

Medicine and morality in Haiti

The contest for healing power

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Introduction

This book explores the cultural conversation about illness, healing, and morality in the Haitian countryside. When people fall ill, their search for effective treatment opens up a realm of complicated moral concerns. Certain kinds of illness, and the decision to seek out certain kinds of therapy, can raise disturbing questions about personal innocence and guilt. People must then reassert their moral worth, and they do this in specifically religious terms. They ally themselves with a morally upright source of healing power – connected to one or another spiritual being – and ardently denounce the competing religious options. The contest for healing power thus takes place in the shifting and plural realm of Haitian religion. Conversely, people stake a claim to a particular religious identity largely through participating in a given set of healing rituals. Finally, these religious idioms of suffering and healing mediate between the local world of isolated rural communities and the national and global forces that are transforming Haitian society.

The two strands in this conversation – competing religious identities and the moral dimensions of sickness and healing – came together gradually in the course of my research in the rural community of Jeanty, near the southern port city of Les Cayes. I heard the first strand loud and clear on one of my first trips out to Jeanty. The second strand remained submerged much longer in the details of illness episodes and the practical talk about remedies.

Every day scores of public buses leave Port-au-Prince bound for the provincial towns of southern Haiti. Conversation is impossible for the first hour as the bus crawls through the impossibly congested neighborhood of Kafou, on the expanding western fringe of the city. Tin shacks, half-built cinderblock houses, and the unending crowds compete for space from the gouged hilltops right to the water's edge. The heat, the exhaust fumes, and the sudden swerves around potholes or squads of uniformed schoolchildren reduce most passengers to a mute stupor. Finally breaking free of the urban sprawl, the bus picks up speed in the verdant agricultural plain near Léogane, still planted in sugar after 300

years. The landscape changes yet again during the long climb up the mountainous spine of the southern peninsula, stretching away from the city into the Caribbean Sea. Cooled by the fresh mountain air, this is when people – total strangers when they boarded the bus – start to talk.

I have taken this ride often, and it is where I first learned about the passionate debates surrounding religious identity. The first exchange I remember went something like this. A woman sighs loudly and thanks Jesus, but someone else breaks in with a pointed joke, “It wasn’t Jesus, it was our driver who saved us.” “But we are all children of God,” responds the woman amid scattered laughter. Then an aggressive voice pushes the debate further: “Are you a child of God? Then why do you say that we Catholics worship the devil?” A murmur – of approval? embarrassment? – stirs the passengers; that question was a little too direct. The first speaker protests, “No, it’s not all Catholics. But there *are* those who deal with ‘other things’” (*Se pa tout katolik, non? Men, gen moun ki konn sèvi ak lòt bagay*). The conversation then explodes into a free-for-all about the sincerity of converts to Protestantism (like the original speaker) and about Catholics who are morally upright as opposed to those who need “other things.” Meanwhile we pass other buses heading back to Port-au-Prince, and I try to guess the religious affiliation of their owner from the colorful exterior paint job. Are the buses adorned with lines of scripture (Protestant), crucifixes (Catholic), or stylized images of snakes and water-sprites (devotees of the *lwa*, or African-derived spirits)?

It took much longer to connect the lively debate about religion to the realm of bodily suffering and healing. I entered this conversation slowly and at the most practical level when I actually began living in Jeanty. In ordinary discussions and formal interviews, I traced the steps people took when they fell ill: which healers they consulted, what treatments they accepted, and how they interpreted their suffering. I also sought out the healers themselves and asked how they learned their art and carried out specific treatments. I thus spent many months immersed in the practical details of illness episodes: how people noticed their symptoms, chose healers, and evaluated the treatments they received.

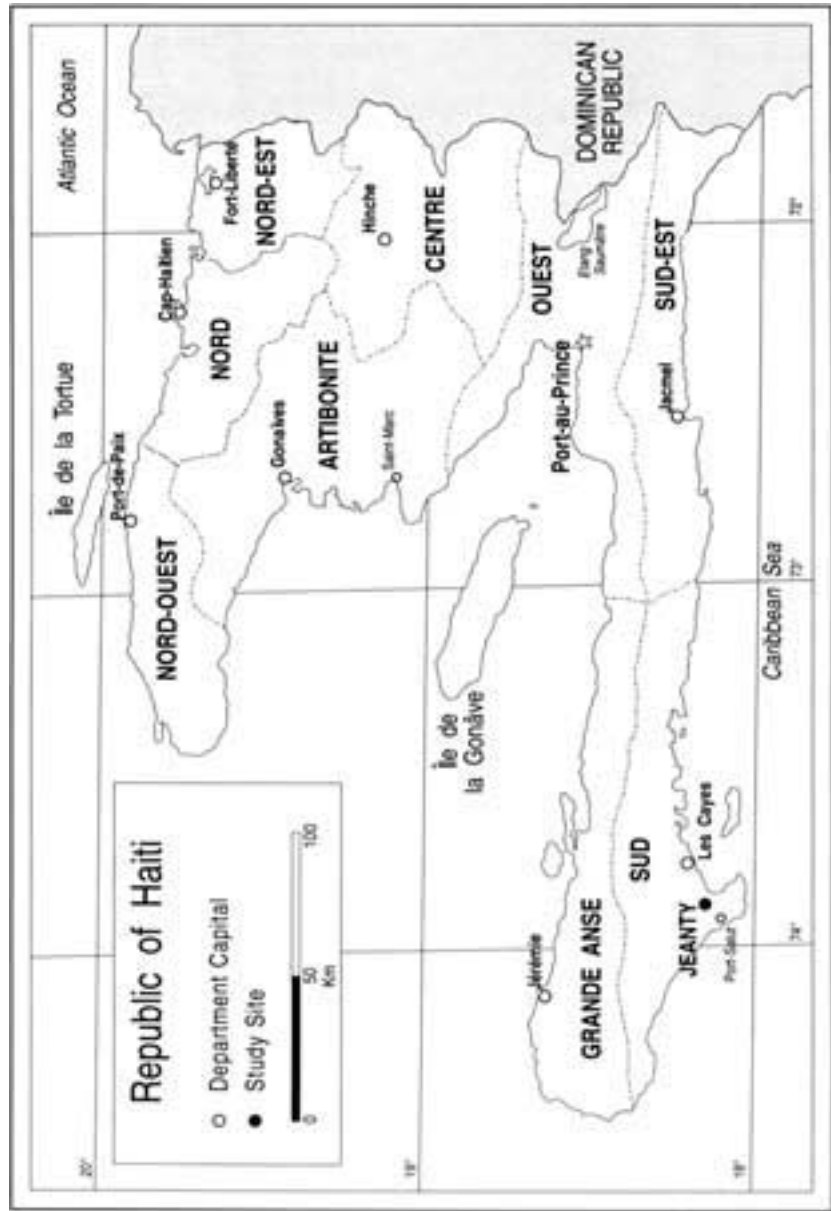
That was the easy part. Before long, I had collected long lists of herbal remedies and hours of taped conversations about how people reacted to crises such as an infant son’s high fever or an aging mother’s muscle pains and fatigue. Local midwives and herbalists allowed me to watch them prepare tea infusions and herbal compresses for my friends and neighbors. In rural Haiti, the practical knowledge of illness and healing is not a hidden cultural domain and it is not guarded by high-status professionals. To the contrary, even a child will easily list the medicinal

uses of thirty or forty wild plants. People will recite to any interested listener all the expenses and troubles caused by their current sickness. Healers need little prompting to boast about their diagnostic skills or to explain why they offer more effective treatments than their competitor in the next village.

In the midst of these straightforward conversations, however, people occasionally dropped a comment or proverb which disrupted the aura of common sense. The conversation veered away from the practical questions at hand to linger for a moment in an entirely different realm. One evening, for example, I sat with a young mother as she patiently explained which local leaves and roots she used for a range of common childhood sicknesses. What would happen, I wondered out loud, if neither these domestic remedies nor the dispensary medicines improved the child's health? "That means it's another kind of sickness altogether," she said curtly and glanced away. With that comment she ended the discussion. During another conversation a few weeks later with her neighbor, the topic turned to illnesses that are sent upon you out of jealousy or spite by an enemy. I asked what treatment is possible, and received the cryptic response, "You know what they say about the saw." Much later I figured out the full reference. The Creole proverb states that the block of wood cannot cut the saw; only a saw can cut another saw. Only by resorting to pathogenic magic can you cure an illness caused in the same way.

Fieldwork setting and method

This cultural conversation about medicine and morality and the dense meanings of innocence and guilt, God and the spirits, furnished the conceptual framework for my research in Jeanty. (The names of the village and all of its residents are pseudonyms.) I lived there for a total of seventeen months: one year in 1987–88 and five months during 1990 and 1992. The village (and parish) of Jeanty is tucked into the foothills at the edge of the Cayes plain, one of the wealthiest sugar-growing areas in colonial St. Domingue. The Acul River, which forms one boundary of the parish, appears on a colonial map published in 1731 (Vilaire *et al.* 1981), and directly across the river, hidden in weeds, lie the ruins of French-built irrigation works and the skeleton of a plantation "great house." The land of Jeanty, however, is hilly and rocky, and was probably first populated by freed slaves escaping plantation labor in the first few years after Haitian independence (officially declared in 1804). For most of the nineteenth century, it remained a small hamlet under the administrative control of Port-Salut, a wealthier coastal town. However,



1 Map of Haiti

its autonomy increased as its population grew; it became a *quartier* of Port-Salut in 1934 and a commune in its own right in 1978. The official population of the commune was 11,820 in 1986, but only about 3000 people actually resided in the central “village” of Jeanty (Thomas 1988) (see map, Fig. 1).

The village itself is little more than a collection of small tin-roofed houses, clustered along a grid of unpaved streets which dwindle into footpaths as they climb the hills (see Figs. 2–4). Nonetheless, it is a magnet for people who live in scattered hamlets throughout the parish. They come to sell their produce at the twice weekly market, to have their babies immunized at the dispensary, to attend mass at the central Catholic church, or to get a few years of secondary education. The market, in turn, is one of three rural markets held in neighboring parishes on alternate days. The dispensary is the lowest rung in the national health services, and regularly refers patients to the public hospital in Les Cayes. Students wishing to finish high school must also move to Les Cayes. This regional system is itself dependent on, and penetrated by, centers of economic and administrative power in Port-au-Prince. Finally, in even the smallest hamlet far from the village center, most people know someone who lives *lôt bò* (“on the other side”) in the United States, and who sends monthly cash remittances to offset the worsening poverty of rural life.

In the fall of 1987, I arrived in Jeanty through these same connections which link the village to regional, national, and international centers of power. I came with a letter of introduction from the CARE office in Les Cayes (CARE, a relief agency, had installed a potable water system in Jeanty with American funding). A week later I began living in the guest quarters of Père Joseph, the French Catholic priest who had been posted to Jeanty. My first friends were folks who had relatives in Boston, the city I had just left. However, the Catholic connection determined my public identity for most people, and it thereby fundamentally affected my research. Most people assumed I was Catholic (even more, that I was a relative of Père Joseph). So in our discussions about religious healing, they adopted the formal Catholic position and vehemently denounced the realm of the *lwa*. Jeanty residents have nothing to do with “those dirty things,” I was told, and if I wanted to learn about them I should go to Port-au-Prince. Moreover, they made scathing indictments of Protestant converts as hypocrites who continued to worship the spirits in hiding and who just wanted to get a salaried job, and maybe a green card, from their North American missionary sponsors (see chapters 5 and 6).

I took their denunciations seriously, not as an accurate map of social and religious divisions, but as a legitimate strategy to consolidate their



2 Low hills surround Jeanty on three sides. The village center is barely visible through the trees.



3 In small hamlets throughout the parish, people usually live in small wattle-and-daub houses with thatched roofs.



4 The village center is filled early in the morning with children walking to school and adults going to sell produce in the market or to work their land.

own identity. I thus began to explore the interstices between religious groups, not their stable centers. My goal was to examine how people construct the boundaries between distinct forms of religious affiliation and religious experience, as well as how they enforce (and breach) these boundaries. My methods were the standard ones for participant-observer ethnography: semi-structured interviews, attendance at religious and healing rituals, and collection of life histories and illness narratives. As an anthropologist/outsider, I do not take on the dubious project of representing anyone's authentic experience as a devotee of the *lwa*, the Trinity, or the Holy Spirit. On both epistemological and ethical grounds, such a project would quickly founder in its own contradictions. I remain much more interested in how people view each other's doctrinal and moral position, and how their rhetorical construction of religious difference animates the overall system of religious and medical pluralism.

Besides these theoretical concerns, the texture of daily life in Jeanty and the larger political convulsions affecting Haitian society also shaped my actual research activities. Because I was a novelty in the village, it was not hard to find people willing to talk to me. Only a handful of outsiders had ever lived there for more than a few weeks at a time, and these folks were either missionaries or development workers who had clearly defined tasks to accomplish. Moreover, it took me only a short time to become fairly proficient in Creole, since I had studied the language before leaving the USA and again at the Haitian-American Institute in Port-au-Prince. Finally, I was eager to speak at length with all parties in the religious debates which circulated through the village, which made me a willing audience for declarations of faith, conversion stories, and strident denunciations of opposing views.

For the first few months, I conducted every interview with the help of François Lormier, a young man who began as my paid research assistant and soon became my friend and confidant. François was part of an amorphous group of village men – aged from their late teens to mid-thirties – who are perpetually underemployed. Unwilling to follow their fathers' generation and become simple *kiltivatè* (peasants), these men would occasionally go to Port-au-Prince or Les Cayes to seek salaried jobs, and just as likely return empty-handed after a few months. For many of them, the ultimate goal was migration to the USA, and perhaps they befriended me because I was connected with their idealized picture of North American life.

François is a mono-lingual Creole speaker, but he provided help by rephrasing my questions in the correct idioms and repeating or clarifying people's answers. Our trips to interview far-flung healers often attracted

other young men, who were probably bored with the slow pace of life in Jeanty and welcomed the diversion. Although they were all raised in the village, many of these men had spent a few years living in Port-au-Prince. Because of their skeptical and somewhat aloof attitude towards rural society, they made the perfect conversation partners as I was learning about local religious and medical systems. Like me, they straddled the perspectives of cultural insider and outsider, but they obviously had a vastly greater fund of personal experience and very different stakes in the religious debates animating Haitian society. Their imprint is felt throughout these pages.

This research was conducted during an especially violent period in Haiti's recent history. During my residence in Jeanty from September 1987 to September 1988, three distinct governments ruled the country, and one week after I left there was another *coup d'état*. The election-day massacre of November 29, 1987 dashed the hopes held by the progressive political sectors for a democratic regime. Leslie Manigat's ineffectual and unpopular rule lasted from the rigged election of January 17, 1988 until June 1988, when General Henri Namphy ejected Manigat and formally installed himself as President. Namphy himself was overthrown on September 17, one week after he sponsored a horrific attack on parishioners in the church of St. Jean-Bosco as Mass was being celebrated by Père Jean Bertrand Aristide (see Wilentz 1989).

Despite the brutal political violence played out on the national stage, rural communities like Jeanty remained mostly placid during this period. I witnessed little evidence of direct state repression and no overt violence. The reign of the *Volontiers de Sécurité National*, the network of informers who penetrated every rural community under the 29-year Duvalier regime, ended with Jean-Claude Duvalier's own departure in February 1986. The harsh repression inaugurated by General Raoul Cédras's overthrow of Aristide in September 1991 had not yet begun. Nonetheless, this political turbulence affected my research in more subtle ways. Many village families were sheltering relatives who had escaped the violence in Port-au-Prince, and these included many of the young men described above. Moreover, I never directly broached political topics with the people I did not already know very well. The contest for healing power is intimately tied to strategies of rule, the oppression and political constraints of rural life, and micropolitics of resistance. By necessity, I examined these issues in the broadest possible context, without overt reference to the ever-changing and highly sensitive political events of the time. (Because the situation remains volatile, I use pseudonyms for all village residents and do not identify the people in photographs.)

Goals and limitations

In exploring the network of religious and medical pluralism, this book diverges from the approach of several recent excellent studies of illness, healing and Haitian religion. Unlike Desmangles (1992), I do not provide an exhaustive theological account of any single Haitian religion. I develop a heteroglossic model of religious pluralism, not a stratigraphic model in which Catholicism is a superficial veil for more authentic neo-African doctrines and practices (1992:77). Unlike Brown (1991, 1989), I focus on the collective practices of religious affiliation, not the psychological or spiritual significance of devotion to the *lwa*. My rural ethnography does not, of course, address the innovations within Vodoun made by transnational Haitians (Brown 1991). Although I share her interest in the religious response to social fragmentation, I pursue it through the study of Protestant conversion and its harsh condemnation of Vodoun.

This book complements Farmer's writings on AIDS in Haiti (especially 1988, 1990, and 1992) in two respects. I explore the signs and practices available to frame all afflictions, not just the ways people marshal them in response to HIV disease. Secondly, I examine the implicit, not explicit, connections which people draw between disorder in the body/self and the body politic. Because AIDS appeared in the midst of radical political upheaval in Haiti, and so unjustly stigmatized Haitian people, the Haitian discourse on AIDS explicitly encompasses personal experience, local moral worlds, and Haiti's place in the West Atlantic system (see Farmer 1992:254ff). In Haiti (as elsewhere), AIDS has the ability to bring to the surface deep inequalities of race, class, nation, and gender. This awareness, however, is not unique to AIDS. It also emerges – albeit in more mediated, more embodied, and more “practical” forms – in the contests for healing power, religious affiliation, and moral authority, and these contests are the topic of my book.

However, no single study can encompass the enormous range of healers and medical practices in rural Haiti. For example, many people in Jeanty, especially older women, possess an incredibly detailed empirical knowledge of herbal remedies (see Weniger 1985; Weniger *et al.* 1986). This knowledge largely makes up the realm of domestic medicine (Hess 1983), and it cuts across individual religious affiliation. Moreover, the common explanation for many diseases and everyday aches and pains grows from another widely shared frame of reference: the humoral theory which connects symbolically hot and cold types of food and environmental exposure to subsequent illness (Wiese 1971, 1976; cf. Foster 1994). Precisely because these notions about the body, illness,

and healing are so pervasive, they do not differentiate between the various positions people take in the debates about morality and religious identity, and therefore they do not receive center stage here.

Finally, my interest in the complicated search for healing power which takes place during long-term episodes of illness necessarily limited the number of cases I could document. The descriptions of routine interactions between herbalists and their clients are drawn from over fifty such consultations which I personally observed. Descriptions of the healing and divination practices of *houngan* (specialists in serving the spirit) or Protestant pastors come from a much smaller statistical universe (perhaps a total of twenty each).