Implementing an Interprofessional Hypertension Clinic in a Rapidly Growing Community Outside of Port-au-Prince, Haiti

Becky M. Baird, MS, RN-BC, CMSRN, CNE, University of Texas at Arlington College of Nursing and Health Innovation, Arlington, TX



Ellen L. Palmer, PhD, RN, International Child Care, Kalamazoo, MI Rachel Zimmerman, DPT, We Care Haiti Ministries, McKinney, TX

Lola Orphee, RN, *Onaville Community Health Center*, Onaville, Haiti



Prevalence of Hypertension in Haiti

- Leading cause of morbidity and mortality among adult Haitians
- Prevalence of around 45%
- 176 deaths per 100,000 due to stroke which is 10.3% of deaths
- Most frequent diagnosis in rural clinics, ranging from 39% of men and 45% of women

Dominance of the 3 S's

- Stroke rates are more than double in Haiti than the rate in the Dominican Republic (Haiti's island neighbor)
- Fatality rate from stroke is estimated to be around 30%
- Only 20% to 30% of stroke patients are hospitalized in Haiti due to the Social Determinants of disease: low availability of hospital beds, access to services, 75% of Haitians live on less than \$2 a day, 56% live in extreme poverty, living on less than \$1 a day
- Haitian dietary Salt intake is 9 10 times greater than the U.S.
- Estimates are Haitians consume 30 to 35 grams of sodium daily

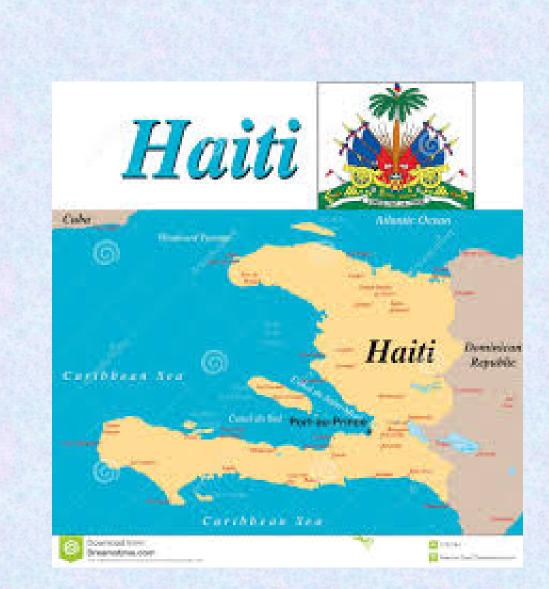


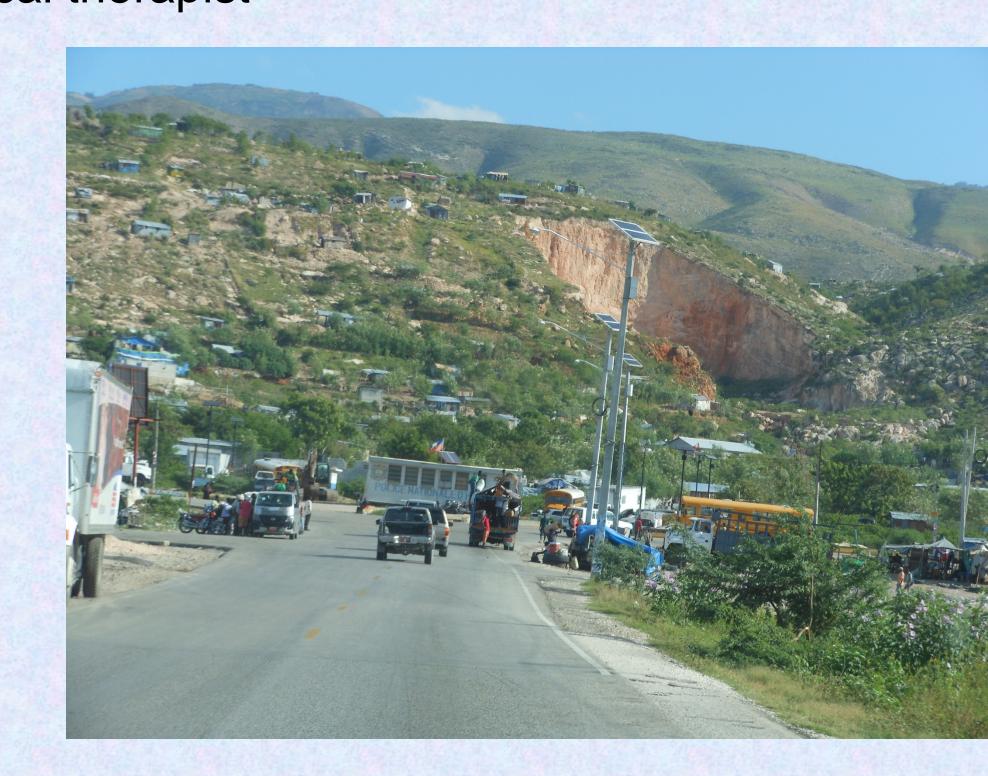




Onaville Community Health Center

- Financed through We Care Haiti, a faith-based, Christian nonprofit organization based in Texas
- Focused on the care and development of Haitian communities with the goal of long-term sustainability
- Haitian staffed clinic in the fastest growing community in Haiti, due to the displacement of persons from Port-au-Prince, post-earthquake
- Community hypertension program developed in 2016 to provide the best possible practices to address the hypertension program in this community
- Clinic is staffed year round by Haitian doctors, nurses, nursing staff and a doctorate prepared physical therapist

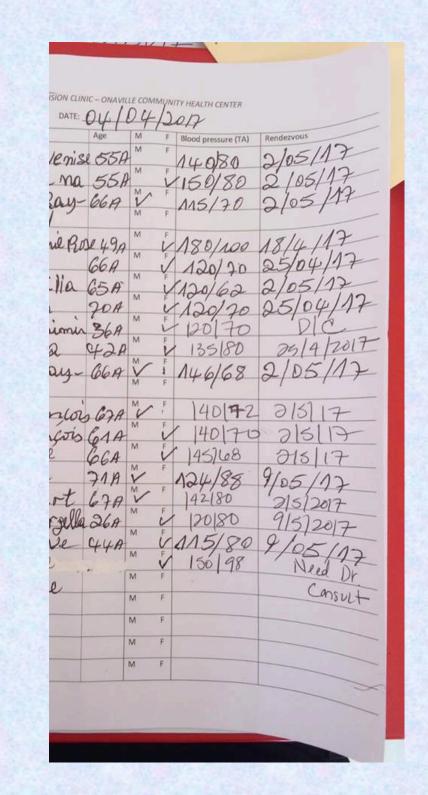




Treatment Plans

- Group classes for patients and their family members
- Nursing care
- Physician supervision
- Nutritional information
- Medication assistance
- Ongoing weekly 'hypertension clinic' lead by nursing staff





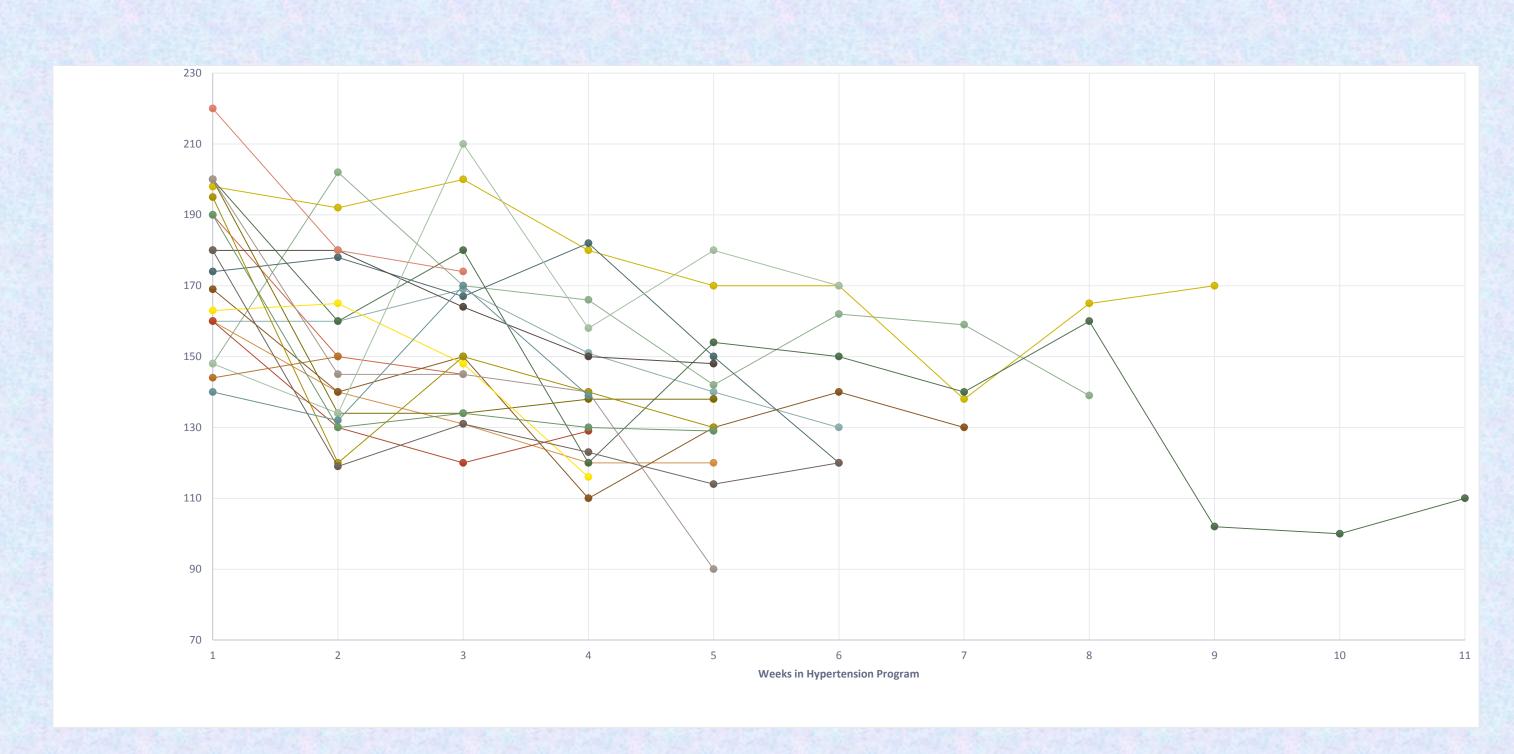
Closer Look at Participants

- Clinic visits between April 2016 November 2016
- Arrived on foot, sat in line on benches
- Blood pressure taken by Haitian nurses as participants progressed through the clinic
- N= 49
- Age range 25 80 years
- No age documented for 14 participants (29%)
- No gender documented for these participants
- Age by decades
 - 19-29 yrs 2
 - 30-39 yrs 3
 - 40-49 yrs 10
 - 50-59 yrs 3
 - 60-69 yrs 10
 - 70-79 yrs 6
 - 80-89 yrs 1



Hypertension Data

- Definitions of systolic blood pressure ≥ 140mm Hg and/or a diastolic blood pressure ≥ 90mm Hg
- Those identified with hypertension made a minimum of 4 clinic visits over 12 week period
- Graph below depicts the journey of 19 participants in the reduction of their systolic blood pressure





Thank you to Dr. Males Mainviel, Anita Mainviel, Marie Monique Ulysse, Angeline St. Jean, Lola Orphee, & Dr. Lovely Thomas

References

- Baker, C. F. (2014). Hypertension in Haitian Adults (Master's paper). Retrieved from Carolina Digital Repository.
 https://cdr.lib.unc.edu/indexablecontent/uuid:6f396340-53db-465e-b8ad-37a2bf588879
- Kenerson, J. G. (2014). Hypertension in Haiti: The challenge of best possible practice. *The Journal of Clinical Hypertension*, 16(2), 107-114. http://onlinelibrary.wiley.com/doi/10.1111/jch.12242/full