source: UNICEF

Reference List

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Community Assessment and Analysis

- Family is the most important relationship
 - Elders are given the highest respect.
 - The culture is largely patriarchal, the male is the primary decision-maker (1)
- Haitian French Creole is the official language.
- The majority of Haitian's are Catholic and many also practice Voodoo.
- Believe spirits or curses cause certain illnesses and seeking conventional western medical treatment will make the illness worse. (2)
- 1/3 of women cited money as the primary barrier to seeking health care. (1)
- Haiti's top 5 causes of death are ischemic heart disease, stroke, lower respiratory infections, neonatal disorders, and road injuries. (3)
- For prenatal health, hypertensive disorders, gestational diabetes, cervical insufficiency, fetal growth restrictions, are a few named obstacles.
- Health services only reach between 40 and 60% of the population.
- Many facilities are not able to provide adequate resources and cleanliness.
 - •On average there are 2.4 physicians, 1 nurse, and 3.1 auxiliaries per 10,000 people (6)

Problem in the Community

- The most indigent healthcare systems for women in the Western Hemisphere.
- Maternal mortality is 523 deaths per 100,000 births. (7)
 - Women in rural Haiti report healthcare utilization absences during pregnancies.
 - Women don't receive primary healthcare prevention, health promotion, and health education.
 - Obstacles are hypertensive disorders, gestational diabetes, cervical insufficiency, fetal growth restrictions, etc.
 - 523 maternal deaths for every 10,000 live births (one in 80 Haitian women).
 - 26% from hypertension and eclampsia.
 - 23% from post-term deliveries.
 - 20% from malaria, HIV/AIDS, and Cardiac Disease.
 - 11% from infection & obstructed labor.
 - 10% from unsafe abortions.(4)
 - Comparison of United States vs. Rural Haiti:
 - 76.4% of women in the United States get adequate prenatal care.
 - 26.42% of women in rural Haiti get adequate prenatal care.(5)
 - 54% attend prenatal office visits.
 - Recorded Explanations from Haitian Women:
 - Healthcare absence due to disabilities, cost of care/affordability, distance to healthcare facility, transportation restrictions and perceived quality of care.(1)
 - Healthcare inadequacy due to staff shortages, insufficient supplies, and little resources.
 - 90% of low-income households experience labor and delivery without professional services.(5)
 - Husbands or family members as primary advisement.
 - Matwons (untrained members of the community) are substituted for healthcare professionals.

Proposed Solution

- Our proposed solution to this problem is to educate these women to seek out healthcare when they think they are ill.
- Plan a trip of nursing students to visit and hold an educational lesson for obstetrical health promotion in rural Haiti.
 - Swanson's caring theory outlines five caring processes:
 - knowing, being with, doing for, enabling, and maintaining belief (9).
- The name of our innovative program is "Konferans for obstetric health promotion."
 - Konferans translates to 'conference' in the Haitian Creole language.
 - Three objectives for the population are: caregiver to learner, the instructional process, and nurse to teacher.
- The three learning objectives after the education session are:
 1. Pregnant women will verbalize understanding of the necessity of prenatal care
 2. Pregnant women will list a community resource where they can get prenatal care
 3. TBA's will demonstrate how to properly provide safe and sterile care.
- After the nursing students conduct their workshop and educate the low-income women and TBAs of Haiti, they will have a follow-up meeting via a zoom call, where people can ask questions to clarify any of their confusion.
- The technology necessary will be provided to the community by the university or college of the student teachers that presented this workshop. This will occur around six months after the workshop.
- Promoting lifestyle support, hazardous avoidance, and labor/delivery preparations; prenatal education will demarcate high mortality probability from low mortality probability (8).