

MEDICC Review
Cuba Health Reports

Cuba Rising in Major UN Indices

By Gloria Giraldo, MPH

The United Nations Development Programme (UNDP) has published the annual Human Development Report since 1990, providing a global report card by rating development indicators across geographic boundaries and socioeconomic systems.

Cuba ranked 50th out of 177 countries in the most recent Human Development Index (HDI), released in 2006, placing the country among those that enjoy high human development (see **Table 1**).

An apparent paradox, Cuba, with a GDP of US\$31.72 billion (2004 data, held constant at 2000 prices)[1], outperforms some high and middle income countries in indicators such as infant mortality; under five mortality; life expectancy; adult literacy; and physician to patient ratio.



Table 1: Selected Countries & Indicators, HDI Ranking

HDI ranking	Country	HDI	Infant mortality	Under five mortality (per 1,000)	Life expectancy	Adult literacy (% age 15 and older)	Physicians (per 100,000)	% of pop. with sustainable access to improved water source
High Human Development								
1	Norway	0.965	4	4	79.6	99.0	313	100
6	Canada	0.950	5	6	80.2	99.0	214	100
8	United States	0.948	7	8	77.5	99.0	256	100
19	Spain	0.938	3	5	79.7	98.0	330	100
36	Argentina	0.863	16	18	74.6	97.2	301	96
50	Cuba	0.826	6	7	77.6	99.8	591	91
53	Mexico	0.821	23	28	75.3	91.0	198	97
Medium Human Development								
69	Brazil	0.792	32	34	70.8	88.6	115	90
84	Philippines	0.763	26	34	70.7	92.6	58	85
104	Jamaica	0.724	17	20	70.7	79.9	85	93
121	South Africa	0.653	54	67	47.0	82.4	77	88
134	Pakistan	0.539	80	101	63.4	49.9	74	91
Low Human Development								
152	Kenya	0.491	70	120	47.5	73.6	14	61
154	Haiti	0.482	74	117	52.0		25	54
177	Niger	0.311	152	259	44.6	28.7	3	46

Source: *Human Development Report, 2006*. All data refer to most recent provided by participating countries.

In their report, the UNDP defines human development as the process by which human opportunities are expanded. Three components deemed essential to human development are enjoyment of a long and healthy life, education, and a decent standard of living. Taken together, these measures aggregate basic human development into one, simple composite index, producing a ranking which allows cross country comparisons. For scholars and practitioners, the key challenge is not only understanding the complex and multidirectional links contributing to the various dimensions of development, but also to identify the extent to which, and ways in which, these can be reinforced through appropriate strategies and policies[2]. Indeed, what characterizes Cuba's development performance is its social policies, which prioritize human capital investment, as a multitude of indicators show:

- % of GDP spent on health and education: 14% (6.3% for health and 7% for education)
- % of GDP spent on research & development: 0.6%
- % of net secondary school enrollment (ratio of enrolled children of the official age for secondary education to the total number of children of that age): 87%
- Combined gross enrollment ratio for primary, secondary and tertiary education: 80%
- Number of researchers per million population: 537



Source: *Human Development Report, 2006*

- Number of higher education institutions: 65
- Number of students currently enrolled in technical and professional studies: 314,688
- Number of medical schools: 21
- Number of health workers: 267,649 (includes professionals and technicians)
- Number of doctors: 70,594

Source: *Statistical Yearbook of Cuba, 2005*

Cuba Compared to Its Neighbors

Striking contrasts exist between Cuba and neighboring Central American and Caribbean nations. For example, Honduras, Guatemala, Haiti and Cuba, with populations between 10 and 12 million, occupy the 117th, 118th, 154th, and 50th place respectively in the HDI. There are only seven Latin American countries in the high development category: Argentina, Chile, Uruguay, Costa Rica, Cuba, Mexico, and Panama (see **Table 2**).

Table 2: Regional Performance in the HDI 2006

Country	HDI	Ranking
Barbados	.879	31
Argentina	.863	36
Chile	.859	38
Uruguay	.851	43
Costa Rica	.841	48
Cuba	.826	50
Bahamas	.825	52
Mexico	.821	53

Trinidad & Tobago	.809	57
Panama	.809	58
Dominica	.793	68
Brazil	.792	69
Colombia	.790	70
Venezuela	.784	72
Peru	.767	82
Ecuador	.765	83
Grenada	.762	85
Paraguay	.757	91
Dominican Republic	.751	94
Belize	.751	95
El Salvador	.729	101
Jamaica	.724	104
Nicaragua	.698	112
Bolivia	.692	115
Honduras	.683	117
Guatemala	.673	118
Haiti	.482	154

Cuba's Historical HDI Performance

Although the UNDP warns against analyzing HDI data over time due to changes in the methodology used to construct the index, looking at Cuba's trajectory can be telling. Between 1990 and 1994, Cuba's HDI rank declined consistently, until 1995 when there was a short-lived recovery that translated into a steady rise over the next few years until reaching current levels. The decline is attributable to the collapse of the socialist bloc, when Cuba abruptly lost 85% of its trade, threatening the economy and health system (the mid-90s are known as the Special Period in Cuba).



Dr Cándido López, Professor at the School of Economics in Havana, said in an exclusive interview with *Cuba Health Reports* that the dynamics of human development during the Special Period are not yet fully understood, since in some areas there were gains (specifically in life expectancy and literacy) despite the economic crisis. However, the marked decline in income categories, particularly GDP per capita, greatly affected the HDI overall.

Room for Improvement

The concept of human development is much deeper and richer than what can be captured in any composite index or even by a detailed set of statistical indicators[3]. Dr López points out that the index has virtues and shortcomings: "The index is not in any sense a comprehensive measure of human development. However, one of its main contributions is that it broadened the concept of development from its contrite former definition which equated economic development with human development. Among [the index's] disadvantages are that it looks at human development independently of the political organization of a

country and assumes one index is valid for all socio-political contexts.”

Development specialist and UCLA lecturer Stephen Commins notes that another weakness of the HDI “is that [the indicators] do not work for disaggregating outcomes by ethnicity, religion, or region. So it does not help in terms of identifying regional disparities or patterns of exclusion, which are significant problems in many countries.” Similarly, Dr López, in Cuba, has been working for many years to develop an additional index that measures inequity by adding indicators such as: access to basic services; access to culture and communication; preservation of the environment; and gender equity[4].

How is the HDI used in Cuba?

According to the UNDP, one of the HDI's goals is to question national policy choices by asking how countries with similar demographic and geographic characteristics within a region can have very different levels of human development[5]. Professor Commins explains that the HDI is useful in terms of tracking aggregate global processes, but also can serve as a starting point for talking with governments about their poverty and development issues. “For example, if a country ranks higher on the HDI than on per capita GDP (compared to all other countries), this is an indication that there is more equitable development and/or more effective spending in basic services in that country.”

Recently, UNDP Administrator Kermal Dervis speaking at a press conference in Havana said that the Cuban UNDP team is working on its joint cooperation plan for 2008–2012 when cooperation will extend further along the same lines of work, (with particular emphasis on provinces with the lowest indices): environment and energy, HIV/AIDS, food security, risk and disaster management, and local human development. Dervis highlighted that Cuba’s experience in risk and disaster management could be very useful for neighboring countries in Central America and the Caribbean[6].

HDI and the Millennium Development Goals (MDGs)



The MDGs are a set of measurable indicators focused on fulfilling basic human needs: poverty and hunger eradication, education, health, and environmental sustainability.[7]

The MDGs provide countries a framework for development and time-bound targets to be reached by 2015[8].

The HDI and MDGs are closely linked, incorporating many of the same indicators. Not surprisingly, therefore, Cuba’s performance towards achieving the MDGs shows important progress and three of the eight goals – #2, 3 and 4 - have already been reached:

Goal 2: Achieve universal primary education: Since the 90’s, primary school enrollment has reached 100% of children between the ages of 6 and 11. The percentage of boys and girls who finish primary school out of those who entered first grade is 98.6% and 98.4% respectively[9].

Goal 3: Promote gender equity and empower women: Parity exists at the primary education level, and girls exceed boys in secondary and tertiary enrollment. Women hold 66.2% of professional and technical jobs[9] and 70.2% of the health workforce are women[10]. Similarly, women hold 36% of seats in parliament (National Assembly)[9]. However, Cuban women are not exempt from other manifestations of the gender construct such as the double work day, where women are still primarily responsible for household sustenance and care giving.

Goal 4: Reduce child mortality: In 2006, Cuba posted record-low infant mortality, at 5.3 per 1,000 live births, the lowest in Latin America.[11,12]

While the other goals have yet to be met, the country continues a series of programs targeting MDG outcomes:

Goal 1: Eradicate extreme hunger and poverty: The UNDP ranks Cuba 6th out of 106 developing countries in the Human Poverty Index, reflecting low levels of extreme poverty when compared to developing nations. Nevertheless, even though under 2.5% of the population is at risk of malnutrition, there are persistent difficulties related to national food production and the US embargo that limit the availability of meat and milk products. While there are programs aimed at increasing the availability of milk, soy products, fruits and vegetables, the results are slow to reach the population[9].

Goal 5: Improve maternal health: Cuba's maternal mortality rate for 2005 was 52.2 per 100,000 live births [10]. Strategic national programs are in place to improve sexual and reproductive education for youth, promote family planning, and provide specialized care to high risk pregnancies.

Goal 6: Combat HIV/AIDS, malaria and other diseases: Cuba's HIV/AIDS prevalence rate of 0.2 is the lowest in the region. Nevertheless, efforts are underway to target high risk groups which have slowly ascending rates of HIV transmission: men who have sex with men, and people between the ages of 20 and 24. Malaria was eradicated in 1973 and TB incidence is 6.5; Cuba recently announced a campaign to completely eradicate TB by 2015.



Goal 7: Ensure environmental sustainability:

According to a recently-released report by the World Wildlife Fund, Cuba stands alone as the only country in the world that has met the criteria for sustainable development. Since 1959, forest extension has increased over 10 percentage points, so that today, 24.54% of Cuba's land is covered by forests; the goal is to have 29.3% of land forested by 2015[13]. Moreover, carbon dioxide emissions have been declining and an ongoing national energy strategy tackles the rational use of energy resources[9]. Since 2004, 91% of the population has had access to a sustainable water source. However, major challenges regarding the deterioration of urban water systems need to be addressed.

Goal 8: Develop a global partnership: Goal 8 has seven targets that are aimed primarily at developed nations and their commitment to developing countries in respect to aid, debt sustainability, and "open, rule-based predictable" trading systems. Cuba's performance is both mixed and unique on this goal. For example, Cuba lags behind in communications technology, but currently holds the presidency of the Non-Aligned Movement and is actively engaged in international health cooperation with 70 countries; this type of South-South cooperation is at the core of Cuba's foreign policy and predates the MDGs.

Cuba's National Institute for Economic Research conducted a UNDP-sponsored study to quantify the viability of reaching the MDGs utilizing dynamic mathematical modeling which includes the cost and policies required to meet the goals. According to the study, Cuba is well positioned to meet the MDGs within the proposed timeframe, if the country continues investing on prioritized health and social programs while simultaneously continuing its efforts to strengthen its economic outlook[9].

Conclusion

The Human Development Report and the Millennium Development Goals' framework serve to underscore the grave social inequity and deprivation in the midst of unparalleled material wealth in today's world[2]. More importantly, by studying the many dimensions of development and pointing to the links between them, examining unique models such as the Cuban one may provide a more integrated understanding of human progress and development that may benefit countries from the Global South.

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For Further Study:

Human Development Report 2006: Beyond Scarcity: Power, Poverty and the Water Global Crisis: <http://hdr.undp.org/hdr2006/>

The new World Bank Online Atlas of the MDGs
<http://devdata.worldbank.org/atlas-mdg/>

MDGs and Health Equity in Cuba
http://www.medicc.org/publications/medicc_review/0905/spotlight.html

A Monitoring System for Health Equity in Cuba
http://www.medicc.org/publications/medicc_review/0905/cuban-medical-literature.html

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