

Cuba's Health System

Frequently Asked Questions

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? What about hospital and specialized care in Cuba? How is that organized?

Specialized care is provided at hospitals (secondary and tertiary level) and at clinical/research institutes (tertiary level). Patients are usually referred by their family doctor or a specialist at their community polyclinic. As with primary health care, hospital and specialized care are free of charge to patients.

Hospital care, almost completely centered in Havana at one time, is now available in 248 hospitals located in all 14 Cuban provinces and the Isle of Youth special municipality. Patients with complex health problems requiring specialized care not available in their home province are referred and treated at the appropriate facility, wherever it may be located in the country.

Type of Facility	Number (national)
Specialized Clinical Institutes	11
General Hospital	85

Clinical/Surgical Hospital	35
Pediatric Hospital	25
Specialist Hospitals	47
Community Polyclinics	470
Dental clinics	165

Source: MINSAP, Health Statistics Yearbook, 2005.

Specialist Hospitals – Clinical	Specialist Hospitals – Non-Clinical
Nephrology Institute	Nutrition & Food Hygiene Institute
Oncology & Radiobiology Institute	Hygiene, Epidemiology & Microbiology Institute
Neurology & Neurosurgery Institute	Institute of Forensic Medicine
Angiology & Vascular Surgery Institute	
Endocrinology Institute	
Hematology & Immunology Institute	
Cardiology & Cardiovascular Surgery Institute	
Ophthalmology Institute	
Gastroenterology Institute	
Tropical Medicine Institute	
Workers' Health Institute	

Source: MINSAP, Health Statistics Yearbook, 2005.

Following the severe economic crisis of the 1990s, many hospitals and polyclinics fell into serious disrepair, though health indicators remained stable and even improved in some areas. Recently, the government made this a priority, completing a program in 2004 that fully refurbished 440 polyclinics across the country. Now a massive project to upgrade 52 hospitals around the country is underway, which includes retrofitting and renovating buildings and technology upgrades. In 2006, the first

three fully renovated hospitals came back on line, but there are still many in various states of repair which require attention.

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What is medical education in Cuba like for Cubans?

The full six-year medical education for Cubans studying to become general physicians is free. The first five years are spent in a combination of classroom and clinical learning modules; the sixth year is an internship. After obtaining their MD, with few exceptions, graduates are required to complete a two-year residency program in family medicine. From that point forward, they may apply to a residency program in a second specialty. The number of slots is determined by need, and the residencies are awarded according to performance and academic record. These programs are also free of charge.

There are 21 medical schools, four dental schools and four nursing schools in the country for Cuban students (Source:MINSAP, Health Statistics Yearbook, 2005).

For the academic year 2006-2007, there were 25,728 Cubans enrolled in medical schools across the country. Additionally, there were 35,483 enrolled in university-level nursing and 4,266 in dentistry school (Source: Vice Ministry for Medical Education, Ministry of Public Health, Havana). Finally, there are an additional 67,472 enrolled in university-level allied health professions (clinical laboratory, medical imaging, physiotherapy, etc.) and clinical psychology.

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How is Cuba compensating for the outflow of doctors who volunteer to work overseas?

There are three primary strategies aimed at preserving levels of care at home, while nearly 30,000 health professionals, mostly

doctors, are volunteering in 69 countries. Cuba has over 70,000 physicians, of which some 25,000 are abroad.

First, Cuban medical schools have increased the number of slots for incoming medical students to ensure more doctors are trained: in academic year 2004-2005, the incoming class numbered 17,801; in 2005-2006 it was 21,205; and in 2006-2007, 25,728 (Source: Vice Ministry for Medical Education, Ministry of Public Health, Havana). Similar increases occurred with incoming classes for nursing, dentistry and allied health sciences.

Second, the family medicine residency program, which originally lasted for three years beyond the six-year MD training, has been compressed, so that sixth-year medical students are also first-year interns in family medicine, leaving only two more years to finish their residency. This gets more doctors into practice sooner.

Third, family doctor-and-nurse offices are being reorganized at the local level. Previously, each family doctor-and-nurse team was responsible for the health care of a neighborhood of approximately 150-200 families (600-800 population). Now, variations on that model include clustering a group of offices around a single family doctor, with one office having the traditional family doctor and nurse duo, and two to four others nearby staffed by university-trained nurses (receiving continuing medical education, similar to nurse practitioners). These nurses refer patients to the physician, but handle much of the care themselves. This variant is being applied in several provinces, and others are also being piloted.

Efforts have been made so that in the rural, remote and mountainous regions of Cuba, a smaller doctor-patient ratio remains.

It is hoped that the synergy created by these strategies will have a positive impact on community health. But until the new polyclinic design is widely applied and more health professionals (new graduates or those returning from overseas) enter into the

system, wait times for doctor's appointments – a first in the lives of many Cubans – may be more the rule than the exception, especially in Havana.

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? Cuban doctors are very poorly paid. How can they live on such a small salary?

The short answer is with extreme difficulty. But the reality is much more complex.

While salaries for the health sector have been raised twice since 2000, salaries are still low compared to purchasing power. Offsetting low salaries are heavy government subsidies of transportation, basic foodstuffs, water and housing. Other expenses, like health and education, are free. Nevertheless, there are certain goods and services (cooking oil, electricity) that are expensive in relation to income.

The gap between personal earnings and expenditures is narrowed in a variety of traditional and innovative ways: pooling of resources within families (common are three-generation households in which more than two people are employed); conservation measures - reducing, reusing and recycling; remittances from overseas and international volunteer stints, which include modest support in hard currency to health professionals' families in addition to their own monthly stipend abroad (usually USD\$150) and full Cuban-peso salary at home.

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? What about medicines? Is it true you can't get an aspirin in Cuba?

The days of the bare pharmacy shelves – so common during the severe economic crisis of the 90s – are all but over. Today, Cuba is reaping the benefits of 20 years of biotechnology research and

development that has the country producing vaccines, generic drugs (including the full schedule of HIV anti-retrovirals, provided to all HIV patients requiring them), therapeutic cancer treatments, vitamins, antibiotics, anesthetics and other medicines. These are available to Cubans and are marketed overseas in scores of countries.

Cuba has made several breakthroughs in biotech, most notably developing vaccines for Hepatitis B, Haemophilus influenzae type B, meningococcal meningitis B and the combined diphtheria, whooping cough and tetanus vaccines given to children.

Medications are free to hospital patients in Cuba, and sold at subsidized prices in pharmacies. Higher-end third-generation antibiotics are primarily available at hospital level, although common antibiotics are readily available in the pharmacies.

An innovative system was introduced during the decade-long economic crisis of the 90s, in which chronic patients (insulin-dependent diabetics, persons with high blood pressure, etc.) have their medications guaranteed.

And yes, Cuban labs also produce aspirin, ibuprofen, acetaminophen and other analgesics.

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