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Experiences and lessons from Cuba on the road to Universal Health in the Americas

Guest Editor (s): Cristian Morales ¹ and James Fitzgerald ²

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The relevance of Cuba as a source of inspiration to advance the Universal Health Strategy, as defined in the resolution approved by the Member States of the Pan American Health Organization (PAHO) ([1](#)), is indisputable and is endorsed both by its achievements in health matters and by the strength and resilience of its National Health System (SNS), which responds to the needs of the population with comprehensive and quality services that are provided to through integrated networks based on primary health care, with a first level of decisive care that focuses on people and their families, ensuring a community projection that materializes the intersectoral perspective that positions health in all policies. The coherent governance of the sector based on a strong leadership based on the participation of national, provincial and local health authorities in relevant decision-making bodies is combined with the high fiscal priority that allows, on the one hand,

This special supplement of the *Pan American Journal of Public Health* It begins with a vision of the necessary transformations of the SNS to ensure a higher level of efficiency that allows consolidating its achievements and ensuring the sustainability of Cuba's path towards Universal Health. Indeed, in 2010 an important process began to regionalize, compact and streamline the socially organized response of the SNS to the needs of a population that experiences significant changes in its epidemiological profile (chronic non-communicable diseases are the main cause of morbidity and mortality and they are added to new and old communicable diseases) and demographic (with about 20% of the population over 60 years old, Cuba is one of the countries with the highest population aging in the region).

Six articles approach the main health outcomes of Cuba from different angles. The first of these deals with the prevention and control of non-communicable diseases, and the next five deal with various aspects of health throughout the life cycle and the response to communicable diseases: maternal and child care, quality of maternal mortality statistics, the experience in immunization, the response and challenges to communicable diseases and the challenges of population aging for the NHS.

These articles show, for example, how Cuba has implemented actions to contain - and in 11 cases eliminate - immunopreventable diseases, thus responding to various PAHO resolutions regarding the right to vaccination ([2](#) - [6](#)). It also presents how communicable diseases have been tackled to become the first country in the world to certify the elimination of vertical transmission of HIV and congenital syphilis, a concrete expression of action to prevent and control HIV infection and sexually transmitted infections as urged by PAHO ([7](#)). These articles also show how PAHO recommendations are linked to Cuba's programs to deal with neglected diseases ([8](#) , [9](#)), advance towards the elimination of tuberculosis ([10](#)), prevent and control arboviral diseases ([11](#)) and implement the International Health Regulations ([12](#)).

Three other articles allow a better understanding of the factors related to the components and the structuring of the SNS that contribute to the scope of the health results presented in the previous six articles. The first focuses on the organization of the SNS with the experience of the Family Doctor and Nurse Program as the cornerstone of health services organized based on a first level of decisive care, which allows the integration of services in networks based on an intersectoral and primary health care approach. The following article by this group addresses the training of human resources in health and presents how Cuba manages to maintain access for its population -with one of the highest rates in the world of doctors per inhabitant- while maintaining, at the same time, more than 48 thousand health professionals in hard-to-reach areas in 62 countries. The third article presents the aspects related to the financing of the NHS, linking the fiscal priority - expressed in public spending on health - with progress towards Universal Health. These three articles show the coincidence of what Cuba has done in the construction of its NHS with the PAHO resolutions on Universal Health ([1](#)) and on human resources in health for the same ([13](#)).

Another article in the supplement addresses the recognized capacities of the SNS for preparedness and response to emergencies and epidemic outbreaks in the context of climate change, showing the factors that explain the resilience of the SNS and how, even ahead of time, progress has been made in implementing the resolutions of PAHO on Resilient Health Systems ([14](#)) and on Risk and Disaster Reduction ([15](#)).

The special supplement is completed with two articles that address the contribution of the Cuban research system to the advance towards Universal Health and the development of e-health as one of the main pillars of innovation and source of efficiency. The first of them shows the advances of the Cuban system of science and innovation in health and how the SNS also implements the call of the PAHO resolutions on health policy and research ([16](#)) and on access and rational use of medicines and other strategic and high-cost health technologies ([17](#)). By the end of 2016, more than 2,000 health investigations were being carried out in Cuba and there were 3,214 researchers integrating the results of their efforts both to improve services to the population and to develop innovations that allow - through BioCubaFarma - That this production of knowledge is transformed into innovations that prolong life and improve the quality of life.

The second article reports on programs such as the electronic medical record (Galen) and the experience of the Cuba Node of the Virtual Campus of Public Health, which respond directly to PAHO recommendations on the matter ([18](#)).

We are confident that this supplement will provide new scientific evidence and inspiration for health professionals working to strengthen health systems in the Region of the Americas.

Gratitude

To all those who dedicated countless hours so that this special supplement could be carried out, in particular Gisele Almeida and Lizette Pérez, at the disposal of the authorities to ensure access to the necessary data and sources of information and, above all, to the Thousands of Cuban health professionals who both in their country and in dozens of countries in the Region of the Americas and other regions of the world make health for all an achievable goal that materializes Universal Health.

Footnotes

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Experiences and lessons from Cuba on the road to Universal Health in the Americas^{*}

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Cuba is indisputably a source of inspiration for progress with the Universal Health strategy, as defined in the resolution adopted by the Member States of the Pan American Health Organization (PAHO) (1). The country's importance is underlined both by its achievements in health and by the strength and resiliency of its national health system (known as the SNS), which responds to people's needs with comprehensive and quality services that are provided through integrated networks based on primary

health care. In the SNS, the first level of care focuses on people and their families, ensuring community outreach that is the material expression of an intersectoral approach that puts health in all policies. Coherent governance of the sector—based on strong leadership and the participation of national, provincial, and local health authorities in the relevant decision-making bodies—is complemented by the high fiscal priority attributed to the SNS. This makes it possible both to provide sufficient financing for the incorporation of appropriate and innovative health technologies at the different levels of care, and also to maintain and develop human resources for health in sufficient quantity and quality to serve the country's needs. Indeed, even the needs of other countries can be met, as is demonstrated by the mobilization of medical brigades to remote areas in different countries, as well as emergency disaster and response teams that are deployed wherever the need arises.

This special supplement of the *Pan American Journal of Public Health* begins with an overview of the transformations necessary to ensure that the SNS achieves a higher level of efficiency in order to consolidate its achievements and guarantee the sustainability of Cuba's journey toward Universal Health. In 2010 an important process got underway, aimed at regionalizing, concentrating, and increasing the efficiency of the SNS's socially organized response to the needs of a population that is undergoing significant changes in its epidemiological profile (noncommunicable chronic diseases are the main cause of morbidity and mortality, in addition to the burden of new and old communicable diseases) and in its demographic make-up (with nearly 20% of the population over 60 years of age, Cuba has one of the highest rates of population aging among the countries of the Region).

From different angles, six articles address Cuba's main results in health. The first article deals with communicable disease prevention and control, and the other five touch on various aspects of health throughout the life course and the response to communicable diseases: maternal and child care, the quality of maternal mortality statistics, experiences in immunization, the challenges involved in the response to communicable diseases, and the challenges that an aging population poses for the SNS.

These articles explain, for example, how Cuba has implemented actions to contain vaccine-preventable diseases (and successfully eliminate 11 of them), in response to several PAHO resolutions on the right to vaccination (2-6). They also discuss how Cuba has tackled communicable diseases, becoming the first country in the world to certify the elimination of vertical transmission of HIV and congenital syphilis, after taking specific action to prevent and control HIV infection and sexually transmitted infections, as PAHO has urged (7). These articles also show PAHO's recommendations are linked with Cuban programs in order to address neglected diseases (8,9), advance toward the elimination of tuberculosis (10), prevent and control arboviral diseases (11), and implement the International Health Regulations (12).

Three other articles offer a better understanding of factors related to the components and structure of the SNS that have contributed to achieving the health outcomes presented in the six previous articles. The first one focuses on the organization of the SNS, with the experience of the family doctor and nurse program as the cornerstone of health services organized around the first level of care, allowing for integrated health service networks based on an intersectoral and primary health care approach. The next article in this group addresses the education of human resources for health and shows how Cuba manages to have one of the world's highest physician-to-population ratios, while also maintaining over 48 thousand health professionals in remote areas of 62 countries. The third article presents aspects related to the financing of the SNS, linking fiscal priority (expressed in terms of public health expenditure) with progress toward Universal Health. These three articles show how Cuba's construction of its national health system coincides with PAHO resolutions both on Universal Health (1) and on human resources for Universal Health (13).

Another article in the supplement addresses the SNS's recognized capacity for preparedness and response to emergencies and epidemic outbreaks within the framework of climate change, explaining aspects of the system's resiliency and how it has made early progress in implementing PAHO resolutions on resilient health systems (14) and on disaster risk reduction (15).

This special supplement is rounded out with two articles that address the contribution that the Cuban research system has made to the progress toward Universal Health and to the development of eHealth as one of the main pillars of innovation and efficiency. The first article shows the progress of the Cuban health sciences and innovation system, and how the SNS implements PAHO resolutions on health policy and research (16) and on access to and rational use of strategic and high-cost drugs and other health technologies (17). In late 2016, more than 2,000 health studies were being carried out in Cuba and 3,214 researchers were contributing their efforts to the improvement of health services for the population and to the development of innovations that will (through BioCubaFarma) help turn their research into innovations that prolong and improve the quality of life.

The second article discusses programs such as (Galen) electronic medical records and the experience of the Cuba Node of the Virtual Campus for Public Health, which respond directly to PAHO recommendations (18).

We are confident that this supplement will contribute new scientific evidence and inspiration for the health professionals working to strengthen health systems in the Region of the Americas.

Acknowledgement

Our gratitude to all those who have devoted countless hours to bring this special supplement to fruition, especially to Gisele Almeida and Lizette Pérez, to the willingness of the authorities to ensure access to the necessary data and information sources and, especially, to the thousands of Cuban health professionals who, both in their own country and in dozens of countries in the Region of the Americas and around the world, make health for all—and indeed, Universal Health—an attainable goal.

Footnotes

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