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Dear Peter,

COMMUNITY PARTICIPATION IN PRIMARY HEALTH CARE

Isn't it interesting talking about democracy in health care?
Sounds like politics, doesn't it? But, can real improvement in
people's health be achieved without their active participation in
looking after their own health? Well, let's see.

To produce changes in people's lives require their own approval
in the first place. Their needs will determine the direction of
the change. And their involvement in the processes that will
bring about that change is fundamental. Changes sought otherwise,
are unlikely to produce what is expected.

Health problems are increasing everywhere in the world and the
lives of many people are being affected. So, what can people do
to help overcome their health problems? In this letter I shall be
telling you of my conversations with some community workers in
the health area of the Municipality of Playa in Havana city.

Bacete Bwogo is an ICWA fellow studying primary health care in
delivery in Cuba, Costa Rica, Kerala State(in India) and the USA.

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CHERISHING DEAR LIFE

To discover the value of life on the street may seem a crazy story to some people. To see an 82 year old grandfather or a 75 year old grandmother jogging down the street in Sudan may seem to most people or even to other grandparents as abnormal behavior. Perhaps, it may make the day for gossipers too.

One early morning in December Dra Leonora and I were walking from Polyclinic Playa down the road to visit Dra Ania Gonzalez Nieto, a family doctor working in the neighborhood. The time was 8:30am. On one side of the street opposite the clinic of the family doctor a group of elderly people men and women were performing some kind of physical exercise. This is the grandparents club or circulo de abuelos said Dra Leonora.

To me, seeing that was interesting. Grandparents exercising in a group. A feeling of wonder got me. Questions crossed my mind. What is their motivation for doing the exercises? How do they get together? Do they all live in the same neighborhood? What other things do they do as a group? What are their expectations for the future? What do they think about the quality of their lives? And in which way do exercise help them to improve it?

Dra Ania gives medical attention for all members of the grandparents club. Before starting any physical exercise, the blood pressure of all participant members is measured and

recorded. This is repeated again at the end of the exercise. As a routine practice blood pressure recording has research purposes of studying arterial hypertension in the elderly.

HOW MUCH DO THEY KNOW ABOUT THEIR HEALTH?

What I saw at the grandparents club aroused my curiosity. I wanted to find out what they thought about health in general and what they do to stay healthy.

A very kind woman in her early sixties, senora Dulce M. Filipe was happy to offer her time for an interview with me. Herself a grandmother she is the head of the grandparents club. This time the venue for the interview is in the clinic of Dra Adelfa Pedroso, a family doctor in the same neighborhood.

According to Senora Dulce, the grandparents club is not a state institution. It is a social club for the elderly. Usually most members will be over the age of 60 years. The clubs were first established in 1986 for pensioners. In her club, there are 53 members, all pensioners. The entire management of the club is run by the grandparents themselves.

I asked her about what health problems they had? She explained how health risk factors increased above the age of 60 years and that steps are taken to reduce those risks through health education. The common health problems, she said, include high

blood pressure, heart disease and diabetes mellitus. The grandparents club is also concerned about elderly people living in the community with their families but who could not attend regularly for health reasons or very old age. Those having some psychiatric problems also receive help. In case of any medical emergency requiring hospital care, the affected person is referred to the hospital by the family doctor.

Others social functions like fiestas or celebrations of various kinds and games take place in the club. Birthdays are celebrated there too. Outdoor activities like going on picnics happen too. In the words of Senora Dulce, the social activities in the club have injected a new meaning into the lives of many of its members. It is like being born again, a new life to live.

Old People did not have to live isolated life in the community. They re-live their lives getting again together with some old friends they know. New confidence is created and grandparents find themselves useful members of their society once again. They can make use of their age-old experiences by giving advice to young people who need it or play an advisory role on school boards of directors.

Listening to Senora Dulce was interesting. She was remarkable. To vent some confession, I felt I was being schooled about life itself and health too! Ordinary people know much and they can

look after their own well-fare very well if they are given some professional support. I tell you people know about primary care.

MANY HELPING HANDS

Doctoring could prove to be a difficult task for many health professionals if they do not receive some kind of cooperation from communities in which they work. People would want to participate in processes that will produce changes to their lives.

The neighborhood of Polyclinic Playa is served by 36 family doctors. In each health sector, a family doctor is responsible for about 595 to 650 persons. Family doctors receive significant support from the community. You may ask, what kind of support is given to doctors and by whom?

To me, the neighborhood community in Playa appear to be a well organized society. Social work in the neighborhood is carried out by what are called, the mass organizations. I am told that most people in the community over the age of 14 years are members of these organizations. So, they naturally form the pivotal point for many community actions.

I interviewed some representatives of the neighborhood mass organizations for their role in health care. Julia Oliday Nunez, a married young woman in her twenties is an Ama de Casa (house-

wife). She is a member of the brigada sanitaria (health brigade) a youth group of the Federation of Cuban Women. I asked her how she became the representative of the health brigade and what was her work for health in the neighborhood. This is what she had to say: -the selection of the representative depends on certain qualities which the aspiring candidate should have. These qualities include political awareness, ability to volunteer and help, and to have the time to do the work assigned by her organization.

On the health front, she holds meetings with the family doctor and Nurse to discuss health problems that arise in the community. Other activities include health education for young people about sexually transmitted diseases, vaccinations of children and cultural orientation.

At the health sector level, a health team is formed with the family doctor, nurse and other two health brigade workers (or brigadistas sanitaria). All the five members of the health team live in same neighborhood. The work relation between the health brigade workers and the family doctor appears to be very good- it is an easy guess from Julia's description of the family doctor (Dra Adelfa Pedroso): madre, mujer, compañera, amiga y medico de familia (mother, women, colleague, friend & family doctor).

Marisel Gonzales Medina is an electronic and computer

engineer. She is the representative of the CDR (Committees for the Defense of the revolution). This organization is present on every block in the neighborhood and is the most important of all. Marisel explained that the most important objective of the CDR is the defense of the Revolution; Vigilance against counter-revolution and sabotage.

Besides, the CDR participates in many public health activities. For example in hygiene and sanitation. In the community, the popular defense may place a fine (or multa) on people who are found to be violating acceptable standard of hygiene and sanitation.

There is a close surveillance of returnees who have completed their internationalist missions abroad. The popular defense make sure that returnees are checked by doctors. Blood tests are carried out on all returnees to screen out imported communicable diseases. Those found to be sick are isolated and given medical treatment until they are cured. If a returnee defaults to check up with a doctor, the doctor will visit him/her in the place of residence.

All the public health activities in almost all health areas or health sectors is overseen and coordinated by the municipal local government (or the Poder Popular or the Peoples' Power). I interviewed Mr Herminio Gonzales Fernandez, the health delegate

of People's Power responsible for circunscription (or electoral) zone 38. He was elected by the youth to be their delegate and has been working in the area for three years. The criteria for selection of a delegate is honesty, revolutionary and good communication skills. He is responsible for a health sector with a population of about 4,000 persons. Of these, about 1,956 are above the age of 16 years.

Herminio coordinates the work of 4 family doctors in the neighborhood. He has a wide range of responsibilities, for example, health, education, hygiene, nutrition, water supply, sewage and waste disposal etc.

The delegate is also concerned about the health of the children in community, for example, increase in infant mortality. Discussion is held immediately with the family doctor to identify the possible causes of increased mortality. Attention is also given to children who fail to attend school for one reason or another. The problem is discussed with the parents and the director of the school and some solution is worked out.

The delegate also attends to the problems of the elderly, especially those suffering from heart disease and high blood pressure.

In the case of dissatisfaction with the quality of the health

service, members of community can complain directly to the delegate of Peoples' Power. Logistical bottlenecks such as shortages of medical supplies in both the polyclinic and family doctor clinics can be reported to the delegate. He will communicate with higher authorities for their appropriate action.

From what I can make, the delegate is fairly knowledgeable about health and health-related issues. He seem to enjoy good work relation with the family doctor. Working together as a health team require understanding of each other's duties and what the limits are. This understanding is facilitated through the regular meetings that take place in the consejo popular (or Popular meeting).

If for some reason the health delegate of Peoples' Power is unavailable to coordinate the health activities in the community, a replacement is chosen from the community to represent the interests of the neighborhood community. Thus, the continuity of health care and other services in the community is not interrupted.

In the neighborhood of Polyclinic Playa, community action in primary care and health-related services appears to owe its strength and effectiveness to the voluntary work carried out by members of the community themselves. From my interviews, it appears that most of the community workers in primary care are

unpaid volunteers who offer their services gratis.

At this point, I must make it clear that the mass organizations are not the only institutions involved in community health care. Health care activities are also carried out in social institutions such as schools and nurseries (circulo infantiles), grandparents clubs (circulo de abuelos), pregnant women clubs (circulo de embarazadas) and sport clubs etc. Also some Trade Unions of professional institutions participate in primary care. Their roles shall be discussed in more detail in the next newsletter.

SIGNIFICANCE OF PARTICIPATION

To wind up, perhaps it would be nice to recall a philosophical argument of the primary health care approach which says that:- the achievement of better health requires much more involvement by people themselves as individuals, families and communities, in taking action on their own behalf by adopting healthy life-style and ensuring a health environment. The spirit of self reliance and self determination is required to a much greater extent in addition to the contributions of the conventional health system.

From my observation, it is possible to say that neighborhood communities in the health area of Playa participated actively in primary care as indicated by the role and dedication of volunteer health workers of the social and mass organizations. They lend

important support to the health activities of the family doctors and nurses in the neighborhood. It has been suggested that community participation in primary care in both urban and rural areas follows the same pattern throughout Cuba.

Collective responsibility for health in primary care is an interesting subject. The universal demand of " health for all by the year 2000 " also calls for concerted actions by all people from all sectors of population who have an interest in the promotion of that cause. Perhaps, in this situation health promoters could borrow the wisdom of the saying " one hand can not clap " .

Well, señor Peter. I guess at this point I have finished telling you my story for this letter. I hope you will find it informative. More news in the next letter. Until then I am,

Yours sincerely,

B. O. Bwogo.

Bacete Othworn Bwogo, M.D.