

## People in the Film



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### WHERE IS SHE NOW?

Originally from Cienfuegos Province where she served as Dean of the Medical School and later as Chief of the Health Department, Dr De Armas currently heads Medical Services for the City of Havana. She is involved in chronic disease management pilot studies in the city, particularly focused on vascular conditions.

### UNPUBLISHED INTERVIEW EXCERPTS FROM *¡SALUD!* December 2004

#### On Cuba's family medicine model:

From the early 60s, when a single health system was created in Cuba, the right to health care was ensured for all citizens. The introduction of the family medicine model (in the 80s) was based on a humanistic concept: the concept of comprehensive care, of seeing a person in their social environment – in their family, their community – as opposed to seeing a person as body parts, divided into systems, into diseases, into fields of specialization. It turns what is general in medicine into a field of specialization that emphasizes strong clinical development, epidemiological research, and social medicine.

As a matter of course, our family physicians are guardians of health, not just people who cure illnesses. The concept of health must include the concept of well being. This idea of being comprehensive – of being the person responsible for the health of the individual members of a family, of the whole family, and of the community throughout the system – is the opposite of what happens in other places, in other countries.

The challenge for Family Medicine, as one of the younger fields of specialization, is that it is a road to be traveled, a road of hard work. Gaining authority, prestige, and credibility as specialists – with the population, our colleagues, the whole of society – is also a process that can't happen through speeches; it is accomplished by results.

From the moment we had a single health system, priority was always given to primary health care – from the rural medical service in the first years of the revolution to the different polyclinic modalities later on.

Cubans can't live anymore without our model of Family Medicine. We can improve on it, we can make it better, but we can't do without it.

#### On community-based medicine:



Our family doctors and nurses live in the communities where they work...they live in that community, they are part of that community, sharing the life of the community, and they become leaders there. That's why it's easier for them to work with unhealthy behaviors, for example.

A regular day for any of us is very complex, with meetings, visits to the different services, seeing patients. But I can tell you I'm happy to be part of this battle, even with its complexities. You receive the satisfaction of seeing people with medical services nearer to them...and we couldn't do it without the people who help every day,

from a vaccination campaign to people's participation in health prevention work on things like AIDS, lifestyles that affect health and so on. It's very encouraging.

### **On challenges during the economic crisis of the 90s:**

I think one of the things that has meant a lot to the Cuban people is that during those hard years in the 90's, we already had family doctors and a strong health system...and with very few resources and through very difficult economic circumstances country-wide, we did not give up training doctors. And we did so with the specific intention of improving national Family Medicine coverage. We may have lacked medicines and equipment, but we always had health professionals near the people. What was never missing were those 'guardians of health' – the family doctor and nurse – near people's homes, in the neighborhood, living in the same conditions they were. In those hard years...no one can say a solution was not found, or that a person, a professional, was not there to keep you company even if the technology or the therapeutic alternatives could have been better. That is why in spite of the difficulties and complex economic realities, there was no significant deterioration of the main indicators.

The most important thing of all is that there has always been – for over 40 years – the will to support the national health system and to ensure coverage, health equity, opportunities for people to solve their health problems; and Family Medicine is the backbone of our system.