

INSTITUTE OF CURRENT WORLD AFFAIRS

Residencia Victoria de Giron
Albergue No.1; Habitacion# 307
Calle 146 No. 2504 e\ 25 y 31
Cubanacan-Playa, Zona postal 16,
La Habana, CUBA.

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Peter Bird Martin
Institute of Current World Affairs
4 West Wheelock Street
Hanover, N.H. 03755

Dear Peter,

THE ROLE OF THE MASS ORGANIZATIONS IN PRIMARY HEALTH CARE

It has been said that the most important health workers in the world are ordinary people themselves. And that health for all will only be achieved if there are opportunities for all to participate.

In the developed world as much as 60% of sickness is self-diagnosed and treated by a visit to the chemist or medicine cupboard. In the developing countries the vast proportion of medical and nursing attention given to children is supplied by their mothers. Self-care and community health have to be the basis of the health system in countries with so few resources (1).

The promotion of Primary health care (PHC) is dependent on individual and collective responsibility for health. The first

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

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is to facilitate more community involvement in decision-making. This is a political issue. The second is to inform people of their potential for acquiring better health through their own efforts. This involves changing behavior and life-styles and identifying and tackling local health problems by building up a system of organization and decision-making (2). Implementation of PHC needs active community involvement. To be really effective the involvement should be a permanent feature of community life and should include as many people as possible in sustained health activities.

The community usually participate through its leaders who are the decision-makers. They will vary in type according to the dominant culture, religious and political forces at work in the community and the country as a whole. Whereas traditional leaders could be village headmen with certain powers and selected by the members of the whole village, in more politicized societies leadership may be vested in a group of people elected by the community as part of the overall national government (3).

POPULAR PARTICIPATION IN PRIMARY CARE

Perhaps a good way to demonstrate the extent of people participation in primary care in Cuba is to state article 49 of the socialist constitution of the republic of Cuba:

" Everyone has the right to the care and protection of their. The state guarantees this right: By offering

free hospital and medical services... By offering free dental treatment; By developing plans for sanitary efforts, health education, periodic medical exams, vaccination, and other preventive means. In these plans and other activities, the entire population participates through the social and the mass organizations (4)."

The mass organizations permeate the whole health service system. They are concerned with many social tasks of which health is one (5). The most important of these are the Comites de la Defensa de la Revolucion (Committees for the Defense of the revolution) or CDR, the Federacion de mujeres Cubanas (Federation of the Cuban Women) or FMC, the Union de la Joventud comunista (Union of Young Communists) or UJC, and workers unions such as the Central de Trabajadores de Cuba (Confederation of Cuban Workers) or CTC and the Asociacion Nacional de Agricultores Pequeñas (National association of Small Farmers) or ANAP. We shall consider each organization below.

The Poder Popular (or Peoples' Power) represent the local government administration at municipal level and co-ordinates various health activities through its health directorates. The Communist Party of Cuba (PCC) has base committees in the work place (6) and it guides and directs the work of the mass and social organizations...while recognizing the independence and the autonomy of these organizations... promote broad and democratic

discussions in these organizations...respect the autonomy of these organizations and the interest of the sector of population they represent (7).

An important factor for the improvement of health in Cuba has been the participation of the people in the battle for health and the systematic participation of the mass organizations and the trade unions in all the tasks related to this work (8).

The mobilizing and the work capacity of the mass organizations has made a decisive contribution to the success of the revolution in the sphere of health (9).

For example, in 1962, mass campaigns were begun against polio, malaria, and tetanus. The CDR, FMC and other organizations held vaccinations in every section of the country: 2 216 022 children were immunized against polio that year, using Sabine vaccine; 4 000 000 inoculations against diphtheria, tetanus, and typhoid were carried out in four month period. As a result there has been no polio in Cuba since 1963. Malaria, which struck some 3 000 persons a year, was eliminated in 1968. Diphtheria was eradicated in 1971. Gastroenteritis, a major killer of children in underdeveloped countries, killing 4,157 Cuban children in 1962, 80 % of them under the age of one, was curbed, causing only 761 deaths in 1975 (10).

HEALTH ROLES OF THE MASS ORGANIZATIONS

The mass organizations of Cuba- to which almost every Cuban belongs- are the bedrock of public activity. Without them there would be no revolution. They are the People's organizations through which each major sector of the population-workers, peasants, women and neighbours-defends and represents its interests and makes its feelings, problems, and opinions known. Joining a mass organization is a matter of individual choice.

FMC: -The federation was founded on August 23, 1960. It is a mass organization with a national hierarchy of committees, from local to national level. The leading bodies of the FMC are organized on a municipal and provincial level according to the political and administrative divisions in Cuba.

The FMC is organized throughout the country in both rural and urban areas. It has more than 65,000 delegations. Each delegation has a voluntary health brigade worker who is adequately trained and works with mothers trying to educate them to cooperate in health programs and in the mass campaigns related to Pap tests for early detection of cervical cancer. To become a member, a young woman usually chooses to join the federation at about 14 years of age. In 1989, there were more than 3.2 million members, representing about 81 % of women of over 14 years old (11).

The role of the federation in primary care include health

education activities, attention for children (child development), health of mothers, and family nutrition. The FMC is respected for its work of incorporating women in its workforce, in the development of community health plans, in the education of women and the creation and organization of childcare centers that provide a good service to working women and to the development of children from birth to six years of age.

CDRs: -these were organized on the neighborhood and block level in 1960 to guard against counter-revolution and sabotage and to assist in the organization of the militia. After 1960, the organization broadened its activities especially for voluntary work for public health tasks. After 1962, the CDR was given virtually complete responsibility for polio immunization and kept a record of other immunizations schedules for special risk persons in the local neighborhood. With an estimated 1968 membership of over one-third of the population (in 1980 it was 5 321 000), the CDR is easily the most important mass organization in Cuba (12).

The CDRs are also involved in health related tasks, for example, in activities involving blood donations. It is estimated that about half a million people donate blood every year. The number of donations not only permit to have fresh blood for transfusions, but also to have enough to produce plasma and many other medications derived from blood.

ANAP: -was created for small farmers owning their own land in 1959-60. It is perhaps the first mass organization to assist the work of early rural health centers. ANAP collaborate in the control of animal brucellosis and tuberculosis.

CTC: -dates from pre-revolutionary days and had a communist leadership. After the revolution in 1959, the CTC has gradually taken on the role of critical partnership with revolutionary management of socialized production. It is through the CTC that safety committees and first aid stations are organized in factories and state farms.

The CTC secures regular medical examinations for workers in the food service industry, health centers, and hospitals; and also assist in the preparation and enforcement of sanitary work norms.

UJC: - is a vanguard organization of young communists. It has a structure similar to the PCC itself. It focuses more on the matters that relate to young people, under 25 years of age. It is active among the various federations of secondary and university students. The UJC assist the CDRs in the health-related activity of blood donation.

The Cuban model of involving lay people to participate in primary care through the mass organizations is interesting. The order and the level of organization of the Cuban society reflects the

political reality of the country itself. For example, from the outset, health care was given high priority since the early years of the revolution with the object of extending health services throughout the country. This required the mobilization and involvement of large sector of population in health care activities with a special emphasis on disease prevention, such as the mass vaccination campaigns of 1962 already explained above. The death rates of many of the infectious diseases declined remarkably within a decade and some diseases were eliminate and others eradicated.

Another aspect of the mass organizations is their ability to mobilize rapidly in emergency situations that are threatening the health of large sections of the population. An example would be the rapid control of the sudden outbreak of the heamorrhagic dengue fever in the airport vicinity of Havana late in May in 1981.

The disease was unknown in the country before and there was no previous experience in dealing with it. Within days the disease had spread all over the country and by June 16 cases were being reported from every province. By June 13, about 11 721 cases were reported that day.

There, the mass organizations and the entire population were mobilized to detect actual or potential vector focal point and

eradicate them by all possible means, including clearing out homes, factories and social facilities. Although 344 203 cases of disease were report during the whole epidemic, the mortality for the whole country was kept down to 101 children and 57 adults, 158 people in all (13).

Putting it all together, the mass organizations render important support for health promotion activities. The low infant mortality rate of 10.2 per 1000 live births in January 1993 for the whole of Cuba could not have been achieved without the full participation of the mass organizations in the various health campaigns throughout the country (14).

It must be realized that most of the health activities of the mass organizations occur at the community level beyond the polyclinic and the family doctor clinic, that is, where people live and work. For example, health promotion tasks in the home by the individual and family, in children nurseries, schools, grandparents clubs, in factories etc.

WHY THE HIGH PRIORITY FOR HEALTH?

There are many important reasons for the importance attached to health in the Cuban Revolution. One is that the leadership recognizes the importance of health as a national strength and the efficiency of production in both industry and agriculture. Another is that health is important in life and wellfare of

everyone, so that their provision helps to win the hearts and minds of the people for the government in power. A third reason, is the basic humanitarianism of the socialist ideal.

A fourth reason for the high health priority in the Cuban context relates to the relatively strong role of the doctors in the revolution itself. The revolution background of the first four Ministers of Health is documented (15).

LESSONS LEARNT

In Cuba, the protection of people's health is the obligation of the socialist state (see page 2). Participation of the entire population in health care is supported by the socialist constitution of the Republic of Cuba. Participation is through established permanent structures (social and mass organizations) which have their own charters and defined duties and they are supervised and supported by the government. The large membership of the mass organizations is a potential resource that can be used to promote primary health care activities in the community.

In conclusion, community participation (CP) is as essential in primary care (PC) as soil and water are to flowers. Unlike the relationship which flowers have to the soil, there is a two-way benefit. Primary care both feeds community participation and feeds from it. Mathematicians might write $PC=CP$ (16).

Hasta aqui y como siempre, muchas gracias.

B.O. Bwogo.
Bacete Othwonh Bwogo, M.D.

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