COMMENTS ON

“The Impact of the U. S. Embargo on Health and Nutrition in Cuba” by Bourne

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The American Association for World Health report, The Impact of the U.S. Embargo on Health & Nutrition in Cuba, is very important. It paints a vivid portrait of how precarious is the health situation in the country today. Readers of the report are sure to view it with awe, both for its breath and comprehensiveness. Seldom do researchers working on Cuba have access to the amount of information needed to produce a report of this nature. Even more remarkable—in the context of socialist Cuba’s closed society—is the unfettered access the report’s authors had to professionals at all levels of the Cuban medical and political establishment.

Shortages of the most basic medical inputs are described and documented, as are the deteriorated condition of most of Cuba’s medical facilities, from primary health posts to the most specialized tertiary hospitals in Havana. The report highlights the collapse of nutritional levels in Cuba between 1989 and 1996, a period in which average intake of calories and essential nutrients declined dramatically. The sequel of these developments is a worsening morbidity and mortality profile evidenced by rising percentages of low birth weight infants, malnourished mothers, and increasing death rates among the elderly. From an information perspective, the report is invaluable. Until its publication, we did not have such a detailed and compelling description of the enormity of the Cuban health crisis.

The main conclusion of the report is that the U.S. economic embargo is responsible for Cuba’s current health and nutrition predicament. In fact, the report’s principal conclusion was the a priori reason why it was prepared. Thus, not surprisingly, the evidence presented in the report simply serves to validate a pre-determined conclusion. The report offers an apocalyptic vision of the embargo’s impact on practically every dimension of health care in Cuba. It blames, for example, crippling medicine and medical equipment shortages and the inability of Cuban doctors to obtain medical information, including the latest scientific research, on the embargo.

Cuba’s shortages are traced to several embargo measures that impede the free flow of U.S. imports or that increase the costs of imports from other countries. Among these are limitations on subsidiary trade by U.S. corporations and the limited number of licenses issued by the U.S. Treasury and Commerce Departments to permit the export of medicines and medical supplies produced in the United States to Cuba. The report also identifies shipping costs increases arising from the U.S. decision of not permitting ships delivering merchandise to Cuba to unload or pick up cargo in American ports for 180 days after visiting Cuba.

The report is as remarkable for what it says, as much as for what it does not say. It brushes over the fact that the crisis in the Cuban health system is essentially the result of resource scarcity. Even if Cuba had
unfettered access to the U.S. market, it could not afford to buy at standard commercial prices the medical supplies the country needs simply because the country is bankrupt. Other countries would be more than happy to supply Cuba with the majority, if not all, of the medications and medical equipment not currently available from the United States. The problem is that the government in Havana does not have the money to pay for these imports. There are few new modern household appliances in Cuba. Yet, no analyst is likely to blame the shortage of consumer goods on the embargo. It is well known that there are many willing sellers in Europe, Asia, and Latin America ready to supply these goods—at prices comparable to or lower than those charged by U.S. companies—if only Cuba had the money to pay for them.

Cuba’s bankruptcy has nothing to do with the embargo. It is the direct result of failed economic policies pursued by Cuba’s socialist government for over four decades, compounded by the end of Soviet subsidies. These subsidies allowed the Cuban economy to flounder along while mismanaging billions of pesos. This waste was evident in the prohibitively expensive health care system promoted by the authorities, including Fidel Castro, a system that Cuba can no longer sustain. Although the health care system gave great emphasis to prevention, it was and continues to be burdened by high costs associated with heavy dependence on physicians and hospitals.

Castro likes to boast of Cuba’s low population-to-physician and population-to-hospital bed ratios, but these low ratios are indicative of the excessive cost associate with the Cuban health system. Cuba was able to bear these costs as long as the national economy was subsidized, but this option is no longer viable. And this was known many years ago. They are the reason why the Cuban health system model was never endorsed by any international health organization, including the Pan American Health Organization, since it was recognized that no other country at Cuba’s development level could afford it. The collapse of the national health care system was unavoidable once Soviet subsidies were no longer available.

The report also fails to note that medical health systems all over the world are facing major financial pressures. This is true in the United States, where managed care is a response to rising health care costs. But it is also true in practically every Latin American country, where profound reforms are being introduced to make national health care delivery systems more efficient and affordable, even though few of these countries provided health care packages as generous as Cuba’s.

It is not necessary to waste many words in addressing the report’s allegation that the deteriorated nutritional situation in Cuba is the result of the U.S. embargo. Food shortages have been a part of Cuban life for four decades, for reasons well documented by a plethora of authors going back to the early 1960s. These problems persist and are not likely to end as long as economic policies continue to be designed within the framework of discredited socialist notions of resource allocation and market controls. Not even the most ardent supporters of the socialist government have ever been able to come to terms with why privately-owned small farms in Cuba are considerably more productive than larger and considerably better endowed agricultural units in the state sector (in one guise or another). An equally interesting question is how the embargo impacts on the production of root tubers (e.g., yuca and malanga), domestic traditional foodstuffs that are as rare today in Cuban tables as is imported wheat.

In summary, the American Association for World Health report follows a well-established tradition of manipulating information to serve political ends. While it claims to be a candid, scientific report, it fails to live to standard cannons of objectivity. The Impact of the U. S. Embargo on Health & Nutrition in Cuba uses data selectively, conveniently distorting or ignoring information when it fails to support its preordained conclusion. Within the context of the current U.S. policy debate regarding what to do about Cuba, this report is simply one more round of ammunition—developed by sympathizers of Cuban socialism in collaboration with the authorities in Havana—aimed at weakening U.S. resolve to maintain sanctions against Cuba. The end objective of this
strategy is to grant Castro’s Cuba access to the resources of international financial institutions and, why not, to U.S. economic assistance if it is ever offered with no political strings (a transition to democratic rule) attached.

Perhaps the best course of action for the United States to follow would be to remove all restrictions on the sale of medicines and food to Cuba. By removing these sanctions, the Havana government would be deprived of an effective propaganda tool. The leadership would then be forced to offer the people a more realistic explanation of why, after forty years of “revolution” and endless promises of prosperity, scarcity (material as well as in terms of basic human freedom) continues to be the dominant quality of Cuban life.