

Letter to International Office About My Experiences in Cuba

To many Americans, the island country of Cuba is poorly understood. Moreover, its history is shadowed by documentaries of Fidel Castro's Communist revolution and the Cuban missile crisis. I, six other colleagues from the first year class, and Joseph Williams from the Student Activities office, recently sought to understand Cuba on a personal level. We attended a medical conference for International Health in Havana, Cuba (March 13-15) sponsored by the International Health Medical Education Consortium (IHMEC), an organization dedicated to promoting effective models of medical education in North America. During the conference our mornings consisted of hearing lectures from many different individuals involved in international health, including esteemed faculty at the Cuban medical schools, American medical schools and elsewhere. In the afternoons we had an opportunity to familiarize ourselves with the Cuban healthcare system firsthand. Each one of us could sign up for a number of different workshops, and therefore had a different experience. I had the opportunity to visit a special medical school that Cuba established specifically to train foreign students. This medical school was intended to train students from other countries in Cuban preventive medicine, with the faith that after they graduate they will return to their own countries to practice in rural areas where healthcare is much needed. Interestingly, the foreign students taught in Cuba learned medicine at a different school from the Cubans. Therefore, one might expect a discrepancy in the way students were taught medicine in Cuba. However, it seemed that the actual medical curriculum was very much the same between the different Cuban medical schools, which in turn, was similar to our own curriculum at CWRU.

Somewhere between the American concept of a poor communist nation and the splendid tour that we received from the Cuban government stands the truth about the Cuban healthcare system. Cuban physicians, like many other professionals in Cuba, receive little financial compensation for their efforts. It was not uncommon to start a conversation with a Cuban taxi driver only to discover that he/she was trained in psychiatry, law, or other fields of higher education. Driving taxi's for high-paying tourists is the best way to earn a living in Cuba.

Despite the low salary for physicians in Cuba, they work hard to maintain the health of their patients. The Cuban government boasts having tremendous success with their healthcare system, especially with regard to communicable diseases. For example, in Cuba the incidence of AIDS is only about .03% of the population, as compared to .5% found in the U.S. population (Conference Data). Cuban physicians attribute this success to their preventive treatments and education of patients. For example, the average healthy patient will visit his/her physician twice throughout the year for a routine checkup, and more frequently if they become ill. Furthermore, each physician practices in the same region, and sees the same patients for many generations. Likewise, the relatives of the patient are many times cared for by that same physician. This allows the physician to better understand his/her patients through the broader understanding of the health of each individual family member. Cuba also boasts spending considerably less money per capita for healthcare compared to the United States. Although there have been concerns that Cuba may in some ways alter their statistics in order to appear healthier to the rest of the world, there were many physicians who disagreed. In fact,

some American physicians with experiences working in Cuba felt that the statistics were accurate.

Overall, Cuba seemed to be the subject of dual experimentation. On the one hand, their "non traditional" healthcare system based on preventive techniques and education seemed to promote an impressive model for maintaining the health of a nation. On the other hand, Communism was struggling to win the people's interest. Cubans perceived the many economic opportunities in other countries very close to them, and felt restricted because of the Cuban government's tight control over travel, economy, etc. This exhibited itself as an overall distrust of the government. Much more telling were the number of Cubans who wanted to share their difficult experiences with me in hopes that I would send money and supplies to them after returning to the United States. Hygienic items taken for granted in the United States were treated like royalties by the people of Cuba. Whether it was due to the U.S. embargo against Cuba, or the government hoarding supplies from its own people (two common excuses provided by the Cubans), items such as soap, rubber, antibiotics and paper products were in high demand. In light of this, it should come as no surprise that the average Cuban's interest in the healthcare system was limited. However, the people are not bitter toward Americans, but kind. They are a people who make the most of what they have. And although they may have shared little interest in their own medical system, it is because they find it difficult to value healthcare when they are still struggling to provide items like toilet paper for their families.

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