Slaves killed to titillate his mistress

Ming Tang, a third year Dalhousie medical student, spent part of last summer in Haiti studying the medical and social problems found in a tropical country. In this small country ruled by a ruthless dictator, Ming encountered the unexpected including a flourishing Vodoo cult. This is an edited text of the report he made upon his return to Canada.

Late the afternoon of Friday August 19th 1966 at the National Palace in Port-Au-Prince, 60 Canadian medical students were welcomed as guests of the Republic. The soft voice of the

distinguished host sounded loud amidst the composed silence. "Before I became President of Haiti, I was a medical doctor graduated from this school in 1937 and completed my post graduate studies in the United States.. I have contributed much to medicine and the medical progress in Haiti. But today Haiti is not a medical problem . . ."

The distinguished guest was none other than "papa doc" or Dr. Franciose Duvalier, President -a-Vie of the Republic of Haiti. To many of us on this continent, Dr. Duvalier is a dictator. To many Haitians he is "the Haitian Flag one and indivisible." He is portrayed with Dessalines in almost every lecture room in the University. With Emperor Haile Selassie of

Ethopia, he is portrayed on the Haitian flag which is seen almost everywhere including the window of the "publique".

Duvalier's Black Republic, the first of its kind has a most fascinating history. Until Columbus' arrival at Mole St. Nicholas on December 5, 1492, the friendly Arawack Indians inhabited this tropical paradise which they called Haiyti (country of mountains). Gold was the Spaniards desire. When the limited supply of this precious metal was exhausted the Spaniards abandoned the island which was finally ceded to the French in 1697.

These French settlers were agriculturally minded and introduced coffee, sugar and many other cash crops to this virgin island. The harvests were rich and the plantations expanded. Slaves had to be sent in from the kingdoms of the Dabomeys

and the Ibos of West Africa to sow the seeds and reap the harvest. St. Dominique prospered and Port-Au-Prince enjoyed the culture and sophistication of Paris.

But no roses have blossomed without thorns on their branches. The cruelty of the French masters was extreme. Hate was born in both the whites and the blacks. Its flames -of-hate grew over the years until the conflagration spread far and wide between 1701-1803. The blacks were even more merciless than the whites in their extermination of human life.

Historians almost always suffer from selective amnesia when they have to elucidate the role of disease in history making. Prejudiced by my training as a doctor let me tell you the part disease played in the shaping of Haiti's history.

An English expedition of 900 soldiers under Admiral Robert Wilmot easily defeated the French at Cap Francois on May 20, 1695. The vanquished French were shrewd and retreated. They waited while Yellow Fever took its toll in the English camp. Exactly two months later, the English Expedition was almost

A century later, the English again captured Port-Au-Prince. By early 1796, three years after the victory 630 of the 980 in the 82nd regiment and 700 of the 1000 Hussars had succumed to disease. A census taken in September 30 of that year revealed that only 7538 survived of the original 20,000. Only 3000 of these 7530 lived to see the next year. That was not all. Britain lost more of her sons before she withdrew in April 1798 -- ending a costly campaign, one that cost her 4,393,597 pounds and many lives.

But the classic example of medical catastrophe came in 1802 General Leclerc, brother-in-law of Napoleon arrived at Cap Francois with a force of 27,300 to be reinforced by 3500 fresh troops every month.

"When the hurly burly was done and the battles lost and won", many were gone. But this toll was small compared with that of yellow fever. Dessiliner and Christophe retreated to wait for the end which came with culminating force. According to the chief medical officer, Gilbert (Histoire Medicale de L' Française a Sainte Dominique) by the end of November 1802, that is 10 months after their landing,

Approximately 40,000 French soldiers had died, most of them from yellow fever.

During the same period 60,000 Negroes of Dessalines and Christophe's Armies had died. Dessalines claimed "drowning, suffocation and assassination hanging and shooting " to be the major causes of death. How true. Death prospered with the birth

of independence. Goaded by his grandeur visions and his fears of Napoleon and of petitions from the South. Christophe ordered the construction of a citadel on top of a hill 2600 feet above sea level near Cap Haitian. This gigantic monument stands majestically as the eighth wonder of the world today. Its walls are 140 feet

high and 25 feet thick. A garrison of no less than 15,000 men can be housed within them. There were 365 cannons at the various parapets, Tens-ofthousands toiled for Christophe. Many were slaughtered to boost the morale of others. Others were marched off the parapet to impress Christophe's mistress. Emperor Christophe created

the dukedom of Marmalade and Lemonade. To discourage the French from returning he burnt most of the coffee and sugar plantations. His death would be no surprise to psychiatrists. According to the Eugene O'Neill play, Emperor Jones, supposedly based on Christophe's life, he staggered into the forests of Sans Souci and killed himself with a silver bullet. Why a silver bullet? Simply because he believed that only a silver bullet would kill him.

Today Haiti is a mixture of French civilization and culture with primitive African emotions and instincts. Not only is this mixture manifested in the customs and traditions of the nation but also in the colour of the skin and the zest for life.

The majority of the 4,430,000 people are direct descendents of the original slaves from Dabomy and Ibo. A very small minority consists of caucasians and mulattos who form most of the elite in Haiti. Eighty seven per cent of the population are rural, living in individual farms, or clusters of thatch-roofed huts. Ninety per cent of these people are illiterate, School facilities are available for only 20 per cent of the children. Despite this, attendance is irregular, due to lack of transportation, sickness, and domestic chores.

The Black Republic occupies the western third of the Island of Hispaniola. To the east is the spanish speaking Dominican Republic, while to the northwest is Cuba. To the southeast and southwest are English speaking Puerto Rico and Jamaica res-

About 80 per cent of the 10,000 square miles are mountainless, the greater stretch of which, are non-arable, by virtue of typography, rainfall, and soil composition. Soil erosion is also

a problem. Forest conservation is non-existent. Most of the roads are poor. During the rainy season, many stretches are impassible because of flooding. It is not uncommon to cross a river beside a bridge just because the latter is wait-

ing for repair and maintenance. Busses and trucks are the main transportation vehicles. Travelling on one of these busses is a thrilling experience. One is apt to find himself in an overcrowded bus together with domestic animals and all the shopping which the other passengers bring along. Often the peasant will carry her produce on a don-

key's back or on her head. The average annual income is \$70 (U. S. dollars). A lucky peasant might own one acre of land. On this small patch of land he has no choice but to grow multiple crops for family use. Many peasants are dependent on what they grow, along with the meagre amount they can purchase at local markets, or the money they

have earned by selling produce. The commonest foods available are cereals, (corn, millet and rice), starches (plantain, cassava, and sweet potatoes), dried legumes (dry beans, pigeon peas, peanuts,), fresh vegetables (pumpkins, chayote fruite, and squash.) Bananas are also very popular.

ermen. It was estimated that 5 to 6 pounds of fish are consumed per-capita per-year.

Livestock is scarce in Haiti. Cattle, pigs, goats, sheep, and poultry are reared in reasonable numbers.

Before discussing the pathology scene in Haiti, it is perhaps apt to study some of the demographic factors that affect the type and pattern of disease seen. Life expectancy is 42 years Total mortality rate 21.6 per thousand. Infant mortality rate 200 per-thousand. Percent of population under 40 years is 73 per cent. Percentage under 15 years is 38 per cent. Physician to patient ratio 1:12,000.

Malnutrition is the most common disease, closely followed by T. B., Tetanus, Typhoid, Diarrhea and Malaria.

We shall now follow the birth and growth of the Haitian child. His mother receives no ante natal care simply because none is available. From the moment he ventures into the extrauterine world he is susceptible to what Christensen calls a curiosity -- Tetanus Neonatorum. (It is the third cause of infant mortality.)

Back in the slavery days Tetanus Neonatorum was believed

peasant's requirement for riboflavin and carotene.

Let us next visit a public school at La Saline, a waterfront district in Port-au-Prince where the poor exist. The children attending this school seldom eat more than one meal a day and during the sugar cane season, sugar canes may be their only daily nourishment. At night the pavements of the houses form an instant dormitory for some of these children.

Not far away is a Catholic school for girls. These girls are more fortunate for 1.6 cents are spent on each girl on daily food. A mid-morning roll and a lunch of .1 pounds millet, .05 pounds red beans and .05 sweet potato provide a strong incentive for these kids to attend school.

Despite the lack of rice and fresh vegetables, which are more expensive, the nuns feel that they are providing 90 per cent of the nourishment that the girls obtain.

Perhaps it is a blessing in disguise to be confined to the government operated school for orphans and delinquent boys in Carrefour, Arga, a suburb of Port-au-Prince. Here at least the boys know they will be properly fed as 22 cents are spent on each boy a day for food. Each day he get 100 grams of fish

Haitian dictator "papa doc", Dr. Franciose Duvalier addresses the visiting group of medical students and doctors while his anxious bodyguards scan the crowd. Duvalier never appears in pub-

lic without having his trusty henchmen in attendance. A former doctor himself, Papa doc told his visitors that "Haiti is not a

to be due to the bad air in the slaves shack, or occasionally when the traders tried to shun this responsibility, to mothers killing

In Canada it is a luxury to have pets in the house. In Haiti, cows, poultry, and donkeys enter freely, without the peasants realizing the spores of Clostridium Tetani, are thriving on their

Perhaps a moments consideration of home delivery will enlighten us about conditions in this country. When the time comes the expectant mother is laid on a mattress, soiled clothes or newspapers lying on the floor. The midwife kneels in front while old grandma or skinny sister kneels behind. After the second stage the child is laid on the floor until the third stage of labour is completed. The cord is severed with a knife, a pair of scissors, or a pair of stones.

To finish with a grand finale, black powder postulated to possess magical power, is spread onto the bleeding umbilical cord. It is indeed a wonder to behold so many escapees from tetanus neonatorum.

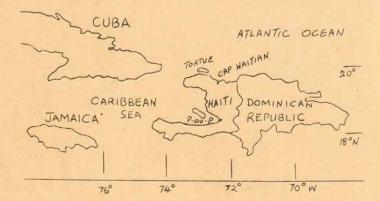
There have been suggestions about campaigns to limit this child-killer. But why save a child in the first few weeks of life, only to die of diarrhea or malnutrition. Infantile diarrhea is the leading cause of admission to the pediatric wards of the Port-Au-Prince hospital.

Going into the third year of life is just like jumping from the frying pan into the fire; flames that are perhaps not hot enough to kill, but often just hot enough to cripple and scar.

In poverty stricken illiterate Haiti, malnutrition is the central problem, and good nutrition is considered a privilege for the very rich. It has been empirically shown that Haitian children are of a distinctively lower stature and weight compared with Americans, and that these differences are directly associated with socio-economic status.

The study referred to here showed that the statistics for children from the small upper classes compared favourably to typical American standards, suggesting very little ethnic influ-

ence on the stature and weight of these children. Clinical and biochemical evidence confirms our impression that malnutrition is public enemy number one in Haiti. A typical Haitian wakes up in the early morning before the sun creeps over the eastern horizon. For breakfast he has a cup of coffee



with 4 teaspoons of sugar and a biscuit (30-35 mg.) As head of the family he is privileged enough to enjoy 1/2 oz, of the native rum. At noon he has plantain and a small portion of dried codfish. He is grateful for the variety he is having for it was only yesterday that he was having sweet potato and the day before, a dish of corn and beans.

At sunset hunger makes him wonder whether he would be getting corn or millet with beans or "bouillon" for dinner. And, there are some left over wheat flour dumplings from last week.

At certain months of the year, food is plentiful. During the mango, orange, grapefruit and sugar cane season he eats them between meals and at any time during the day, Should he not grow vegetables in his gardens, he seldom eats them as they are a wee bit beyond his financial status.

Besides, there is always those wild green leaves which can be plucked from the bushes beside the ditches. Surprior meat, and 150 m. of milk. At lunch, he is served rice, beans, green leafy vegetables and plantain.

Any programme aiming to solve such a problem will need 12,000. Because of the inequitable distribution of physicians, in some areas the ratio soars to as high as 1:75,000.

The Haitian medical school, established in 1830, graduates about 45 doctors a year. Medical education is free in Haiti, making it possible for bright young students from poor families to train and later serve their nation. Upon graduation, all the young nymphs must spend a year in a rural area working for the ministry of health. This requirement was made law in 1951 to encourage more doctors to stay in Haiti and help solve the many endemic medical problems.

A nation like Haiti undoubtedly attracts many humanitarians who offer both medical aid and good will. The Medico programme has been established despite considerable difficulties. The Albert Schweitzer Hospital in Borel certainly is a blessing to many sick Haitians.

The Centre de psychiatrie is the only modern psychiatric facility in the nation. Recognizing the tremendous number of ophthalmologic cases in Haiti, the American Ophthalmological Association sends some of her members to the Island of Tortu. off Port-du-Paix, for a month's experience and service. Such programmes are worthwhile and desirable. More should be en-

But attempts to introduce western medicine has encountered considerable difficulties and the acceptance of the western way of life is certainly not universal in Haiti,

During the fiscal year ending June 30, 1962, the United States offered \$8,200,000 aid to Haiti which has an annual budget of \$25,000,000. Despite this financial aid, Haiti continues to function on a subsistence level.

During the first three years of the Centre of Psychiatrie, only 415 patients were admitted for treatment and 1,200 were seen as outpatients. According to the world rate of psychosis (estimated at 3 to 7 per 1000) there are between 12,000 and 21,000 psychotics in Haiti. Of these, 6,000 need medical treat-

Obviously some discrimination against Western medicine exists. Culture and centuries old traditions certainly account for most of this discrimination. In Haiti, voodo is the dominant factor in the way of life for many and a close study of voodo will be enlightening for many of us here.

Voodo is an amalgam of African animism and the Catholicism of French missionaries. As an elaborate religion containing a hierarchial structure of gods, saints and angels, sacred cults and propitiatory rites, it dictates a system of ethics and morals for many,

The Voodoo priests (hungans) and priestesses (mambos) are doctors to the ailing many who have been nurtured to believe in such clandestine rituals. To the hungans the etiology of all diseases consists of; (a) sorcery and (b) offenses to the loa (spirit). To be cured, the patient must identify a loa with the hungan in addition to participating in the rituals and the cere-

As one hungan said: "In order to cure someone successfully, it is necessary for them to believe in me, in Voodo, or From this it is apparent that the hungan's success stems

principally from the psychotherapeutic aspects of his relationship with his patient. His elaborate ceremonies offer acceptable outlets for the expression of many inhibited feelings and the arousal of many pleasurable sensations.

The choice of treatment, of course, depends on the disease. If the etiology is sorcery, the hungan counteracts the devil spirit with his own magic. He may, for instance, behead several white pigeons obtained by the patient, rub the blood of the pigeon on the patient's head and its body over the patient's body.

For epilepsy caused by 'black magic" the patient is bled by leeches or by incisions in his arm. When such minor procedures fail, the patient is admitted to the "hounfort" for further observation and treatment. It is then that community-wide ceremonies are held. Here animals are sacrificed, patients are placed over hot flames, a variety of magic is performed and sometimes exorcism is practised by flogging and burning

Apparently, many patients are cured by such ritual. It is, therefore, not surprising to find the hungan regarded as a truly divine representative among the peasant populace and can do good or evil for his congregants in accordance with his personal

Many are born into such culture and many are nurtured to accept such culture. Consequently, success in business, health, love and other areas of life in Haiti depends on the benevolence of the deities and all must come to the hungan for advice support comfort and assistance in dealing with the anxieties of life.

Failure to conform to the hungan's demands will result in harm to the individual and his family. Fear of such injury will naturally prevent the maturation of the individual and the acceptance of the rational ways as advocated by others.

So long as hungans control the social aspects of peasant life and so long as individuals are distracted from pursuing more rational areas of life, acceptance of western medicine cannot be expected.

The necessity to integrate folk beliefs and customs into a modern system of treatment is obvious but often overlooked by many well-meaning helpers. Until this is realized by western

benevolents, their Utopian plans are doomed to fail in Haiti.

Dr. Lambo's work in Abeokuta, Nigeria, suggests a valuable technique to tackle the health problems of underdeveloped countries where many native beliefs dominate the life of the people. In Abeokuta, the hospital is situated near the village. The village chiefs and elders participated in monthly hospital meetings and aided in planning the various treatment programmes. The native healers did the epidemiological and community surveys for the Western medical staff besides supervising the social and group activities of the patients in the village. Recognition of the therapeutic elements of culture have paid well for Dr. Lambo.

Such an approach of cooperative pluralism in Haiti will probably meet with success for it will minimize the harmful effects of hungan's necessity to maintain prestige and power.

Any extensive medical programme in Haiti will require considerable financial aid from countries like the United States, Canada and the Soviet Russia.

Concerned nations, willing to help, will recognize the fact that millions of their neighbors in this island exist in poverty with average annual incomes of \$70; that life expectancy is only 42 years, that 80 per cent of the children have no schools to attend, that more than half the adults cannot read and write; that thousands of city dwellers live in unbearable slums; that millions more in rural areas suffer from easily curable diseases without hope of treatment; that in vast areas men and women are crippled by hunger while they, the prosperous nations, possess the scientific tools necessary to grow all the food they

These nations should also realize that it is the Haitians who must undergo the agonizing process of reshaping institutions, not them. It is the Haitians whose cities and farms, homes and halls of government will bear the shock wave of rapid change and progress, not them. It is the Haitians who will have to modify the traditions of centuries, not them.

All these the concerned nations must realize and more. A large sum of money as foreign aid with apron strings tied will achieve nothing. A large shipment of wheat as a humanitarian gesture to a national disaster (as in 1954) will aid little.

Any plan to aid a nation such a Haiti should be one of cooperative pluralism which advocates a policy of constructive and progressive gradualism, and depends on persons of conscious and voluntary goodwill. It combines the Utopian and practical approach and will benefit the present generation as well as future ones. It does not depend on the existence of emergencies and is a daily, a weekly, a monthly process, gradually changing opinions, slowly eroding old barriers, quietly building new structures.

LET'S TALK HOCKEY

-Continued from Page 6-

one goal when he skated out from behind the Dal net unmolested and simply flicked a neat shot past the desperately lunging form of John Bell. Ken Loughrey of U.N.B. went to the sin bin at 11:34 and nce expired Dal's Bill Stanish scored from ble in front of the Devil's cage. Assists went to Tuppy Rogers and Don Nelson. Back to back penalties to Dal's Don MacPherson and Bill Stanish gave U.N.B. a powerplay advantage for almost four minutes. The Tigers killed off MacPhersons penalty but Austin Duquette made sure that the second man power advantage was not wasted. A hard shot by Winslow was blocked by Bell but the rebound went straight to Duquette and he slipped the puck into the open corner. Arnott was also given an assist on the play. Dal regained a two goal lead when Bill Stanish fought his way out of the left hand corner past two U.N.B. defenders before sending a backhand shot just inside the left-hand goal post. Nelson and Walker gained assists. The last goal of the game was scored by A. Duquette at 18:45 with Marty Winslow counting his fourth scoring point of the game via the assist route. Madill was also given an assist on the play. At this time the U.N.B. coach pulled his goaltender and sent out six attackers for the last minute and fifteen seconds. The Tigers really bore down to preserve their one goal margin and prevented the Red Devils from getting a shot away at John Bell. The final score was 8-7 in Dal's favor and marked the first time that Dal had defeated U.N.B. in more than five years.

Both Don Nelson and Bill Stanish enjoyed a seven point evening. For Nelson this was his best game ever as he dashed from end to end setting up plays yet getting back to thwart U.N.B. attackers. Both players will be awarded caps for their outstanding efforts. Another player who put forward an outstanding contribution was Doug Quackenbush. Doug scored Dal's first goal but it was his defensive play that was a major feature of Dal's victory. Sharing the defensive honors was Jamie Levitz who continues to play the finest hockey he has displayed since first donning a Tiger uniform five years ago. John Bell finally played a bad game but even at that he managed to come through with the big saves when they were needed most. John has been a mainstay of the club all year and has kept his mates in many games...Saturday night it was their turn to bail out John and they came through in fine form. Dave McClymont re-injured his left knee at the ten minute mark of the third period and will be lost to the club for their fame with the X men. This loss has to hurt as Dave is amongst the best defensemen in the league. The shots on goal were even at 39 apiece. The win moved the Tigers past St. Thomas in the standings and marks the best showing of a Dal team for a long time....also it makes things look a little brighter of next year. Congratulations fellows a well earned victory.

WOMEN'S SPORTS

-Continued from Page 6-

sports as basketball, volleyball, badminton, swimming, and field hockey, and are about twenty in number. The purpose of this club is four-fold, to act as an advisory board to DGAC, to provide programs of interest to its members, to serve refreshments to visiting teams, and to act as tournament hostesses and do work with tournament committees.

We have had several special programs this year, such as films on Bruce Kidd, figure skating, and the Quebec Winter Carnival, a soccer game among club members, a broomball game against the executive of DGAC and a talk by swimming coach Bob Graham, entitled "After Physical Education - What?". Also the members have acted as hostesses for basketball, badminton, and volleyball tournaments.

The officers of the "D" Club are: Lois Hare, president; Judy Bulpin, vice-president; Carol Dunsworth, program chairman; Barb Colp, secretary; and Belle Clayton, treasurer.

Nut Holding Wheel GERMAN STUDY SAYS DRIVER BIG KILLER

BERLIN-A German group, studying the country's traffic problems, has come to the conclusion that the human factor causes most highway deaths.

The group says that overcrowded roads contribute to the number of accidents and mechanical failures play a minor part but they still point to poor and careless driving as the major killer.