Health Promotion and Nursing in Cuba

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Learning Objectives

- Upon completion of this presentation the participant will be able to:
  - Discuss how Cuban nurses advocate for and lead health promotion and disease prevention efforts.
  - Develop an understanding related to the Cuban health care system, nursing education, and nursing roles and responsibilities in health care.
Purpose

- Provide up-to-date information regarding organization and function of Cuban system
- Examine nursing education and practice
- Discuss preconceived ideas about healthcare in Cuba
  - How altered by visit
- Explore how environment differed from what was expected
- Lessons learned about methods that could be applied in the US
Trip Objectives

- Initiate development of relationships between US and Cuban nursing faculty in Havana
- Explore how nursing education, community nursing roles, and prevention efforts guide health promotion and disease prevention
- Consider how Cuban preventive practices could be introduced and implemented to impact health promotion and disease prevention in the US
Social and Political Implications

- Multiple dramatic political and social changes
- Trade and travel embargos, economic crises
  - Yet developed impressive, extremely effective healthcare system, focused on health promotion and disease prevention from crib to death
- Life expectancy in Cuba for males and females is 77 years and 80 years of age, respectively
  - Versus 76 years and 81 years of age in the US
    (World Health Organization [WHO], 2016).
Comparative Health Statistics

- Infant mortality rate 4.5 deaths/1,000 live births
  - 5.80/1,000 in US (Central Intelligence Agency Factbook, 2017)
- 6 deaths/1,000 for children under 6 years old
  - 8/1,000 live births (WHO, 2016)
- Elimination of mother-to-child HIV and syphilis transmission (WHO, 2015)
All this at Low Cost!

- Per capita healthcare expenditures
  - 2011 to 2015
    - Cuba $603
    - US $9,146
  - With similar (or slightly better) health outcomes...
Access and Equity

- Access and equity is high priority for government
  - Guiding principle in nursing and medical education
- Visits to universities and healthcare facilities
  - Demonstrated emphasis on holistic approach to primary prevention when educating nurses and physicians
- Students learn
  - Targeted health promotion education, supportive social services for all people
Education of Cuban Nurses

- Integration of hard sciences (biology, chemistry, pathophysiology), with the art and science of nursing
- Strong emphasis on public health and healthcare in community
- Clinical experiences from the very beginning
  - Directly embedded in community setting
- Degrees
  - 5-year baccalaureate entry-level degree
  - Master’s degree (specialization)
  - PhD
Nursing Education in Cuba

- Community based learning approach, not hospital based
- Clinical time starts at the beginning and is spent in the community and homes
- Once trained they are eager to share prevention efforts that work well in a resource-limited environment
How Nurses Practice in Cuba

- Equals, confident in role
- Team care is crucial
  - “The glue that keeps this duo closer to the needs of the families and individual residents”
- Overarching goals; health promotion & disease prevention
- RN and MD live in same residence; 1 neighborhood, manage 1 primary care clinic
  - Same building as Consultorio or clinic office
  - Office work in am, home visits in pm
  - New mothers to elderly grandparents
  - Administer medications, provide public and personal health education
  - Articulate their contribution to positive patient outcomes and overall public health
Nursing Practice in Cuba

- Experts at primary prevention
- First line provider for immunizations, health screenings, and home visits for new mothers, the sick, and the elderly
- Home visits, independently and jointly with physicians to provide health education, exams, and treatment
- International presence
  - Take health promotion practices and beliefs to developed and developing countries
Building Trust

- Initially difficult to establish communication
  - Multiple trips have built relationship of trust
  - Emphasis on collaborative learning opportunities
- Cuban nurses open and willing to share knowledge and experiences with US nurses
  - Interested in education of nurses and responsibilities of nurses in US
How the Visit Changed Us

- Beginning understanding of methods and processes by which the Cuban government and Cuban healthcare providers have achieved positive public health outcomes with few resources
  - Model should be studied and adapted
- Actual experiences were not consistent with preconceived ideas
  - People were excited to move forward with establishing communication and promoting exchange of ideas and information
- Visits to educational and healthcare facilities
  - Demonstrated how emphasizing primary prevention during education of healthcare providers is key to holistic primary care
Low Tech/ High Touch

- Lack of state-of-the-art technology
  - Not considered a challenge as stellar primary care prevents complex acute illness, and builds relationships
- Lack of technology compels providers to “touch” patients
  - Cuban’s are very proud of the high level of skill required to diagnose illness without technology
- Low technology approach
  - leads to clear expectations of providers’ roles, and supportive interprofessional relationships
- Recommendation
  - Continued efforts to bring US and Cuban healthcare providers together to exchange ideas and evidence to improve individual and population outcomes
  - Nursing is the perfect discipline to reestablish relationships and build bridges to fill healthcare gaps in both countries.
What’s Happening Now

- Continued efforts to bring U.S. and Cuban healthcare providers together to exchange ideas and evidence to improve patient outcomes, health equity, and public health approaches
- Better understanding of how public health-based, high-touch, low technology approach leads to clear role expectations and supportive interprofessional relationships
- Collaborating with Cuban colleagues is a unique way to reestablish relationships and build bridges to fill healthcare gaps in both countries
Questions?

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