

A JOURNEY TO CUBA: MEDICAL/MENTAL HEALTH EDUCATIONAL EXCHANGE IN CUBA FEBRUARY 2013

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In 2011 I met with a group of mental health providers from diverse backgrounds who converged in Phoenix for a retreat to share ideas and vision of integrative mental health. From that shared time, the International Network of Integrative Mental Health (INIMH) was born. One of the mandates was to connect with other countries regarding the shared wealth of knowledge about integrative mental health. James Lake MD, our current president of INIMH had reconnected with a long, lost cousin in Cuba about 2 years ago. They worked hard to pull the opportunity together. MEDICC (a program in the US that facilitates Medical education exchange opportunities with the US and Cuba) facilitated the necessary steps for us to obtain visas and have a mental health educational exchange. Interesting point that was noted before and during this meeting was that we were not allowed to refer to it as a conference due to the political situations with our respective countries.

It appears that Cuba is succeeding in areas that the US is still attempting to address with the health care that it provides for their people. One example of this would be that the birth rate in Cuba now is the same as our country. This was not always the case but this happened due to the commitment of the public health mandates set forth by the Cuban government.

The 5 day exchange of the 9 mental health practitioners and 1 writer was a beginning step in what will hopefully evolve into dialogue amongst those who attended. We are seeking to find ways to be a part of the process in a formal manner through the connections that we made this past February. It is hopeful that the connection may be possible with the International Network for Mental Health (INIMH.org) who sponsored the trip. The website is specific for mental health practitioners and there is a forum opportunity to be able to share ideas and information about treatment protocols and interventions. Our Cuban colleagues have been asked to become a part of our organization.

Our time was divided into 2 days of tours of different programs in Havana, which was then followed by 3 days of conversation and didactic exchange held at the Cuban Ministry of Health in Havana. The program was ambitious and yet allowed for a few cultural activities. We would go to Old Havana where the area has been transformed to its former glory days. Cuban music would often spill out from cafes, restaurants, hotels, and even from homes throughout the evening. The food had a Spanish influence though other cuisines were available, even Chinese in their Chinatown. We would typically have a meal in a local home known as a palladare. This has been one of the few ways that Cubans are able to earn money without political repercussions. There was a friendliness present everywhere we went. The

Cubans appeared to welcome us...there was no hostility towards us as they appear to view the US government different from the people.

The first day of the tour we met at a polyclinic that provides a level of care just above the primary care level. Specialties in medicine do see people there as well in the primary care clinic or in the field. OT,PT and integrative medicine options such as acupuncture are available here. The medical director gave us an overview of the delivery of care in Cuba. She was clearly connected with her staff at all levels of the clinic and had a personal touch that was evident when we later toured the primary care clinic.

One of the changes that Cuba made early on in the reform of the medical system was to divide up communities so that for about every 2000 people, there would be assigned a primary care physician and a nurse. They live as close as possible in the community. They also are expected to make home visits in the afternoon after having morning office visits. The mandate is that all the patients are seen in their home environment in a given year. There is a 4 level rating system involved so that those with high risk health issues are noted and brought into the clinic more often than those with few health risk factors. The approach to pregnancy is significant. This requires close supervision of the mother up to time of delivery. The soon to be mom is allotted a special food ration and given folic acid. These are just some of the steps the Cuban government to allow for them to reach the improved goal of the birthrate.

With the US embargo, there have been few pharmaceutical resources in Cuba. This has resulted in few medication options for many areas of medicine, including mental health. The Cubans have found the need to be creative in their interventions and how they support the people.

There has been an introduction of Chinese medicine that includes the various branches; acupuncture, herbs, massage, chi gung. This has come about out of necessity and has been low cost as well as effective. One of the participants in the meeting was a nurse who has been trained in acupuncture. He has become the National director of the program and one of the goals he has is to bring the training to different physicians. One recent focus has been to teach more psychiatrists in acupuncture. There is a lot of excitement to do so.

Another intervention promoted with great enthusiasm was Bach flower remedies. During one exchange, it was noted that variations on the theme of the remedies even assisted in the detox of a person in liver failure. He apparently was able to recover from the experience with little to no medication exposure. We were not shown the data on this particular case report but I would welcome seeing it.

Our Cuban colleagues are up on the current research and were eager to learn about the current perspective that we shared with them. They were familiar with the new antipsychotic medications but the cost as well as lack of access of them prohibits

their use. In addition, they seek master level training in different modalities such as acupuncture, meditation, and public health.

One of the main pushes that Cuba has had in the last 20 yrs is to produce more physicians, especially primary care physicians. They have succeeded in doing so. In fact, they are exporting their doctors to countries in need of physicians. Venezuela has been one such country that received the necessary care for its people. Hugo Chavez was a great supporter of the Cuba and furnished the oil and fuel that Cuba needs. With his death, there is uncertainty of the impact this has on Cuba.

While we there, the support person from MEDICC, Diane Appelbaum, met with US medical students who are attending medical school in Cuba. They are from underserved, poor communities from the US and are receiving their education for free. One woman was from Oakland, CA and another one was from NYC. Their intentions are to return to serve in their communities.

Our visit was rich with tours of different levels of programs and facilities as well as educational overview of both of our systems. One common theme was that the elderly are growing in numbers in US and in Cuba. There is a Century club in Cuba and it is growing. Education and engaging the community were strong themes noted on the Cuban side of problem solving in how to approach care of the elderly or care of children. This was true as well for those with mental health issues.

Due to the unique approach to caring for the community as noted, there have been outreach programs already happening in the US. One such primary care program attempting to model the Cuban perspective but one that is culturally sensitive is happening in the South valley in Albuquerque.

In conclusion, the exchange was successful in that there were common themes present with both of our health care systems that we would like to address in more depth. There was an interest to seek ways to collaborate on possible educational exchanges specific for professions. Another possibility would be to do more of an immersion program where a practitioner would shadow one of the colleagues of similar training or go on home visits to better see the delivery of care. The door of cultural exchange has been successfully opened.