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Exploring the Therapeutic Roles of Santeria for Latinx Living in Florida

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EXPLORING THE THERAPEUTIC ROLES OF SANTERÍA FOR LATINX LIVING
IN FLORIDA

by

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A thesis submitted in partial fulfillment of the requirements
for the Honors in the Major Program in Anthropology
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ABSTRACT

Mental health services within Latinx communities in the United States has been greatly underutilized. Seekers of mental health support face many barriers including internalized stigmas, misconception of mental health services and low general knowledge of mental health and wellness. For many Latinx, culturally competent mental healthcare has lacked important elements to how Latinx interpret mental healthcare services. The use of Santería in many in Florida and the United States has supplemented gaps left by formal mental healthcare services. Santería has its own stigmas within Latinx communities were its practiced, forcing many Santeros and seekers to practice in private. Lack of public knowledge of Santería allows Latinx with mental illness to freely seek mental healing without the worries of negative judgment and stigma. The purpose of the is thesis is to analyze how mental health services are viewed within Latinx communities in central Florida. This work also examines the various reasons why Latinos generally underutilize mental healthcare services. My research investigates the uses of Santería in Latinx community in Central Florida as both a religious and informal therapeutic practice. Specifically, my research examines the extent to which Santería practitioners fill this gap as informal therapists and counselors; representing both culturally acceptable form of mental health services as well as reflecting the thoughts and perspective of Latinx towards formal mental healthcare.

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DEDICATION

This work is dedicated to those that suffer from mental illness and feel as though they have no way of finding help.

I am also dedicating this work to my father, Francisco, who inculcated the importance of education, encouraging me to reach for the highest levels of knowledge and understanding.

I also dedicate this work to my mother, Wendy, for always pushing me to do my best, and for showing me the importance of culture, community and forming relationships with people of different walks of life.

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CHAPTER 1: INTRODUCTION

Latinx are the largest and fastest growing ethnic group in the United States. According to 2010 US Census Bureau report, there is 308.7 million people of Hispanic or Latinx origins living in the US, accounting for 17% of a total population. Florida is among the ten states with the highest concentration of Latinx. Since they represent a large minority population within the US, it is important to understand their interactions with various public social services, systems and structures. Healthcare is one public service that need to understand the ways Latinx use health services as wells the ways they access healthcare. The degree to which healthcare and wellness is utilized and interpreted by the Latinx community is of great anthropological concern and deeply significant to public healthcare systems. Because this minority group provides valuable insight into the existing healthcare disparities experienced by minority groups in the U.S. As well as providing deeper insight on how to address the problems within public healthcare systems.

It is not surprising that Latinx experience many challenges when trying to access and utilize adequate healthcare. The challenges in accessing healthcare arise from both the biomedical system and the cultural perception of healthcare. Cultural concepts of health can have a strong influence in the ways individuals seek and use health services; creating its own limitations in finding culturally-sensitive care. Mental health is one area where biomedicine and cultural views of health, create the most problems in providing services to minority, especially Latinx. One way to address this issues within mental healthcare is to gain a better understanding of Latinx' concepts of self, and how it relates to mental health and wellbeing. Becoming aware

of how barriers to healthcare operate and are understood can offer new ideas about how public healthcare can improve the access to care.

Religion and spiritual beliefs plays an important role in many Latinx communities. In terms of individuals' health and wellbeing religion can also have strong influences on what people think about health issues and the cause of the problem. Santería, a religion that is mainly practiced by Latinx living in the Americas and the Caribbean has a strong healing component, which emphasizes the mind-spirit-body connections. Within Santería, seekers and clients can find many different healing remedies to a number of physical, spiritual and mental ailments. Santería can specially work as informal therapeutic help for many individuals. Santeros can work as informal therapists in helping Latinx deal with issues ranging from depression to family problems and many other life's stressors. Consultation with Santeros can range from a simple session of asking and answering yes or no questions, to hour-long sessions with "prescription and therapies" to follow at home. This religion intertwines different Latinx religions or folk beliefs into therapies and personal healthcare practices. This may have potential to optimize the experiences Latinx have with healthcare and related services, such a mental health support in the US.

CHAPTER 2: BACKGROUND: SANTERÍA IN HISTORICAL AND HEALTH CONTEXTS

Santería Healing in the Caribbean and the Americas

Santería has a long and rich tradition and has been of interest to anthropologists and other scholars in social sciences and humanities. This literature review will offer an overview of its historical contexts and some of the main ways in which Santería has been researched. Santería is a syncretic religion that encompasses aspects of Yoruba-speaking peoples' (of the present day Nigeria), Spanish Catholics', as well as native Ciboneys' and Arawak's (of the Caribbean) religions and beliefs. Santería has a long history, journey marked with slavery, colonialism, and experiences of resistances to various forms of oppression. It was the Yoruba African slaves that brought their religion *orishas* into Cuba in the 1400s creating a syncretic religion of the Rule of Ocha, better known as Santería (Rodriguez 2004). At the time of the first arrival of the Spanish in the island of Cuba in 1492, it was inhabited by 100,000 to 200,000 indigenous people. The island was mainly used as a port to resupply ships heading to back to Africa, Europe or seeking new lands. Unfortunately, disease, violence, colonization and stress on natural resources nearly eradicated the native populations of Cuba. Subsequently, the demand on production and for an ever growing labor force became the catalyst for the forced importation of African slaves into Cuba (Lefever 1996). The years after the abolition of slavery in Cuba when individuals of Spanish, African and the small group of Natives lived freely amongst each other allowed for traditions to become syncretic, hence emergence of Santería. Gowning trade, rising economic opportunities, and migration to other lands for greater opportunities facilitated the spread of

Santería to other islands of the Caribbean, in particular Puerto Rico and Dominican Republic, and eventually throughout the Americas in the 1930s (Rosario and De La Rosa 2014).

The oppression that colonialism brought, was experienced through many aspects of native inhabitant and slave labor force lives. Traditional practices and religions practices of the native peoples and slaves were often targeted. Colonizers forced their religion and other practices by punishment, if individuals used alternative practices. However, despite the constant control and dominance in colonial societies had over vulnerable populations, many cultural norms, beliefs, and practices of slaves and native peoples survived and are still observed today. Illustrating their resiliency and their refusal to die out. Some of these practices have also functioned as a form of resistance against the colonizers (Omari-Tunkara 2015). Religion in fact is one way that oppressed people can face the hard circumstances and maintain their identity and unity. The similarities of Santería and Catholicism, allowed Yoruba-people to hide their religion and gods behind those of the Catholic god and saints (Clark 2007: 15-17). In this way Santería worked as a form of resistance, because practitioners were able to worship their gods in plain sight.

Poor health and inadequate access to health care has also been a reoccurring problem, especially in oppressive societies. Folk and religious healing were of incredible importance to deal with the inhuman conditions that slaves and native peoples faced in Cuba and other parts of the world. Santería in this circumstance not only functioned as a religious support but also as a system of healing and healthcare. Santeria and healing have unique intersections within the Latinx communities. According to Martinez et al. (2014) who have examined Santería from a cross-cultural perspective, Santería functions “...as a supportive system of culturally meaningful symbols and healing processes, both of which can serve to bring about enhanced treatment”

(2014). The body, mind, and spirit of individuals are intertwined and cannot function as separate parts, each depending on one another to keep individuals healthy and sound of mind. Thus, an impairment to one can have great health implications for the other; for example, an attack on the spirit can create negative effects on the mind and the body (Beliso-De Jesus 2014). Accordingly, scholars have noted that Latinx are among the largest ethnic groups to largely use religious leaders and alternative folk-healers (who tend to treat the mind, body, and spirit holistically) when seeking help for mental health illness (Villatoro et al. 2014). Understanding concepts of mind-body-spirit as working-unit is important to take into account when addressing Latinx mental health issues and their underutilization of mental healthcare services, a question I consider next.

Latinx and Mental Health

According to the National Alliance of Hispanic Health, Latinx suffer from a number of mental health conditions and have greater challenges accessing quality mental health services than white Anglo Americans. An epidemiological Study by the National Latinx and Asian American Study released in 2014 demonstrates that approximately 60% of Latinx meet diagnostic criteria for mental disorders like anxiety, depression and substance abuse (Villatoro et al. 2014). Challenges in accessing healthcare range from illness-perceptions, economic status, and even the line of questioning used by health professionals in the process of diagnosis (Cabassa and Zayas 2007). For many Hispanic adults, disrespect can be shown by health providers via directly asking questions that are viewed as sensitive about topics such as alcoholism, illicit drug use, domestic violence, or any other mental health issue that might be perceived to be personal in nature. These direct questions for example can be “are you a drug

addict” or “do you feel mentally capable” - these question might embarrass and challenge the cultural conceptions of patients (National Alliance of Hispanics 2001).

Stigma might be one of the biggest obstacles in accessing mental health services and understanding mental illnesses from a Latinx cultural context. Shame, judgment, stigma, and invalidating certain mental illnesses that exist within Latinx cultures and discourses, have made it difficult for many to seek help (Arellano-Morales and Meza, 2014). Stigma is one of the biggest barriers and driving forces for Latinx avoiding mental health services and seeking out folk or alternative care. Research about mental health therapies and barriers in access in the U.S. conducted by Rastogi, Massey-Hastings, and Wieling (2012) argues that Latinx parents were more likely to take children to mental health providers if their issues were thought to be clinical or physiological in nature. Whereas social, emotional or personality issues are not viewed to be in need of medical attention (2012: 5). This way of thinking tends to be common among Latinx communities, where mental health services are for individuals that are mentally ill.

Understanding individual’s customs, beliefs, behaviors, and values will help mental health professionals better treat their culturally diverse patients (Eshun and Hodge 2014). Therefore, understanding the cultural significance of Santería is important because it functions both as a healing system and a religious system, thereby balancing health and mental health concerns and emphasizing the mind-body-spirit connections.

In many cases stigma comes from lack of understanding from both biomedical and public perception. Explanatory systems of health and healing need to be better examined, in order to find where communication between health providers and patients fail. Anthropologist Arthur Kleinman (1977) developed the concept of “new cross-cultural psychiatry,” which is an

interdisciplinary approach to mental illness, combining both the fields of anthropology and psychiatry research as related to the relationship between culture and illness. This new approach to the study of mental illness challenged the “old transcultural psychiatry” where the main focus was on Western clinical views on illness. This older view overlooked the experiences of being sick, cultural constructions of illness and health and key local influences of illness (Kleinman 1977). Kleinman stresses the importance of the subjective experience of illness and at the same time noting the clinical understanding of health and illness, and with this interdisciplinary approach, both biomedical and public perceptions of health can meet at even fields. Thus, Kleinman’s approach seeks to avoid misunderstanding and misconceptions that can create stigma.

Many scholars have written about the importance of public and individual views and perception of health and illness. It is important to step away from “medicocentric” views (Kleinman 2006), and put more focus on how individual understands and experiences illness. When clinicians fail to take into account cultural or personal views, many patients feel dissatisfaction with the healing process and may abandon treatment; thus finding alternative forms of healing. It has been estimated that “70% to 90% of all self-recognized ...sickness [is] managed exclusively outside... formal healthcare system” (Kleinman 2006). This expresses a high reliance on folk, religious, and home remedies to health problems. It also highlights the different ways that clinicians and folk healers explain and deal with health issues. Clinicians may only focus on the biological disease and put little importance on illness experience, which may impact the patient more than the biological component. In folk healing, the healer is typically more concerned about the problem in holistic terms and devote more time explaining why the

person is experiencing illness; helping through both the personal and social issues of being sick. This creates a more satisfying experiences to the patient because they understand their illness in ways that is culturally and socially sound.

Scholars of religion note that there are approximately 100 million Santeros— practitioners of Santería—in the world, although within the United States specifically the numbers of Santeros are difficult to determine because most of the practice is done clandestinely (Rosario and De La Rosa 2014). Historically, the social stigma for many Santeros has motivated them to keep their religion hidden. But many places, like New York City for example, have a well-known presence of Santería, mainly due to its large Latinx population. In contrast, central Florida Santeria practice are mostly hidden from the general public, even with its large and growing Latinx population. One important indication of the presence of Santería in Florida is the widespread existence of local botánicas, which are spiritualist healing stores. Botánicas also function as a social hub where informal faith-healing networks can be made (Viladrich 2006). Santería is structured similarly to family settings present in most Hispanic homes, allowing a more culturally comfortable and appropriate form of informal health services outside the family structure. For example, Santería has been identified in social work scholarship as a source of informal psychosocial support for Latinx with cancer (Rosario and De La Rosa 2014.) While Santería has been studied in a variety of contexts, little is known about the way that Santería practices function in central Florida and the perspectives on Santería in the local Latinx community where it is practiced. Therefore, in this research project I sought to examine these questions.

CHAPTER 3: METHODOLOGY

Specifically, this project examines the ways in which that Santería potentially fills the “gaps” of mental health services disparities within Hispanic community in Central Florida. Additionally, I sought to understand the perspectives of both Santería users and providers, i.e., Santeros, on the presence and utility of Santería in this community. In addition, I wanted to understand the use and perception of mental health and mental healthcare.

To examine these questions, I used ethnographic methods, including extensive participant observation over a period of eight months and 12 semi-structured interviews focusing on people of Latinx residing in Florida who have taken or are taking part in Santería. I conducted my data collection from January 2016 to August 2016. I received permission of the UCF Institutional Review Board to conduct research with human subjects (see “IRB Permission Letter” in the Appendix). I recruited Santeros, Santería clients and seekers by asking whether they might be interested to participate in this project. I described to potential participants my research project’s methods and the voluntary nature of the semi-structured interviews. During the interviews, participants were asked questions about their uses of Santeria, thoughts, and beliefs regarding mental health, as well as their uses (if any) of mental healthcare services. Those who choose to participate were recruited through word of mouth and snowball sampling appropriate to ethnographic fieldwork via a variety of “seed” connections I have established in this community (Bernard 2006). In the consenting process of potential participants, I handed to them an explanation of research, where they read the research objectives, description of confidentiality of the process, and the collection and handling of data. Interested Santeros, clients, and seekers

were able to contact me, the main researcher of this study, via email or phone if any concerns or question arose.

My final sample consisted of 12 participants who were formally interviewed, using either 1 or 2 interviews with guidelines (a set of open-ended interview questions) with each person. Interviews took between 25 - 40 minutes. The names of the research participants have been changed.

In my sample, participants consist of two different groups: (1) 4 Santeros and (2) 9 Santería seekers and clients. Santeros are those that practice Santeria as their main religion and consult with (provide services to) clients or others that seek their services. Seeker and clients are those who use the services of Santeros for any number of reasons. Both target groups are of Latinx residing in a community in central Florida.

My opening research questions for Santeros included but were not limited to:

1. How would you describe a typical person that seeks out your services?
2. Are there any common illnesses you treat? Please explain.
3. How often do you consult with clients?
4. Do you guide them through treatment process?
5. What happens when Santeria cannot help someone?
6. Do you refer them to other service?
7. Are you aware of any stigmas associated with Santería?
8. Do you feel that stigma hurts your practices?

Questions for Santería Clients and Seekers included but not limited to:

1. What made you seek help from a Santero? Please explain
2. Are you suffering from any illnesses and ailments?
3. Are the problems you are having related to your mental health such as stress?
4. How often do you seek out help from Santería?
5. If this is your first time, what brought you here?
6. How do you feel about formal mental health service, do you find them helpful?
7. What do you feel think is lacking with mental health services, if anything?
8. Are there any stigmas that worry you? - Either related to Santeria or health?

I followed these opening questions with “probes,” which were questions designed to further explore and encourage research participants to expand on their answers.

Through my established contacts in the Florida Santería community I have secured permission from 2 Santeros before beginning my research to interview them and to conduct research in their community. I recruited additional Santeros to reach a sample of 3 Santeros using the purposeful sampling method, also known as the snowball method (Bernard 2006), by getting recommendations from the current research participants but targeting Santeros specifically, Santería clients and seekers. I also conducted participant observation during two group sessions and one special ceremony, held in participant homes, and in one *Centro Espiritista* (spiritual centers). The interviews were either audio-recorded with the interviewees’ permission and/or field-notes were taken by hand. I analyzed each interview narrative for repetitive themes and explanations, which I then grouped to develop my two chapters with findings. I also used my field-notes from participant observation to discuss and contextualize the ways Santería is practiced in this community.

LIMITATIONS AND REFLECTIONS

In this research project I found some challenges in finding current literature in regards to the uses and practice of Santería in Florida, with literature about Latinx and their relations to mental health services being somewhat sparse. Most state data regarding Latinx health seems to be collected in contexts of drug abuse, sexually transmitted diseases, or immigrant health. This research, in contrast, is examining the perceptions of the mental services in Florida, as well as the lack of access and alternative outlets to mental health support.

Because of the time constraints, I was unable to gain access to the local central Florida communities' mental healthcare facilities in order to examine how they treat patients and if they have any cultural understanding of their local Latinx community as well as if there is any diversity within the local mental healthcare facilities. Such research may be suitable to a graduate level study.

I found that I was welcomed by the community to participate and observe any relevant interaction for the purposes of my research. In general, the individual interviewees were very forthcoming and readily related their experiences and stories. This research was an honors project, therefore I had limited time to collect my data, but I believe that a more extensive project would be warranted to further explore this topic.

In the next two chapters I present my research results, following which I draw conclusions and discuss the significance of these findings as well as possible directions for future.

CHAPTER 4: Effects of Poor Communication: Santería and Mental Health

In this chapter I present research findings that show how lack of proper discussion can create confusion and misleading assumption of mental health services. Specifically, I show how the lack of discussion also creates a state of unawareness that keeps many Santeros from recognizing their potentially important roles as informal therapists. Understanding the Latinx concepts related to biomedicine and alternative medicine may contribute to a greater understanding of the uses of Santería and the reasons why Latinx underutilize of mental healthcare services.

Trust is something that is very important when seeking mental healthcare and healthcare providers, and it can be one of the biggest barriers when accessing healthcare (Tyremen 2015). Often, the reasons of distrust stem from insufficient information, discussion about mental health, the nature of its care, and benefits from receiving mental health support. Having open comprehensive discussion becomes important in areas of mental healthcare, because it can determine how individuals seek help and the type of help they look for. Understanding mental health and wellbeing are and the kinds of care that available can greatly influence their access to healthcare. On the other hand, misconceptions about mental health can creating or perpetuating stigma associated with mental healthcare seeking.

Simultaneously, healthcare systems that are not aware of the differing cultural beliefs and practices of mental health within their society and communities could unknowingly create barriers for members of these groups. The problem with accessing mental healthcare becomes more complex the more one examines such factors as lack of open discourse, misconception

around what is mental health and, unawareness of the roles Santeros have in Latinx communities. These factors together create a sort of syndemic interaction because when these elements coexist together they perpetuate one another and create an even larger barrier for accessing mental healthcare than each barrier alone (Singer 1996). For example, if individuals are unaware or have little knowledge of mental healthcare this can generate misconception and/or stigma preventing Latinx and many others from seeking mental health services. This is where open discourse about Latinx' cultural backgrounds and interactions with mental healthcare system is important, so that barriers on either side can be reduced with improved engagement between the healthcare system and the local communities.

Overall language and words associated with the concepts of health and the mind are well understood and discussed among my research participants, but when it comes to thinking about these two concepts together as “mental health” confusion comes into play. One common finding of my research was that Latinx believe that there is no real need for adequate mental healthcare. This misconception further exacerbates stigma centered around the perception within the mental healthcare system of Latinx as a group that rejects this care. Lourdes, a 32-year-old mother of three, frequently seeks out Santeros for readings and consultations during difficult periods of her life. She holds the advice and recommendation of the Santero in high regard. When I asked her during the interview about her thoughts on the topic of formal mental healthcare or going to see a mental health professional, she spoke to me quite passionately about her distaste for formal mental healthcare. Lourdes explains as follows:

Lourdes: Those *grigos* don't know nothing about me or Hispanics. I mean I can't go there, they are just going to judge me and say I'm crazy... because of how they think Latinas are... loud and crazy. You know how it is.

Amaris: So, is it that you don't trust them or you don't think they can help?

Lourdes: Claro que no! pudes confiar en ellos (of course you can't believe in them), those people don't care about you, they just there to make money... they just tell you're wrong, give you some pills... y pa fura.

When I transitioned to the topic of Santería with Lourdes, she explained how she had a long-standing relationship with them:

Amaris: What is it about Santero that makes you feel comfortable to look for help?

Lourdes: The thing is that, Santeros, know everything about you. I can go in there and they tell me my whole life... from when I was a girl till now... I feel like I'm speaking to family, they tell if I'm doing something wrong or right. They never say that I'm crazy...they tell me that there is something like bad spirit or *negatividad* ... and they can tell me why things aren't going good in my life and why I'm under so much stress or why I'm being depressed.

From all the participants interviewed, Lourdes may have the most to gain from mental health support. She has faced many difficult times throughout her life. She came from an unstable abusive household that have impacted her relationships. At the young age of 14, she got pregnant with her first child. Because of the many issues she was dealing with, Lourdes lost full custody of her child. Lourdes fell into substance abuse shortly after she meet father of her other two daughters, because of the mental and physical abuse she received form her partner. The father of Lourdes two girls was involved in various criminal activities that eventually lead to his murder. These difficult events in Lourdes' life put a strain on her relationships, especially with her daughters. Her ex-sister-in-law (Myrta) told me after my conversation with Lourdes that "she [Lourdes] has problems with her *nervios* (nerves)... you know because of all the crap my brother put her through and the

drugs, but it's her daughters that worry me the most...she doesn't show them as much affection as she should."

Since Lourdes never had the family support that could supplement the mental healthcare she needed during difficult times, she turned to Santería. For Lourdes Santería worked both as mental health service and the family support that she needed. Evident from her interview was her view that the most important aspect to Santeros is the feeling of inclusion they provide. Similar to other participants' experiences. Santería gave Lourdes the answers she was seeking without having to explain in detail her history, her problems or about who she is; Santero already knew who Lourdes is, similar to a close family member. The idea that Santeros already know who you are, brings feelings of comfort and acceptance, making many feel similar to Lourdes, as though they do not have to defend their character. One of the biggest concerns that Lourdes has about mental health professionals, is the perceived notion that they will misjudge her because of their lack of understanding and acceptance. Using Santería therefore is freeing for her from facing any potential stigma and judgment by mental health professional.

In her interview, Lourdes also brings up "*negatividad* (negativity) and bad spirits" - these are outside forces working against individuals. They can create havoc on a person's life, generating negative thoughts, a sense of hopelessness, create family troubles, health issues, and even legal problems. Many interpersonal issues usually stem from bad spirits producing negative energy that can create further turmoil within individuals and around their lives. Lourdes received this sort of explanation from the Santeros she frequently visits; they give her reasons why things in her life happen the way they do and solutions to these problems.

Another participant Carmen, who was born in Puerto Rico and came to the U.S as a young girl, explained in an informal interview how she perceived mental health and support systems. She is doing her best to become more educated by going to college part-time, while simultaneously working at a property insurance agency where she has been employed for 17 years. In my conversation with her I wanted to understand Carmen's conceptualization of mental health, which follows:

Amaris: What do you think about mental health?

Carmen: I think about the stage of the person mental wellbeing or state of health of the brain itself... I'm not really sure, I ask myself that question.

Amaris: So what then would you think of when you hear that someone is suffering from a mental health issue or is mentally ill?

Carmen: I think about schizophrenia... or they have some serious issue... I don't know, they may be crazy.

Amaris: Why do you think about it that way?

Carmen: I don't know really, maybe because my uncle was schizo. And that's the only time I had to deal with mental health.... I guess it depends on the person or what they are going through, like a difficult time, depression, and if it's going to last a very long time...well, also if go with or without help from family.

When asked about more non-clinical mental health experiences she explained:

Amaris: Would you say that stress is a mental illness?

Carmen: No... well if you let get out of hand. It could create other problems and even become physical, I heard some people lose their hair.

Although there may be some overlap between mental and physical health, often times individuals may overlook one or have trouble separating the two. Carmen's interview is a good

representation of this way of thinking, referencing to both physical and mental states of illness. She views mental health in terms of physical or clinical illness, and like many individuals she sometimes overlooks emotions like stress by considering it more physical than mental. Carmen perceives mental health as somewhat important and sees the necessity for adequate care, but like many she has a limited view of its system of care. This could be from the fact that her only interactions with mental illness was with her uncle suffering from schizophrenia, a clinical illness. Her perception that the only physical side effects of individuals suffering from stress is hair loss is also significant in that it suggests a limited view on the effects of stress. Since many people suffering from mental illness have symptoms that go largely unseen, it can be difficult to have a full discussion on what mental health is and all the effects it encompasses.

Many Latinx in my research that I interviewed, like Lourdes and Carmen, see mental healthcare and its professionals belonging to the sphere of those that are “crazy” or mentally-clinically-ill. Many times emotions like stress, anxiety, and to some degree depression would not be considered by my research participants to be mental health conditions. Therefore, their narratives show that mental health professionals are thought to mostly treat people that are “crazy” or have a clinical illness like schizophrenia. Carmen’s experience with her uncle exemplifies this perception that only the truly mentally ill need mental healthcare.

In Lourdes’s interview, our dialog contained some connotations that mental health services are not for Latinx, and that mental health professionals are “white” (Anglo) Americans who tend to misjudge Latinx character. These misconceptions were evident in my research, and are also not uncommon among Latinx communities, especially when there is a perceived lack of ethnic diversity within healthcare providers (National Alliance of Hispanics 2001). As well many

fear that “white” medical professionals will negatively view “normal” Latinx behavior and mannerism. Lack of discourse about diversity in perspectives creates this binary issue, where it forces Latinx into perceiving they will have a negative experience when seeking mental health support. While more commonly mental healthcare creates or perpetuates such barriers because of the lack of access to information that could be easily understood by a diverse population. Given this situation, if Santeros are filling-in gap at least some of the healthcare needs in their community, the question should look at how Santeros understand their own role?

Santeros Unaware of Therapeutic Identity

Before discussing Santeros’ understanding of their role, it is useful to describe how Santeros work. One of the important aspects of Santería is the *consulta* Santeros give to clients. *Consulta* is a divination in the form of consultation or reading. *Consulta* generally are done by Santero/a, using some type of medium, like a coconut shells, ocean shells, and tarot cards to communicate with the spiritual world. Reason for getting a *consulta* varies from family or relationship problems to legal and health concerns. Since Santeros have different ways of doing their *consulta*, it is difficult to generalize these meetings. Some aspects of a *consulta* may be similar to a formal psychotherapy session in the biomedical setting, where the therapist indicates through a diagnosis after one or more sessions what issues their patients are having or condition they may have, and then the therapist most likely will give suggestions that may help the mental and emotional state of their patient. Santeros too use a similar technique which includes suggestions of how to address the client’s problem.

The basis of *consulta* is that the Santero reads their clients, and then they tell their clients what they see or perceive to be the problem from their reading/consultation process; then the

Santero explains the reasoning behind the problem, or why the client is having negative feelings and/or thoughts. The client then confirms whether the reading was accurate, by going into more detail about the situation she or he is in, and the negative feelings or troubles they are having. At the end of the *consulta* the Santero gives a few different suggestions on what their client should do. These suggestions vary widely depending on the issue or trouble the client is experiencing. Prayers, plea for help and/or guidance to a certain Santo (saint) usually accompanied by some type of offering to said Santo, cleanings of one's house or oneself, special baths, and in more serious cases special ceremonies and rituals, like "making Santo," are common recommendations.

Making Santo is a yearlong process that individuals go through to be crowned with a saint; meaning one goes through a process akin to rebirthing during one of Santería saints (Santo) events. The saint becomes like a spiritual-parent, god, or spirit-guide and subsequently everything one does is under the guide of their Santo. Everyone undergoing Santo, has a unique personalized experience, it is highly tailored to the individual's needs that devote themselves to making Santo. Unique personalized experiences are not limited to making Santo. The bath and cleaning that are given to clients can be tailored to individual client's needs and experiences or expertise that Santero has with different recipes.

Although *consultas* and formal therapy may have many similarities, Santeros may not always associate their work with those of a psychotherapist, a counselor or a social worker. This can be for a number of reasons, but one that can be reasonably inferred is the negative association that many Latinx have with mental healthcare providers. In particular, the concern about mistrust regarding the action and intentions of the mental healthcare providers discussed

earlier. So with regard to the Santeros it is important to address the questions such as: How is therapy/counseling conducted? What are the interactions between the therapist and patient/client? and, What are the general results of a therapeutic session? If the answers to these question about mental health become more general knowledge, it could help Latinx that are uncomfortable with formal mental healthcare services, seek help because it would lessen the barriers created by misconception of formal mental healthcare. Additionally, understanding the answer to these questions can help Latinx find other ways of receiving help, like going to Santeros, if they still feel like formal mental healthcare cannot help them. More importantly, understanding Santeros' work as "trusted" counselors may shed some light on the possible roles Santeros have as informal mental health provides. I found that the Santeros whom I interviewed in my research are somewhat unaware of their possible roles and identities as informal mental healthcare provides. The following excerpt from my interview with Brenda, a Santera, illustrates this:

Brenda: Santería is a form of helping people but it has nothing to do with therapy though...Santería doesn't help as a therapy... Santería is like thing for health... like if someone is sick or things like that, they get into Santería or they get cleaning. It all depends what you want with it... it helps, but not with therapy.

Amaris: So you wouldn't say people feel better after seeing a Santero?

Brenda: Well it all depends if you go for a reading, but if you see a Santero just to see a Santero, no. The only thing a Santero can do for you is read you, clean you – you know what I'm saying if you need the help. Let's say you come to me you want a reading, you want to know something. Do the reading, you feel relief ...

Amaris: So, what would be some of the common reasons someone would go to a Santero?

Brenda: Well for health, cleanings, or a reading that's about it... depends what the person is looking for.

Amaris: What are cleanings usually like or what are they for?

Brenda: Negativity, and you need cleaning to get rid of it. Or for like when someone throws “voodoo” at you and you need help... Others come for health reasons, they think the cleaning will help.

Brenda, a 40-year-old Santera for over 15 years found Santería after trying to search for a religion that made her feel complete in a spiritual sense. Although the process of becoming a Santera was difficult, she cannot see herself doing anything else. She usually works with her husband in a shop they own, selling different items, oils, candles and herbs that can be used in Santería. Clients that she knows personally can visit her at her home where they can receive longer individualized care.

In Carmen’s interview (discussed in the previous section) we spoke about how Santería and her work can help for health reasons, but she was adamant in stating that Santería is not for therapy. It was not uncommon to notice that many Santeros felt disconnected from their work as valuable mental and social support that they provide for many of their clients. In other words, it appeared from the interviews in this research that Santeros preferred to stand apart from the identification with formal psychotherapy. While at the same time clearly recognizing the health benefits, though not specifically verbalized as mental health, that their services provide. Therefore, they do believe in the possible healing power that Santería offers, while not realizing or acknowledging their active role in the healing process. Like many of the issues and concerns regarding Latinx and mental health. The unawareness of Santeros’ identity or role as healers perhaps comes from not being aware of the different things mental healthcare provides do. Also, within the larger Latinx community where Santeros live – what actually constituent mental health is not well understood or formulated.

Conclusion

In this chapter I aimed to demonstrate that the ways Latinx view mental health and the associated stigma and confusion can be rooted in lack of discussion. The interview narratives examined above represent key themes that arose during the course of this research and contribute to the understanding of some of the underlying reasons why Latinx underutilize mental health services; as well as the ways *Santería* may help to fill this gap. With Lourdes story we see that stigma and mistrust associated with mental health professionals can prevent many from seeking help in the formal healthcare system. For her *Santería* represented safe and familiar place where she could confide, without the worry of being misjudged. Carmen talks about clinical mental illness through the narrow scope by which many view mental health. And finally Brenda's narrative expresses the way many *Santeros* overlook their potential roles in Latinx communities as informal mental health therapists. In the next chapter I turn to questions of doubt and internalized-stigma within *Santería*.

CHAPTER 5: Santería Hiding in Plain Sight: Internalized Stigma and Doubt

My research shows that even though Santería is supported and used by many Latinx, there is still a large section of the Latinx population that do not believe in Santería. Not just in the sense that they do not think it is a legitimate religion or that they do not believe in its healing properties, but in the sense that it is a “bad form” from of sorcery, and should not be trusted, according to my interview narratives. Therefore, participants in my research seem to create or perpetuate a self-stigmatization within the Latinx community where Santería has a strong presence. The stigma that Latinx create about Santería, usually arise from the belief and practice of main-stream Christian religion that condemn pagan religions and view divination (such as those performed in Santería) outside of sanctioned Christian rituals as a sin. Latinx who condemn Santería present an interesting area for research consideration by analyzing the ways Santería is actually utilized.

Specifically, Santería can be used to create and clarify doubt in both believers and unbelievers. Secondly unbelievers tend to form binary opinions on the legitimacy of Santería as a “publicly-bad” but “secretly-good” religion. This is exemplified in my research wherein some individuals who heavily stigmatize and marginalize Santeros in every-day conversations with others, then later secretly seek Santeros’ help for problems that they feel they cannot share with anyone else. This clandestine (rather than open) seeking of help with Santeros is rooted in the fear of being negatively judged themselves. Latinx that criticize Santería therefore self-impose the same stigma they give to Santeros by utilizing their services. Violeta is 55-year-old Christian, who serves as an example of this internalized form of stigma:

Amaris: What are your thoughts of Santeria and people that practice it?

Violeta: This is a dirty practice – the people really have no clue what they are doing when they get involved in shit like that.

Amaris: Do you know anyone personally that practices Santería?

Violeta: No! But the two that lived next to me in my house in Puerto Rico was full of the damn Santeros...you know something, it happens that last week I saw a case that they give on TV. I don't remember what channel it was, they were talking about a father that had a very sick son... he spent a lot of money on trying to get him better, none of the doctors could say anything about it or help him. No treatment or medication worked... but finally the father gave up and went to a Santero, which many people told him to see. And the Santero gave him some remedies and things that he had to do because he had soothing inside him can't remember what it was... and you know what the boy recovered and still is doing well... something from one day to another the boy recovered.

Amaris: So do you think that's at all possible for someone to recover so quickly after the doctors couldn't do anything?

Violeta: Well I don't know, my beliefs says no... but it gets you to think how he got better. Makes me think that it may be possible ... Look at the father, he tells people on the TV that he doesn't believe in Santería or really didn't care for it. This father was solely believing on medicine and god. But he was left with no other choice to help his child ...after that, he was a believer and is very grateful for what the Santeros did... But let me tell you something: that may be true that he was healed by the Santero, but the devil also can heal and tricks people into thinking these things are good... if they were good why are they so hidden or why are they not accepted by god... Anyway don't know what advice to give you. But be careful with your work you are a good girl, I don't want anything to happen to you

During this informal conversation with Violeta we spoke about this research project. I asked her to clarify further her opinions on Santería and her beliefs. She was somewhat at odds with her own reasons for not believing in Santería, not from her direct experience but from information and insight gathered throughout her life from others. Violeta was raised in the Pentecostal religion, which accuses Santería of being a perverted practice of religion, because of

its use of divination (such as reading the tarot) and the act of worshiping other gods. Similar to other Christian religions, Pentecostal principals stigmatize the uses of Santería as “demon worship” according to Violeta, who added that it is as though communing with “demons disguised as saints.” Santeros are seen as “wielders of dark magic,” that do not necessarily know what they are doing and can therefore hurt others by their work. Because of these beliefs, Violeta expressed her concern for me by telling me to be careful with researching Santeros, lest their simultaneous lack of competence and power are used against me.

Like many Latinx, Violeta is skeptical when talking about Santería, and although she does not fully admit it, like many others she has doubt about the negative association Santería has been given. Because of positive outcomes and stories that she has heard from neighbors and the media, she can see the potential benefit that it can bring to many people’s lives. While, still worrying about its dangers, such positive stories lead many Latinx to have binary or conflicted ideas about Santería. While on one hand they publicly stigmatize Santería practices, on the other hand many seek out Santería (mostly done in secret) to help with internal struggles. The skepticism that Violeta has, for many Latinx can turn into doubt. They may begin to question if Santería is truly a “bad” practice, or is the negative public image mainly a form of verbal marginalization that is intended to conform to the dominant Christian expectations, rather than truly dismiss Santería. This realization may push many people to seek out a Santero when they feel doubt, turmoil, or need help bringing clarity in their lives, and go against these negative discourses.

Doubt in everyday lives can weigh heavily on people’s minds. It can stop many from meeting goals and reaching their full potential. In the long run, it can also create a number of

mental and emotional stressors, in particular anxiety may be one of the most important symptoms of doubt. Since anxiety can become a chronic condition, affecting the body and the mind, it is an important mental health condition to address. The emotional and mental impact that doubt creates is (Mehdinezhad & Bamari, 2015) also an important topic in mental health discourses because it can have distal effects on individuals. In Santería, doubt can be presented in two different ways. One is that many Latinx recognize but do not fully believe in Santería, mainly because other religious beliefs prevents them from completely engaging in Santería. In this context unbelievers do not attach any stigma to Santería, but do not really believe that Santeros are capable of healing or helping with any issues they may have. The second is that, doubt that individuals have about Santería creates an opening or opportunity for the doubtful-unbelievers to seek help from Santeros, so they clarify doubt and uncertainties which cannot be resolved anywhere else.

At the beginning of this research I spoke to Negra about her thoughts on Santería. She told me at that time that she did not think too badly of it, but did not think it was a credible religious practice. Recently, she approached me to tell me that she went to a Santero to help bring some clarity into a problem that suddenly presented itself. As I discussed earlier, many unbelievers in my research are motivated to see Santeros when grappling with a great amount of doubt in their lives. Negra, similar to Violeta, grew up in a religion that condemned Santería. Negra too has close contact with Santería and practitioners through others; in fact, her grandmother on her father's side was a Santera. Since she was closer to her maternal grandmother who was an Evangelical, she adopted the view that Santería should be averted. At the same time, she did not adopt the strong stigmatized view that Christianity has on Santería. Negra explains as follows:

Negra: Just to find the truth... get more information ...I wanted to know the truth... clear the doubt that I have. My closest friends told me they went to Santeros that it helped them...so I decided I might as well - nothing that can hurt me more than what's happened already... I remembered that once a long time ago a Santero just read me by looking at me, he gave me some advice. I thought he was a little crazy... but thinking back I should have listen. To make things short, I got pregnant young with the wrong man.

Amaris: What was the doubt you were having?

Negra: Well, Amaris, the thing is that, recently my father reached out to me after so many years...you know the situation with him, I told you about it before. I wasn't sure what to do so I asked him to write me explaining his side of the story. But now I don't know what to think.

Amaris: Was all the doubt about your father affecting you mentally?

Negra: No...it was just making me angry and it was affecting my work a little because I was so mad... I just don't know what took him so long to reach out to me...

Amaris: So did the Santero clear things up for you?

Negra: I don't know yet; I'm just trying to get over being mad at him [father], so I can accept what they [Santeros] said...

Negra was experiencing a lot of doubt if she should reconnect with her father, and for good reason. When she was a young girl, her father accused of grievous assault charges, forcing him to leave the family; from then on Negra never saw her father again. His sudden and unexpected contact, brought a lot of unresolved feeling along with the added doubt if she should trust and believe in her father. Anyone would struggle in this situation, finding it difficult to look for a solution. Negra turned to Santería because of the pressure to find a quick answer to question she was somewhat ashamed to ask. Santeria offered her the possibility of finding a quick answer and most importantly the discretion she needed to deal with her difficult situation.

Doubt can manifest in many different ways, it can either come from uncertainty whether one should trust or give someone the benefit of the doubt, like Negra and trying to decide if she should trust her father. Or like Violeta where her doubt comes from questioning if the things she was brought-up to believe are true, when facing evidence that contradicts her previous notions. Lisa, a new resident in Florida, briefly told me during an interview the story of how she became involved with Santería after extended struggles and problems with her family. Not knowing or having a clear understanding for the reasons why her life seemed to be falling apart made her doubt the people around her, and question whether they were there to help or to make things worse. Here Lisa, who eventually became a Santera, explains her experiences:

Lisa: I became a Santera, like 10 years ago when I lived in New York... I had so much shit going on, I wasn't in the right place. My kid was wild, I was losing him to the street, I had money and work problems...I really thought I was going to lose my mind. I couldn't understand why I had to go through all that crap... You know, why me? What did I do? I wasn't a bad person ...I did my best to stay out of trouble... Then one time I went to visit some people in an apartment and this lady stopped me and said that I have "bad spirit" encircling my head, that I need to be careful because something tragic can happen. We spoke for a little bit more then she told me to come back later to have a *consulta*, with her husband. She was so worried that she told me I wouldn't be charged. I didn't think much about it since I only heard little things about Santería and I wasn't sure if I would go... I doubted that they were being honest - you know people don't really help for free. Few weeks go by, things go by, things get harder. Then my friends tell me I should go see that Santería. I didn't want to go but what the hell, I don't got anything else to lose.

Amaris: Was the Santero able to tell you something?

Lisa: He did. He read me the cards and told me everything that was going on... It was crazy, he knew so much without knowing me... He told me the reason I was having so many bad things going on in my life and with my son was because when I was a kid this old man watched me and he wanted me for himself, and when he died his spirit attached itself to me, and didn't want anyone close to me...So he did all these things so I would go crazy and lose people around me like my son.

Amaris: Did you believe him?

Lisa: At first I was shocked, but the described of the old man gave me chills...Look, it still gives me gooses bumps. The thing about it [was] he was able to describe the old guy so well that I knew exactly who the man was. Even the wheelchair that man had...I always saw him on a wheelchair just sitting on the stoop. He never talked to anyone really...everyone just though he was a grumpy old man so on one bothered him... After the Santero finished reading the cards... he told I need to cleanse my apartment and give my son a bath to protect him... but I need to make Santo so I can stay protected from the spirit and others. It will help me from losing my mind.

Lisa did not have any negative stigma attached to her beliefs of Santería like Violeta and Negra. She simply did not know enough about Santería to have any strong opinions either bad or good. She also did not mention or speak of any other religious beliefs that she might hold her back. This may have contributed to her openness and unbiased view of Santería. Even though Lisa's case was not filled with so much doubt as Negra's life forcing her to seek Santería for the help she needed. Lisa needed to find answers to the problems she was having, forcing her to accept the Santero's help, although she was somewhat doubtful, at least initially, of their intentions. For Lisa, Santería served to help find the reason why everything in her life was going badly, and these reasons offered the clarity and peace of mind. Ultimately, she learned that her troubles were not because of something she did, but due to some unseen force, instead. Lisa therefore experienced this shift of blame away from her as empowering but also protecting to her mental health as it helped her "from losing [her] mind."

Conclusion

Santería, seems to hide in plain sight not just within the larger Deltona city community were mostly Latinx are aware of its existence, but within the Latinx community as well. Stigma and influences of larger main-stream religion, have made it so that practicing Santería and

individuals seeking services from Santeras, is often done in secret. For some individual, skepticism toward Santería is often set aside in times when they feel that they have no other options or need the privacy that Santería offers to help resolve life challenges. In these situations, skepticism turns into doubt; questioning if the stigma given or perpetuated by many Latinx to Santería holds true. Additionally, that same doubt creates an opportunity for the unbelievers to seek help; ironically helping them to deal and clarify the doubts that way so heavily on their minds.

CHAPTER 6: CONCLUSIONS

For anthropologist the thoughts, views and perspectives of individuals they study hold significant importance as we seek to understand local meanings that shape their experiences of everyday lives, but also shape their interactions with the wider systems in which they live. In this research, I sought to give an opportunity to Latinx in Central Florida, who participate in Santería, to express their thoughts and views on their religion and its uses. In addition, I wanted to provide a space for participants of this research to express ideas and opinions of formal mental healthcare. Analyzing together both perceptions of mental healthcare and uses of Santería is useful to draw a bigger picture of the different ways Latinx seek and accept mental health support and services.

In the United States, Latinx represent one of the largest and fastest growing ethnic groups. Unfortunately, it is not uncommon that many minority groups find themselves with disadvantages in accessing various public services – public health is no exception. Mental health is one of the main areas among public health services where Latinx encounter many barriers in acquiring adequate care. Thus, it is important to address the gap and disparities within public health when providing services to Latinx. This research offers an analysis of the therapeutic roles Santería has within Latinx communities. Since formal mental health support is greatly underutilized, different delivery system of care should be explored so that no portion of the population goes unserved.

This research also hopes to give an opportunity for Latinx in this community to express their perceptions and experiences with mental health and its delivery systems of care, giving

them a chance to address what they believe should be changed or fixed within mental healthcare service. This research therefore included Santeros' perspectives on how they treat clients and how they understand formal healthcare service, and their feelings about the contributions they may or may-not make in improving Latinx' health. The perspectives of both Santero and their clients are of great significance to this study as well as to future public healthcare, because it creates a discourse on what are the major problems within mental healthcare services and ways of improving the system. In addition, it looks for alternative options to help provide mental health service in areas where it fails to serve Latinx.

When open comprehensive discussion about mental health is employed within the general public, it may lessen individual's reservations about using mental health services, and the stigma that comes from the misconceptions that are created by the lack of proper discussion. Perception on how Latinx will be treated and judged in the mental healthcare system is one of the biggest barriers that prevents Latinx from seeking formal mental healthcare services. While at the same time formal mental healthcare services may not always take into account the perspectives and beliefs regarding mental health among Latinx cultures and society. This binary therefore conditions the context of underlying uses of Santería resulting in the lack of appreciation for the important potential therapeutic role that Santería has in Latinx society. Especially for those Latinx that feel as though they have no place in formal mental healthcare system and those that feel that mental healthcare are for the clinically ill.

CHAPTER 7: SIGNIFICANCE

Although Santería is largely practiced by Latinx, Santeros and other followers account for a relatively small portion of the Latinx population. Santeros and individuals taking part in its healing and religious practices, have different ways of contextualizing mental health and ways of dealing with health issues that may vary from rest of the Latinx societies. Because not all of the beliefs and practices of Santería are shared by all Latinx, many are forced to practice in secret, while hiding in plain sight, therefore creating a need to have a better anthropological understanding of how these group interact within their respective societies and communities, and how their practices and beliefs are affected by their environments and contexts. In short, this research is significant because it illustrates how stigma and marginalization around an important and useful practice of Santería takes place and/or is perpetuated at different levels within the Latinx community—a community which itself has suffered a high degree of marginalization in the U.S. society as a whole. This raises questions about how to address more effectively different forms of marginalization and stigma, and as I have argued in this thesis, I believe that promoting an open discourse, whether about the role of Santería or the importance of mental health and healthcare, is one important and potentially productive avenue in every day practice as well as in scholarship.

The relationship between Santería and Latinx has great importance to public health and community health as well because it emphasizes the ideas and perception that Latinx have about the public healthcare system(s), as well as how they view themselves within and interacting with public healthcare structures. From understanding the interactions between Santeros and their clients demonstrated in this research, the public healthcare system can develop valuable insight

on what Latinx expect to experience and value with healthcare providers and health practices. One potentially effective way in which the larger healthcare system can engage with the Latinx community is through the use of community healthcare workers and providers—an approach that has been demonstrated to work well in other contexts where people face barriers to accessing care in the mainstream sector, whether due to financial constraints, marginalization, or mistrust (Behforouz, Farmer and Mukherjee 2004). Community health providers can gain valuable information as well, by seeking to observe and learn from the same interactions, because Santeros and their followers form tight-knit communities – considering themselves family members of the same spiritual-house instead of members of a congregation. From these houses, community health providers can find a better understanding on how Latinx with shared beliefs and religious practices, influence the overall health of their community and how they go about seeking health and treatments. This could very well have implication for health policy, by altering the ways health (especially mental health) is explained and presented to the public; furthermore, making changes to how healthcare is delivered to Latinx communities.

Santería has a unique structural dynamic that creates an intimate setting between the spirit-world, followers, and community. Future research should take a closer look at these structures within Santería and interactions with its followers, possibly, generating research questions on the perspectives of kinship, gender, identity, and sexuality within Santería. Each of these aspects may have important implications about how health and wellness is observed, practices and sought.

CHAPTER 8: REFLECTION

When I was a child my mother was very involved with the local Santería community where we lived. At the time I did not think much of it – just one of those things parents dragged their kids to, like visiting family or going to church. I do not remember much about how the ceremonies went or the reasons why they were held. Mostly I remember the delicious foods that was served at these spiritual events; food, was my main motivation for going. Because I was young I did not understand the significance of the religion or reasons why people practiced Santería, especially the meaning behind the rituals and ceremonies. Eventually my mother lessened her involvement, only practicing and visiting with Santeros few times a year, then completely stopping any involvement with Santería. Thus, Santería's uses and practices had no lasting impression on me at that time.

Before the start of this thesis project, when I was trying to decide on what I wanted my research topic to be, my mother began to practice Santería once again. It started after the end of a difficult relationship she experienced. From there, I began to notice patterns within individuals that practiced Santería, wherein those individuals who turned to Santería were going through some hardships; the stress they were under was very noticeable. They would often ask my mother if she knew any good Santeros that could help them and they could trust. Because, my mother has built many good connections and relationships within her community, many individuals come to her for help for any number of reasons. From these experiences and thinking back on what I learned in anthropology courses – my anthropological curiosity sparked. At this point I started to form my research question(s): Why were people using Santería? And how did it relate to mental health?

Even though I identify as a Latina and a proud member of the Latinx community, this research project has taught me a lot, not only of our rich history, but of the diverse and insightful view on culture, history, religion, health, as well as how Latinx view and interact with one another. Without feeling and being accepted as part of the local Latinx community where I conducted my research, this project may have taken a different direction. My ability to speak Spanish, membership in this community, and having prior knowledge of and involvement in Santería, I believe were important parts of being so easily welcomed as a researcher; for this I am incredibly grateful. Both identifying and being identified as Latina, and a family member of someone that practices Santería, became a vital part in gaining my participants initial trust and acceptance, which then enabled open and honest conversations that added something special to my work by not only providing me with valuable data but also encouraging me to keep moving forward in completing my thesis.

Many individuals that took time to share their stories, knowledge and experiences for the completion of my research, spoke little to no English. And if I was unable to speak Spanish I would not have had as fluid in-depth conversions as I did with my participants. Additionally, without knowing the language my participants spoke, I would probably miss out on the depths of what they were trying to communicate with me, making it difficult not only to connect with my participants but connect to what they were saying (specially the emotion and strong sentiments) to the topic of my thesis. This experience truly brought home the importance that language has within a community and society, in addition to research. It also made me think about and appreciate language, especially the Spanish language that my parents thought me, in way I have not considered before, giving me a new deeper appreciation not only for the languages I am able

to speak and understand, but to the diversity within my own culture and community I was able to experience throughout the course of my life; allowing me to complete this Honor's in the Major thesis project.

APPENDIX A: IRB APPROVAL



University of Central Florida Institutional Review Board
Office of Research & Commercialization
12201 Research Parkway, Suite 501
Orlando, Florida 32826-3246
Telephone: 407-823-2901 or 407-882-2276
www.research.ucf.edu/compliance/irb.html

Approval of Exempt Human Research

From: UCF Institutional Review Board #1
FWA00000351, IRB00001138

To: Joanna Zofia Mishtal and Co-PI: Amaris J. Santiago

Date: December 04, 2015

Dear Researcher:

On 12/04/2015, the IRB approved the following activity as human participant research that is exempt from regulation:

Type of Review: Exempt Determination
Project Title: Exploring the Therapeutic Role of Santeria for Latino(a)s living in Florida.
Investigator: Joanna Zofia Mishtal
IRB Number: SBE-15-11702
Funding Agency:
Grant Title:
Research ID: N/A

This determination applies only to the activities described in the IRB submission and does not apply should any changes be made. If changes are made and there are questions about whether these changes affect the exempt status of the human research, please contact the IRB. When you have completed your research, please submit a Study Closure request in iRIS so that IRB records will be accurate.

In the conduct of this research, you are responsible to follow the requirements of the [Investigator Manual](#).

On behalf of Sophia Dziegielewski, Ph.D., L.C.S.W., UCF IRB Chair, this letter is signed by:

A handwritten signature in black ink that reads "Kanille Chay".

IRB Coordinator

APENDIEX B: EXPLINATION OF RESEARCH



EXPLANATION OF RESEARCH

Title of Project: “Exploring the Therapeutic Role of Santería for Latino(a)s Living in Florida.”

Principal Investigator and Faculty Supervisors: Joanna Mishtal, PhD.

Co-investigator: Amaris J. Santiago, HIM undergraduate

You are being invited to take part in a research study. Whether or not you take part is up to you. The purpose of this research is to understand the reasons that Santeria is used among Latino/as in Central Florida.

What you should know about a research study:

- Someone will explain this research study to you.
- A research study is something you volunteer for.
- Whether or not you take part is up to you.
- You should take part in this study only because you want to.
- You can choose not to take part in the research study.
- You can agree to take part now and later change your mind.
- Whatever you decide it will not be held against you.

Feel free to ask all the questions you want before you decide.

What you will be asked to do in the study: You will be asked to participate in an interview. The interview should take between 30-90 minutes at a place convenient for both the investigator and the participant.

Location: The interviews will take place where Santeria is practiced, known as Centro Espiritista, and at local botánicas, or in an agreed upon place that offers privacy.

Time required: Approximately 30-90 minutes will be required. The participants will be asked to participate in an interview at a time that is convenient for the participant.

This study is confidential. A pseudonym will be assigned to you in order to ensure confidentiality, unless you request that your name be used in this study.

Study contact for questions about the study or to report a problem: If you have questions or concerns about your participation in this research please contact: Amaris Santiago, HIM undergraduate, Anthropology Program, College of Sciences, +001(386) 215-0395, Dr. Joanna Mishtal, Faculty Supervisor, Department of Anthropology at +001(407) 823-3797 or by email at jmishtal@ucf.edu.

IRB contact about your rights in the study or to report a complaint: Research at the University of Central Florida involving human participants is carried out under the oversight of the Institutional Review Board (UCF IRB). This research has been reviewed and approved by the IRB. For information about the rights of people who take part in research, please contact: Institutional Review Board, University of Central Florida, Office of Research & Commercialization, 12201 Research Parkway, Suite 501, Orlando, FL 32826-3246 or by telephone at +001(407) 823-2901.

APPENDIX C: INTERVIEW GUIDES

Interview Guide for Research Project:
“Exploring the Therapeutic Role of Santería for Latino(a)s
living in Florida.”
(Clients and Santería seekers)

Thank you for taking the time to speak with me today. I'm Amaris J. Santiago from the University of Central Florida, and I'm the Co-Investigator for the research project, titled: "Santería, an informal therapeutic session for Latino(a)s living in Florida" I would like to interview you about your experiences with and insights into Santería and its main uses. All of the information you give me will be confidential. The interview is voluntary, will take between 30 and 90 minutes and will be audio recorded. I may also request to do a follow-up interview.

I would like to start now; is that OK?

Date: _____ Interviewee Number/Pseudonym : _____

I'd like to ask you a few questions that would help me clarify and understand your experiences.

Q1: What made you seek help from a Santero?
Explain

Q2: Are you suffering from any illnesses and ailments?

- Are the problems you are having related to your mental health such as stress?

Q3: How often do you seek out help from Santería?

- If this is your first time, what brought you here?

Q4: How do you feel about formal mental health service, do you find them helpful?

- What do you feel think is lacking with mental health services?

Q5: Are there any stigmas that worry you?

- Either related to Santeria or health

Thank you very much for your time. Please don't hesitate to contact me if there's anything else that you would like to add that you have not had a chance to say during this interview. Here's my contact information.

Interview Guide for Research Project:
“Exploring the Therapeutic Role of Santería for Latino(a)s
living in Florida.”
(Santería practitioners)

Thank you for taking the time to speak with me today. I'm Amaris J. Santiago from the University of Central Florida, and I'm the Co-Investigator for the research project, titled: “Santería, an informal therapeutic session for Latino(a)s living in Florida” I would like to interview you about your experiences with and insights into Santería and its main uses. All of the information you give me will be confidential. The interview is voluntary, will take between 30 and 90 minutes and will be audio recorded. I may also request to do a follow-up interview.

I would like to start now; is that OK?

Date: _____ Interviewee Number/Pseudonym : _____

I'd like to ask you a few questions that would help me clarify and understand your experiences.

Q1: How would you describe a typical person that seeks out your services?

- What are the issues that they need help with?

Q2: Are there any common illnesses you treat?

- Are any of them mental illnesses

Q3: How often do you consult with clients?

- Do you guide them through treatment process

Q4: what happens when Santeria cannot help someone?

- Do you refer them to other service

Q5: What are the stigmas associated with Santería?

- Do you feel that they hurt your practices

Thank you very much for your time. Please don't hesitate to contact me if there's anything else that you would like to add that you have not had a chance to say during this interview. Here's my contact information.

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