Lessons from Cuba: Tailoring Public Health for Integrated Care

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Objectives
• Describe integrated health care system in Cuba
• Discuss strengths of the Cuban health care system
• Identify challenges in the Cuban health care system
• Demonstrate how the US and Cuba’s health care systems can inform each other

Presenter Disclosures
Mary L. Frazier, RN, MSN
• No relationships to disclose

Source of Comments and Insights
Marazul Charters organized the one-week research program, with MEDICC (Medical Education Cooperation with Cuba) consulting in January, 2012
Trip’s focus: community-engaged research and health equity
Interviews and site visits included:
– Polyclinic, physician/nurse office, university professors, national institute department directors, community organizers
• Rachel True, MEDICC

Background and Context
Overthrow of the Batista regime began in 1953 and was accomplished in January 1959 with Fidel Castro becoming the First Secretary of the newly Communist country.
A trade embargo began soon after, becoming most restrictive from February 1962 on.
After the fall of Soviet communism in the mid-1980’s Cuba went into a Special Period with widespread famine and death. Assistance from countries such as Venezuela, Angola, and South Africa have helped to relieve the distress today.

Research
• The Curious Case of Cuba, Keck and Reed, American Journal of Public Health, August 2012, Vol.102, No.8
• Cuba’s Latin American Medical School: Can Socially-Accountable Medical Education Make a Difference?, Gorry, MEDICC Review, July 2012, Vol. 14, No. 3
### Key Health Indicators

<table>
<thead>
<tr>
<th></th>
<th>Haiti</th>
<th>Honduras</th>
<th>Canada</th>
<th>Cuba</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Per capita expenditure on health services</td>
<td>$40</td>
<td>$114</td>
<td>$6,510</td>
<td>$672</td>
<td>$7,960</td>
</tr>
<tr>
<td>Life expectancy</td>
<td>62</td>
<td>69</td>
<td>81</td>
<td>78</td>
<td>79</td>
</tr>
<tr>
<td>Infant mortality (per 1,000 live births)</td>
<td>70</td>
<td>20</td>
<td>5</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Measles Coverage</td>
<td>58%</td>
<td>99%</td>
<td>93%</td>
<td>99%</td>
<td>92%</td>
</tr>
<tr>
<td>Physicians/10,000 pop.</td>
<td>NA</td>
<td>NA</td>
<td>19.8</td>
<td>67.2</td>
<td>24.2</td>
</tr>
</tbody>
</table>

Source: WHO: World Health Statistics 2012 - Part III Global Health Indicators

### Cuban Health System Strengths

- Neighborhood RN/MD Teams
- Poly Clinics
- Multiple services in one location
- Maternity Centers
- Live-in or day visits
- Major Hospitals
- Ongoing Data Collection with Appropriate Actions
- Medical Training

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- Health care:  
  - a right  
  - a state responsibility
- Integrate:  
  - preventive and curative services  
  - health care activities with economic and social development
- Public participation in health system’s development and function
- Embrace global health cooperation

### Primary Care: Comprehensive care where people live

- 80% health care done at the community level (polyclinics/consultorios)
- Patients live within 500 meters of health facility
- Integrated approach to public health and clinical care
- All medical school graduates complete family medicine residency. They can then do a second residency.
Prenatal Care

- 100% of women receive at least monthly prenatal care unless woman is high-risk.
- If high-risk, woman stays in a maternity home.
- Age < 18
- Multiples
- Hypertension
- Placenta Previa
- Other

Nutrition

- Obesity is common along with nutrition-related diseases.
- The Cuban diet is high in fat and sugar.
- Food rations are high in sugar, eggs, white rice, and beans.
- Director of nutrition looking at changing rationed goods.

Physical Exercise

- Daily exercise programs in parks for citizens of all ages.
- Exercise programs range from aerobics to tai-chi.
- Smog pollution a concern for those with chronic lung disease.

Non-Medical Determinants

Education
Housing
Sanitation
Clean Air
Nutrition
Health Services

Focus on Social Determinants

- Health Services Determinants: Accessibility, Racial and Ethnic Disparities.


Cuban Health System Challenges
System Challenges

• Prevalence of chronic diseases and conditions
  – Overweight, obesity, and nutrition-related disease
  – Tropical illnesses (Dengue, malaria, etc)
  – HIV/AIDS
• Few resources; trade embargo
• Meeting the needs of a poor population
• Aging population

Meeting the Challenges

• But Cuba is working to meet those challenges by:
  – Population level nutrition and physical activity programs
  – Highly specialized research in tropical illness and HIV/AIDS
  – Encouraging resourcefulness by only industrializing what is truly necessary
  – Working with communities to solve population specific issues (e.g., poor and seniors)

Lessons for the US

• Set overarching health policy goal
• Integrate public health and clinical medicine
• Provide universal access at little to no cost
• Evaluate process and outcomes regularly and rigorously
• Use integrated teaching in all health professions
• Draw more students from disadvantaged communities

Keck W. and Reed G. (2012) The Curious Case of Cuba. AJPH.

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