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Cuba's use of Medical Diplomacy: Establishing Global Significance and Influence

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Cuba's use of Medical Diplomacy:
Establishing Global Significance and Influence

By Juan Pablo Fernandez Herzberg
Spring 2017

SIT: International Relations and Multilateral Diplomacy

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Abstract

This research project aims to assess the importance of medical diplomacy as a foreign policy strategy for Cuba, as well as a means by which the small island nation has managed to gain geopolitical prominence in the current international political sphere. Through the analysis of Cuba's medical internationalism, its impact on the health of populations across the world, its oil-for-doctors trade agreements with Venezuela, and its involvement in initiatives like the Bolivarian Alternative for the Americas (ALBA), it becomes easier to see the link between medical diplomacy and geopolitical power, which Cuba has been successfully garnering since its 1959 Revolution despite serious economic setbacks like the collapse of the Soviet Union and the United States embargo.

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Introduction

There are many functions of foreign policy that a country may consider when establishing its place in the sphere of international relations, the most important of which are “protecting national economic power and wellbeing” as well as more explicitly political goals such as expanding a nation’s sphere of influence, creating alliances, avoiding conflict, etc.¹. An often under-discussed aspect of foreign policy and diplomacy that a country can engage in is medical diplomacy, and its relevance is especially important when considering its political, economic, and implications for the world today. This makes the phenomenon of medical diplomacy worth analyzing in terms of its geostrategic usefulness in bilateral or multilateral relations as well as its direct impact on the lives and health of people worldwide. Doing this could help complicate the academic dialogue on geopolitical power, as well as shed light on innovative ways to gain political power and influence without necessarily being an economic or political giant like Russia, China, or the United States.

The focus of this study centers on exactly that: simply put, how medical diplomacy is shifting states’ influence and global power scales as well as providing countries with ingenious ways of conducting foreign policy. Holistically, medical diplomacy ties together the importance of global health to the fields of both politics (through medical diplomacy) and economics, which in turn has a strong potential to translate into political power due to the “economic relevance of the health sector [and] of certain industries such as tobacco, food and pharmaceuticals”².

¹ Kickbusch, Ilona. "Global Health Diplomacy Understanding the Health and Foreign Policy Relationship in a global world." Lecture, The Graduate Institute, Debrecen, 2012.

² Ibid.

Also worth mentioning is the fact that medical diplomacy is important regardless of the number of participants. Multilaterally, it is “a method for reaching compromise and consensus ... usually in the face of other interests (power, security, economic interest)”³. Bilaterally, it serves as a useful soft power strategy by connecting the field of health to foreign policy goals⁴. Furthermore, it can even be tied to security, since it serves as a vehicle to peace in situations where a health crisis is underway.

Furthermore, using health in the field of diplomacy after conflict can also “humanize the adversary by giving him or her a face” and create a more organized health system after technical information is gathered for negotiating talks. This makes health or medical diplomacy important not only for independent countries, but also for international organizations and bodies such as the United Nations, whose General Assembly has engaged with topics such as “Global Health and Foreign Policy” in 2009 and “Non Communicable Diseases” in 2010⁵. In short, the relevance of medical or health diplomacy lies in its ability to advance a country’s political or economic interests while at the same time promoting a better state for the global community, especially given the “growing perception that health can be an effective ‘soft power’ tool” in policy-making⁶.

³ Kickbusch, Ilona. "Global Health Diplomacy Understanding the Health and Foreign Policy Relationship in a global world."

⁴ Rao, GV, Magnus Mansard, and DN Reddy. "Gastrointestinal endoscopy- An emerging soft power in health care." *Journal of Digestive Endoscopy* 3, no. 5 (2012): 2-6. doi:10.4103/0976-5042.95022.

⁵ Kickbusch, Ilona. "Global Health Diplomacy Understanding the Health and Foreign Policy Relationship in a global world."

⁶ Feldbaum, Harley, and Joshua Michaud. "Health Diplomacy and the Enduring Relevance of Foreign Policy Interests." *PLoS Medicine* 7, no. 4 (April 20, 2010). doi:10.1371/journal.pmed.1000226.

It is also important to understand that, even in the world of NGOs, impartiality and neutrality, providing medical care to people in need is a political gesture, even if it is done with apolitical intentions⁷. Christian Captier, General Director of Médecins Sans Frontières (MSF) in Switzerland, elaborated in his interview on many defining characteristics of MSF, including impartiality and neutrality, which they follow with the hopes of increasing the value of the organization's medical impact⁸. In other words, whereas MSF tries to provide relief for global health issues trying to remain as independent as possible, medical diplomacy explicitly seeks an exchange, whether what is exchanged is doctors and goods or more abstract like influence. It is worth mentioning here that although MSF actively seeks cooperation with ministries of health or other government or military bodies as long as its apolitical mission is maintained, "excessive administrative control by Cuban authorities and related problems with local supply channels" led to MSF withdrawal from Cuba in April of 2000⁹. This shows that medical diplomacy does not necessarily mean a collaborative mindset, and serves as evidence that although socialist ideology champions health services for everyone, MSF was forced to withdraw because control was more important to the Cuban regime.

Research Question

⁷ "MSF, Medical Diplomacy, and Humanitarian Aid." Interview by Juan Herzberg and Christian Captier.

⁸ Ibid.

⁹ Cuba: MSF closes its missions on the island." Médecins Sans Frontières (MSF) International. November 1, 2000. Accessed April 14, 2017.

The research question in this particular research project tackles the importance and nuances of medical diplomacy and its relationship to geopolitical power using a country that has made it a central point of its foreign policy agenda: the Republic of Cuba. After the Revolution of 1959, medical diplomacy became an integral part of Cuban foreign policy. Decades later in 2017, it is an interesting question to ask how Cuba has managed to use its “medical internationalism” as a way to both ensure internal stability through the up-keeping of revolutionary ideals as well as helped expand its geopolitical influence despite the economic effect of the U.S. embargo.

The way in which medical diplomacy has influenced Cuba is varied. On a national level, it has kept revolutionary ideals alive and present through times of economic struggles, as can be seen with the way that Cuba and Venezuela engaged in trade between Cuba’s medical sector and Venezuela’s oil sector. Internationally, it has helped Cuba develop geopolitical power, influence, and even prestige that translates to political support through sending well-trained doctors to areas in need in humanitarian missions, educating foreign students in Cuban schools of medicine, and providing medical treatment to foreigners on Cuban soil.

This has allowed Cuba to develop positive relations with numerous countries, especially in Latin America and Africa. In this way, medical diplomacy has allowed Cuba to develop internationally in a strategic, political way despite the fact it is an island and has been under heavy economic pressure from the embargo since the triumph of its revolution.

Literature Review

There are several important and relevant publications on the subject of medical diplomacy. One leading expert, Dr. Ilona Kickbusch, works at the Graduate Institute of

International and Development Studies in Geneva. She has written books such as *Negotiating and Navigating Global Health: Case Studies in Global Health Diplomacy* as well as helped produce many articles such as “Global health diplomacy: the need for new perspectives, strategic approaches and skills in global health” for the Bulletin of the World Health Organization. In terms of Cuba specifically, Julie M. Feinsilver is an expert that has thoroughly studied both medical diplomacy, the Cuban health system domestically, and the international reach of medical diplomacy for the nation. Some of her most notable works are “Fifty Years of Cuba’s Medical Diplomacy: From Idealism to Pragmatism” and “Oil-for-Doctors: Cuban Medical Diplomacy Gets a Little Help From a Venezuelan Friend”.

The main theoretical approach with which medical diplomacy can be understood is that of soft power politics in foreign policy. According to Rao et al., “Medical diplomacy ...is a form of soft power that has major benefits and garners symbolic capital (prestige, good will, and influence... and should be seen as a model for international relations”¹⁰. In this way, medical diplomacy serves to advance geopolitical interests while also dealing with far more delicate issues like the health of people worldwide, which can itself also bring up ethical and moral dilemmas connected to the political sphere. These ethical and moral dilemmas are mainly what remain unexplored in literature, probably due to the fact that experts are mostly trained in the fields of political science or regional studies as opposed to other disciplines like sociology. Other gaps include, in my opinion, a lack of connection between scholarly and academic endeavors and testimony by doctors

¹⁰ Rao, GV, Magnus Mansard, and DN Reddy. "Gastrointestinal endoscopy- An emerging soft power in health care."

themselves, which are actually the agents that make medical diplomacy possible in the first place.

Research Methodology

In order to effectively analyze the role of medical diplomacy in Cuban foreign policy and its effect on Cuba's geopolitical power and influence, an approach that integrates primary and secondary data is necessary. In terms of primary data, interviews with experts knowledgeable on the subjects of medical diplomacy and global health in addition to international relations are indispensable. Additionally, historical documents such as Ernesto Che Guevara's speech "On Revolutionary Medicine" are also necessary, since they help establish an ideological framework that is historically inclusive to better understand political decisions made both in the past and in the present day.

As for secondary data, the articles and books written by the experts used in this project are also necessary in order to understand Cuba's foreign policy and medical internationalism holistically. There are several articles that analyze data in terms of monetary aid or the value of medical goods and services that make it possible to draw certain conclusions. Some of these, for example, include the growing importance of Cuba-Venezuela trade relations through numerical data including important proxies such as trade values and GDP percentages of both countries.

The conclusions drawn in this research project take into account these various types of data and analyze them in a geopolitical theoretical framework with relation to foreign policy initiatives, particularly those dealing with soft power politics. Ethical considerations

mainly involve interviewees' rights to be comfortable during the interview process, as talking about the subject of global health and its relation to politics may result in certain sensibilities, exacerbated by the regime structure in Cuba that may limit a feeling of freedom in discussing the research question. This was implemented with the anonymous Cuban doctor, who chose to remain anonymous for the purposes of the interview.

Definitions

- Medical (or health) diplomacy: This is foreign policy conducted by using elements in the medical field (in terms of medical materials, personnel, and services) to achieve other political or economic goals. As Ilona Kickbusch put it, there are several ways for foreign policy to interact with health in terms of its goals. According to her, "Foreign policy can endanger health when diplomacy breaks down or when trade considerations trump health; health can be used as an instrument of foreign policy in order to achieve other goals; health can be an integral part of foreign policy; and foreign policy can be used to promote health goals"¹¹. In this project, the last three of these possible scenarios will be explored in depth in relation to Cuba.

- United States Embargo: After Castro came to power by overthrowing Fulgencio Batista, whose government enjoyed U.S. support, Cuba "increased trade with the Soviet Union, nationalized U.S.-owned properties, and hiked taxes on U.S. imports"¹². This led to tensions that culminated in the U.S. cutting back Cuban sugar imports, a "ban on nearly all U.S. exports to Cuba", and the eventual full economic embargo including travel restrictions

¹¹ Kickbusch, Ilona. "Global health diplomacy: how foreign policy can influence health." *British Medical Journal*, June 10, 2011, 1-4. Accessed April 14, 2017. doi:10.1136/bmj.d3154.

¹² Felter, Claire, Brianna Lee, James McBride, and Danielle Renwick. "U.S.-Cuba Relations." *Council on Foreign Relations*, February 2014. Accessed April 15, 2017.

begun by President John F. Kennedy¹³. After the collapse of the Soviet Union, the embargo proved to be detrimental for Cuba's economy as it went through the "Special Period" in the 1990s.

- Bolivarian Alternative for the Americas (ALBA): Venezuela proposed this initiative in 2001 in order to avoid the United States proposal for "a Free Trade Area of the Americas"¹⁴. Instead, ALBA focused on Latin American and Caribbean countries based on the principles of "social welfare, equity and mutual economic aid rather than trade liberalization"¹⁵. Its relevance to this research project deals with its emphasis on state control of the health sector, as well as the significance of the fact that the first two member states were Cuba and Venezuela¹⁶.

Geopolitical ramifications of Cuba's medical Diplomacy: An Analysis

Cuba's medical internationalism origins in a historical and ideological context

The importance of medical diplomacy and the field of health policy are notable because health can potentially play a large role in politics. Groups like Hezbollah in Lebanon, for example, are known to use access to health services that the government does not provide towards political goals. According to Vanessa Kerry et al., "In many parts of the world, poverty, inequity based on ethnicity or sex, shoddy public infrastructure, and environmental degradation have resulted in poor health as well as political and social

¹³ Ibid.

¹⁴ Romero, Carlos A. "South-South Cooperation between Venezuela and Cuba." Translated by Suzanna Collerd. *South-South Cooperation: A Challenge to the Aid System?*, 2010, 107-14. IBON Books.

¹⁵ Ibid.

¹⁶ Ibid.

instability.”¹⁷ However, it is also worth thinking about the relationship *between* health and political and social instability.

Poor health care access and a government’s inability or unwillingness to improve it may be the cause of social unrest that could even result in riots or protests. This can be seen anywhere from the aforementioned Lebanon example to the Affordable Care Act (Obamacare) fiasco in the United States today¹⁸.

In Cuba, medical diplomacy holds a different kind of importance from other places since free access to quality health care is perceived as both a universal human right and the responsibility of the state as part of the “core values” of its 1959 revolution¹⁹. Perhaps the clearest statement that explains the concept is Che Guevara’s speech “On Revolutionary Medicine”, in which he states that the Cuban people “understood perfectly that the life of a single human being is worth a million time more than all the property of the richest man on earth”²⁰.

Unsurprisingly, however, this ideology brought about many difficulties. Immediately after the revolution, Cuba experienced a “medical brain drain” after nearly half of the doctors in the island fled for political reasons, lowering the “quality of specialized care” despite the fact that the “traditionally underserved population” especially in rural areas saw medical care improve in both quality and accessibility due to the new ideology and

¹⁷ Kerry, Vanessa Bradford, Sara Auld, and Paul Farmer. "An International Service Corps for Health — An Unconventional Prescription for Diplomacy." *The New England Journal of Medicine*, 2010. doi:10.1056/NEJMp1006501.

¹⁸ Kerry, Vanessa Bradford, Sara Auld, and Paul Farmer. "An International Service Corps for Health — An Unconventional Prescription for Diplomacy."

¹⁹ Feinsilver, Julie M. "Fifty Years of Cuba’s Medical Diplomacy: From Idealism to Pragmatism." *Cuban Studies* 41, 2010, 85-101. Accessed April 14, 2017. University of Pittsburg Press.

²⁰ Guevara, Ernesto Che. "On Revolutionary Medicine." 1999. Accessed April 21, 2017.

regime²¹. As a response to this new shortcoming, Cuba increased its focus on domestic medical education, and was extremely successful in increasing the number and quality of doctors on the island. Also, there exists the idea that after the revolution, Cuba had a duty to “repay its debt to humanity for the support it received... during the revolution”, which has led it to seek increased South-South geopolitical cooperation²².

By 1985, it had enough doctors not only to serve its own citizens, but also doctors specifically trained to send abroad for the purpose of engaging in medical diplomacy, and by 2008 it boasted one doctor per 151 inhabitants²³. However, it is also worth noting that Cuba had already sent doctors to Chile after a major earthquake as early as 1960, and that by 1963 it had also dispatched 56 medical personnel to Algeria despite the embargo that had been enacted by the United States in response to the revolution²⁴. Since adherence to revolutionary values is of utmost importance to the Cuban government, it has consistently worked to improve health conditions both domestically and internationally with differing political goals, and now boasts a model of health care praised by the WHO and that has incredibly efficient results (such as a comparable life expectancy at birth to the United States). Internationally, this success can be seen in the fact that Cuba had in 2009 “some 40,000 personnel in 74 countries – more than all of the G-8 countries combined” despite it being a developing Caribbean island nation²⁵.

²¹ Kirk, John M., and H. Michael. Erisman. *Cuban Medical Internationalism: Origins, Evolution, and Goals*. New York: Palgrave Macmillan, 2009.

²² Feinsilver, Julie M. "Fifty Years of Cuba's Medical Diplomacy: From Idealism to Pragmatism."

²³ *Ibid.*

²⁴ *Ibid.*

²⁵ Kirk, John M. "Cuba's Medical Internationalism: Development and Rationale." *Bulletin of Latin American Research* 28, no. 4 (October 2009): 497-511. Accessed April 14, 2017. doi:10.1111/j.1470-9856.2009.00314.x.

*Cuba's impact on the health of populations across the world: Aid, Services and
Education*

For the purpose of this research project, it is useful to further explore the effects Cuban medical aid and education has had on an international level, leading to Cuba's perception as an altruistic state from its widespread medical internationalism and how this perception has led to increased geopolitical power and influence. Cuba's various brigades and deployments, explored in more depth shortly, have resulted in "considerable bilateral and multilateral symbolic capital" for Cuba on the international scene²⁶. Since 1961, more than 130,000 medical professionals have been deployed to more than 107 countries, treating more than 130 million patients²⁷. To put this number in perspective, Cuba's entire population today is only 11.27 million.

This has helped create a perception of Cuba as "technologically sophisticated" and "morally superior", and has resulted in praise by the WHO and the UN²⁸. In fact, likely due to its extensive medical diplomacy and humanitarian mission, nations across the world had largely been in disagreement with the U.S. embargo and have voted in disagreement with it in the United Nations, with only Israel and Palau agreeing with the U.S. policy²⁹. In this way, Cuba has garnered international support rivaling even the United States in the international scene, a much more powerful nation, through its notable efforts in foreign policy through soft-power medical diplomacy and its helping of developing countries in the health sector.

²⁶ Feinsilver, Julie M. "Fifty Years of Cuba's Medical Diplomacy: From Idealism to Pragmatism."

²⁷ Ibid.

²⁸ Ibid.

²⁹ Ibid.

A useful example of Cuban aid to a foreign government that clarifies its foreign policy interests is a natural disaster that the whole world pulled together to alleviate: the 2010 earthquake in Haiti. After the earthquake in the impoverished island nation, Cuba sent a medical brigade of sixty doctors to help with disaster relief in addition to the 400 medical personnel that it already had in the country, and the 500 Haitians that had received Cuban medical education³⁰. Not only were they the first to react, but also by the 3-week-mark over 3,000 surgeries had been conducted, 280 babies delivered, and nine rehabilitations wards established³¹. However, the proximity of Haiti does not mean that Cuba has not been active in medical diplomacy focusing on disaster relief in other places.

Cuba has also deployed medical brigades to China due to an earthquake in 2008, Bolivia after floods in the same year, Peru after its December 2007 earthquake, Indonesia after its 2004 tsunami³². Furthermore, its medical brigades are not limited to natural disasters but also disasters caused by man. This can be seen in the fact that it has medically treated almost 20,000 children from Ukraine, Russia and Belarus after the Chernobyl disaster in the Tarará beach resort outside of Havana, which it even managed to turn into a treatment center³³.

Operation Miracle

³⁰ Feinsilver, Julie M. "Fifty Years of Cuba's Medical Diplomacy: From Idealism to Pragmatism."

³¹ *Ibid.*

³² *Ibid.*

³³ Kirk, John M., and H. Michael. Erisman. *Cuban Medical Internationalism: Origins, Evolution, and Goals*. New York: Palgrave Macmillan, 2009.

Yet another important project undertaken by Cuba has been Operation Miracle. Operation Miracle is “an international Cuban public health campaign that [sought] to restore vision to 6 million people in the underdeveloped and developing world by 2016”, and from the operation’s beginning in 2014 up to 2011, Cuban doctors were responsible for more than 2 million free vision restoration operations in 35 countries³⁴. This further exemplifies the reach and quality of Cuban medical care abroad, as well as its mission to use medical diplomacy and medical internationalism to solidify its socialist ideology abroad and domestically.

This solidification of socialist ideology can be seen in the fact that disabled peoples are often marginalized or ignored in terms of policy regardless of the level of development of a country³⁵. Given this, it is not difficult to see how Operation Miracle was executed by Cuba both to showcase an ideological importance for good health while at the same time calling attention to its actions, as it is less developed than other countries that could have engaged in similar efforts, but did not.

Education

Another important factor of Cuban medical diplomacy has been that of education. By using access to medical education as a bargaining tool, Cuba has not only been able to improve the world’s global health scene by training skilled doctors that then work in underserved areas in numerous countries, but also helped establish a direct relationship

³⁴ Kirk, Emily. "Operation Miracle: A New Vision of Public Health?" *International Journal of Cuban Studies* 3, no. 4 (2011): 366-81. JSTOR.

³⁵ “Disabled People and Operation Miracle.” Interview by Juan Herzberg and Tchaurea Fleury.

with those countries through the youth, who also become proficient in Spanish and learn about Cuban culture through immersion.

This medical education comes in the form of scholarships that are provided every year for students from around the world to study medicine, nursing, and other medical professions in Cuba, most notably in the Escuela Latinoamericana de Medicina in Havana. This school enrolls “low-income students who commit to practice medicine in underserved communities in their home countries on graduation”³⁶. Internationally, Cuba has also helped establish medical schools with great involvement in Yemen in 1976, Guyana in 1984, Ethiopia in 1984, Uganda in 1986, Ghana in 1991, Guinea Bissau in 2004, East Timor in 2005, and many more³⁷. It is worth mentioning, however, that the reach of this educational focus is particularly visible in Venezuela, where Cuba trained 40,000 doctors and 5,000 health care workers as well as providing cost- free education for over 10,000 Venezuelans to study medicine in Cuba³⁸.

Oil-for- doctors trade agreements with Venezuela

Until this point, Cuba’s medical aid has largely been analyzed in terms of its “humanitarian” focus that regardless has helped it garner geopolitical power and influence as can be seen in the case with the UN votes on the U.S. embargo. However, recently there has been a much more direct connection between medical diplomacy and economic

³⁶ Feinsilver, Julie M. "Fifty Years of Cuba’s Medical Diplomacy: From Idealism to Pragmatism."

³⁷ Kirk, John M., and H. Michael. Erisman. Cuban Medical Internationalism: Origins, Evolution, and Goals.

³⁸ Feinsilver, Julie M. "Fifty Years of Cuba’s Medical Diplomacy: From Idealism to Pragmatism."

improvement through Cuba's relationship with Venezuela and its "oil-for-doctors" trade agreements.

Before being able to understand the modern political relationship between Cuba and Venezuela, it is necessary to understand the historical reasons as to why Venezuela became Cuba's main trading partner despite the fact that the United States is less than 100 miles away. After the U.S. embargo was put in place due to Fidel's socialist political decisions, Cuba was not in a precarious position only due to its new relationship with the Soviet Union, and the island enjoyed several decades of prosperity. However, after the fall of the Soviet bloc in 1989, "the 60% decline in Cuba's gross domestic product [was] one of the steepest ever recorded"³⁹. This is unsurprising, given that during the three decades following the revolution, "70% to 90% of Cuba's international trade was with the former Soviet bloc"⁴⁰. The United States perceived this difficulty and started working under the framework that heavy economic pressure could result in political regime change in Cuba⁴¹. This led Washington to make the embargo even harsher by passing the "Cuban Democracy Act", which banned "all U.S. subsidiary trade, including trade in food and medicines" with detrimental effects to Cuban people, including under-nutrition⁴². It is also worth mentioning that health was also affected in different ways even in the everyday life of

³⁹ Garfield, Richard, and Sarah Santana. "The Impact of the Economic Crisis and the US Embargo on Health in Cuba." *American Journal of Public Health* 87, no. 1 (January 1997): 15-20. Accessed April 15, 2017.

⁴⁰ *Ibid.*

⁴¹ Drain, Paul K., and Michele Barry. "Fifty Years of U.S. Embargo: Cuba's Health Outcomes and Lessons." *Science* 328, no. 5978 (April 30, 2010): 572-73. Accessed April 13, 2017. doi:10.1126/science.1189680.

⁴² Garfield, Richard, and Sarah Santana. "The Impact of the Economic Crisis and the US Embargo on Health in Cuba."

Cuban citizens, since various medicines that were only produced or had to come through the United States no longer could make their way into the island legally.

However, despite the fact that the collapse of the Soviet Union in 1991 proved to be detrimental to Cuba's economy and resulted in an economic crisis that made the 1990s a difficult "special" period for Cuba, when Hugo Chávez came to power, he ushered in "a new era of preferential trade and aid agreements" that saved Cuba from these trying economic times⁴³.

While free universal healthcare had long been "a critical pillar of the revolutionary project" under the Castro regime's Marxist-Leninist model, soon after the 1999 election of Chávez "Fidel Castro convinced him of the effectiveness of this peculiar mechanism"⁴⁴. Although "the collapse of the Soviet bloc and the preferential trade agreements therein led to a temporary decline in the breadth and depth of Cuba's international medical assistance programs", then, the coming to power of Hugo Chavez gave Cuba "both the financial and moral support to vastly further its medical diplomacy programs" thanks to new oil agreements that greatly improved its economic stance⁴⁵.

Despite the fact that the 1990s saw Latin American countries (except for Cuba) shift their focus and view health care "less as a social right and more as a market commodity", since 2003 Venezuela decided to engage in reforms, and the Misión Barrio

⁴³ Feinsilver, Julie M. "Fifty Years of Cuba's Medical Diplomacy: From Idealism to Pragmatism."

⁴⁴ Werlau, Maria C. "Cuba-Venezuela Health Diplomacy: The Politics of Humanitarianism." *Cuba in Transition- ASCE*, 2010, 1-18. Accessed April 14, 2017. <http://www.ascecuba.org/c/wp-content/uploads/2014/09/v20-werlau.pdf>.

⁴⁵ Feinsilver, Julie M. . "Oil-for-Doctors: Cuban Medical Diplomacy Gets a Little Help From a Venezuelan Friend." *Nueva Sociedad*, July & aug. 2008, 1-14. Accessed April 14, 2017.

Adentro (Inside the Neighborhood Mission) was a notable part of this reform⁴⁶. This mission sought to improve health conditions particularly in impoverished Venezuelan communities, and it is incredibly important not only because Venezuela would be forced to seek external support from Cuba in order to achieve it, but also ideologically. This mission represents an ideological shift that is much closer to Cuba's deep support for free, quality universal health care than that in most other Latin American nations, which also served to strengthen diplomatic ties and the personal relationship between Castro and Chávez. This is especially important considering that Chávez considered Castro his "revolutionary mentor", and although Fidel had already tried to seek "financial support and oil" from Venezuela's president Rómulo Betancourt in 1959 seeing the not-so-bright future of U.S.- Cuba relations in 1959, it is Chávez that eventually provided it⁴⁷.

Due to the fact that Venezuela lacked the trained medical professionals to make their new health vision possible, it requested Cuban assistance through trade agreements in 2000 and 2005. The 2005 agreement alone included "30,000 medical professionals, 600 comprehensive health clinics, 600 rehabilitation and physical therapy centers, 35 high technology diagnostic centers, and 100,000 ophthalmologic surgeries" in addition to extensive training of more than 55,000 Venezuelans in exchange for the provision of a "fixed number of barrels per day (53,000)", a resource which Venezuela is not lacking⁴⁸.

⁴⁶ Muntaner, Carles, René M. Guerra Salazar, Joan Benach, and Francisco Armada. "Venezuela's Barrio Adentro: An Alternative to Neoliberalism in Health Care."

⁴⁷ Feinsilver, Julie M. "Oil-for-Doctors: Cuban Medical Diplomacy Gets a Little Help From a Venezuelan Friend."

⁴⁸ Ibid.

Eventually, this number grew to “100,000 barrels of oil per day to Cuba, discounted by as much as 40 percent”⁴⁹.

The respective benefits of these trade deals for both countries are not difficult to see in numerical data. In 2008, Venezuela’s Health Minister reported that thanks to “Barrio Adentro”, 360 million medical consultations had been conducted⁵⁰. As if this was not staggering enough, immediately before the election of Chávez “5 million primary care visits had been handled”, while by the end of 2008 after the Cuba agreements this number had grown to 60 million⁵¹. As for Cuba, economically, this is slightly more complicated due to the regime’s manipulation of data to maintain a strong belief in socialist ideology. This means that Cuban government officials “obscure the fact that Cuba actually receives payment for many of the medical services, at least those delivered in many countries”, which makes it difficult to discern what percentage of Cuban exported medical services are donations and what percentage is paid for⁵². However, some things remain clear and undeniable. As Werlau straightforwardly puts it, “Cuba does receive compensation”, and that compensation “has grown to a very high percentage of Cuba’s GDP” as shown by “a steady and exponential rise in services exports from US\$2.8 billion in 2003 to US\$8.6 billion in 2008”⁵³.

⁴⁹ Kickbusch, Ilona. "Global Health Diplomacy Understanding the Health and Foreign Policy Relationship in a global world."

⁵⁰ Werlau, Maria C. "Cuba-Venezuela Health Diplomacy: The Politics of Humanitarianism."

⁵¹ Werlau, Maria C. "Cuba-Venezuela Health Diplomacy: The Politics of Humanitarianism."

⁵² Ibid.

⁵³ Ibid.

Cuba and Venezuela's Involvement in Bolivarian Alternative for the Americas (ALBA)

Another reason why Hugo Chávez decided to help Cuba was also to increase both Venezuela's and Cuba's geopolitical power through their membership in the Bolivarian Alternative (ALBA), which sought to "unite and integrate Latin America in a social justice-oriented trade and aid block under Venezuela's lead"⁵⁴. This is important because it is exactly this that allowed for "preferential pricing for Cuba's exportation of professional services in return for a steady supply of Venezuelan oil, joint investments in strategically important sectors for both countries, and the provision of credit", amongst other things⁵⁵. Therefore, rather than see the ALBA as a mere body of economic cooperation, it is worth analyzing it as a vehicle through which Latin American countries have sought increased geopolitical power and influence without the need for dependence on world powers like the United States. In fact, the very name of the ALBA in Spanish makes a reference to this Latin-American unity, since it translates to "Bolivarian alternative for the Peoples of *our* America".

The ALBA, defined by Backer and Molina as "the command economy alternative to the free trade model of globalization", is "one of the greatest and least understood contributions of Cuba to the current conversation about globalization and economic harmonization"⁵⁶. Although it developed as a movement to showcase Latin American prowess despite U.S. politics, it is now "critically grounded on the idea that

⁵⁴ Feinsilver, Julie M. "Oil-for-Doctors: Cuban Medical Diplomacy Gets a Little Help From a Venezuelan Friend."

⁵⁵ Ibid.

⁵⁶ Backer, Larry Catá, and Augusto Molina. "Cuba and the Construction of Alternative Global Trade Systems:ALBA and Free Trade in the Americas ." *Pennsylvania Journal of International Law* 31, no. 3 (August 1, 2009): 101-69. Accessed April 16, 2017.

internationalization must be effected through states and public action rather than individuals and private markets”, yet another ideological difference from the United States economic position of free market and private enterprise⁵⁷. This, for Venezuela in particular, means that better access to health services provided by the state is highly desirable.

As early as 2004, the ALBA was already giving “a more regional flavor to the relationship between the two countries” by showcasing the importance of Latin America, and supporting the idea that the “cooperation between the Republic of Cuba and the Bolivarian Republic of Venezuela [would] be based... not only on the principles of solidarity... but also on the exchange of goods and services to the greatest degree possible,” since Cuba and Venezuela were its founding members⁵⁸. Projects related to this relationship include “‘grand-national’ companies such as Constructora Alba, PDVSA-Cuba S.A., [and] the Alba Steel Mill project” as well as Cuban-Venezuelan cooperation for agricultural development, rail companies, “foreign exchange financing agreements” thanks to the Venezuelan Industrial Bank, and deals pertaining to “tourism promotion and air and maritime services” like open skies status, amongst others⁵⁹.

Thanks to this, trade between Cuba and Venezuela increased from US\$388.2 million in 1998 to US\$7.1 billion in 2007, almost 45% of the island’s total trade of goods⁶⁰. In terms of aid from professional services, oil subsidies, and other cooperation projects, Cuba has benefited from US\$18 billion from Venezuela since 1999⁶¹.

⁵⁷ Ibid.

⁵⁸ Romero, Carlos A. "South-South Cooperation between Venezuela and Cuba."

⁵⁹ Ibid.

⁶⁰ Ibid.

⁶¹ Ibid.

The geopolitical significance of these numbers and the strategic attitude of Cuba in ALBA perfectly show how, despite economic pressure from the United States, Cuba has not only developed sustainably but actually grown as an economy albeit not as quickly as it could with a different historic relationship to the United States. In fact, Cuba has been able to “relate its own experience with those of the newly emerging Left in Latin America and the Caribbean, which began to flourish first in Venezuela” and this ability led to “joint participation in ALBA, the development of an important socio-economic exchange, the creation of a complex cooperation process, and the promotion of socialism”⁶².

These goals, decidedly, are far more mindful of geopolitical influence especially in Latin America than those Cuba would have been able to have if it needed to be mindful of foreign relations with the United States, and have provided a completely different trajectory for the development of its foreign affairs in which Cuba has managed to serve as a leader⁶³. Now, the relationship between these two countries is responsible for “1% of Venezuela’s gross domestic product (GDP)” as well as “bilateral trade growth of 81% between 2008 and 2009,” which essentially saved the Cuban economy after the Special Period of the 1990s⁶⁴.

Conclusion

To conclude, the role that medical diplomacy has played in Cuba’s worldwide geopolitical influence since its 1959 revolution cannot be understated. Furthermore, the

⁶² Ibid.

⁶³ Erikson, Daniel. "Cuba, China, Venezuela: New Developments." Association for the Study of the Cuban Economy, November 30, 2005, 410-18. Accessed April 14, 2017.

⁶⁴ Romero, Carlos A. "South-South Cooperation between Venezuela and Cuba."

rise to power of Hugo Chávez in Venezuela and the positive changes this meant for Cuba-Venezuela foreign affairs not only saved Cuba from trying economic times in the 1990s, but also solidified socialist ideology by creating a direct link between the idea of quality health care as a universal right in Cuba and abroad and economic advancement in the form of oil from Venezuela as well as praise from international bodies. As Feinsilver put it, “Medical diplomacy has been a critical means of gaining prestige and goodwill (symbolic capital), which can be translated into diplomatic support and trade or aid (material capital)”⁶⁵.

Despite the successes of Cuba in medical diplomacy, it is also worth talking about one major shortcoming in the available data and current discourse on the topic: the doctors themselves, without whom medical diplomacy would not be possible. Although “health workers' devalued salaries in a dual economy are a substantive incentive to volunteer for missions abroad” in the case of Cuba, serving in medical diplomacy is not an easy thing for many doctors to do⁶⁶. Although the costs of this kind of medical internationalism in Latin America are at least covered by Venezuela for both “medical services and education” within Venezuela and in neighboring countries (notably Bolivia), Cuban doctors' salaries are only US\$183 per month⁶⁷. Werlau's literature highlights this issue when she calls Cuban health professionals the “highest qualified slave labor force in the world”, since their salaries are not only abysmal for medical professions but they are also often “sent to

⁶⁵ Feinsilver, Julie M. "Oil-for-Doctors: Cuban Medical Diplomacy Gets a Little Help From a Venezuelan Friend."

⁶⁶ Blue, Sarah A. "Cuban Medical Internationalism: Domestic and International Impacts." *Journal of Latin American Geography* 9, no. 1 (2010): 31-49. Accessed April 15, 2017. doi:10.1353/lag.0.0071.

⁶⁷ Feinsilver, Julie M. "Oil-for-Doctors: Cuban Medical Diplomacy Gets a Little Help From a Venezuelan Friend."

far-flung areas where local workers refuse to work due to insecurity, remoteness, low salaries, poor conditions and inadequate food”⁶⁸.

Cuban doctors, in fact, are no strangers to difficult conditions. In her interview, Maité Llanos spoke of the program Más Médicos, which is a Brazilian program that sought to cooperate with Cuban doctors under ALBA. An overlooked cultural reality, however, was that in Brazil doctors and other medical personnel are made up of a white elite, and they mostly seek to work in the capital or other big cities⁶⁹. Cuban doctors, on the other hand, are sent to underprivileged areas as part of Cuban socialist ideology. This resulted in widespread racism, where some Brazilians were hesitant or unwilling to be treated by doctors of color even if they had every qualification to treat an illness.

In Venezuela, this is particularly significant, as political instability has resulted in the murder, assault, or rape of Cuban medical professionals due to placement in “crime-infested areas”⁷⁰. From 2003 to 2010 alone, 68 Cuban doctors had died during their tours of duty in Venezuela, likely due to the lack of safety in their respective regions. It is also worth mentioning that in February 2010, “seven Cuban doctors and one nurse residing in the U.S. and formerly in Venezuela” filed a lawsuit in the state of Florida against Cuba, Venezuela and Venezuela’s state-run oil company (PDVSA) for “forcing them to work against their will” to “help repay Cuba’s oil debts to Venezuela”⁷¹.

⁶⁸ Werlau, Maria C. "Cuba-Venezuela Health Diplomacy: The Politics of Humanitarianism"

⁶⁹ “Más Médicos, Research, and Development.” Interview by Juan Herzberg and Maité Llanos.

⁷⁰ Werlau, Maria C. "Cuba-Venezuela Health Diplomacy: The Politics of Humanitarianism".

⁷¹ Ibid.

As for Cuban doctors still working on the island, it is worth highlighting the advantages and disadvantages of working abroad. Although situations are often less than ideal, working abroad for Cuban doctors also represents several important benefits, like being able to even qualify to practice medicine abroad, as well as a better quality of life depending on where one gets sent⁷². However, even with a difference in pay rate, salaries for Cuban personnel are incredibly low by comparison to others in the field of medicine. Also, a big factor for Cuban doctors is the love for their country. Although the case of deserters is not unheard of during medical missions abroad, many in Cuba have a strong sense of nationalism despite the problems that plague the country, and doctors are not an exception. These cultural ties are often enough to push a doctor to prefer Cuba as a working place.

Lastly, it is worth mentioning to conclude that medical diplomacy is not without effects within the island of Cuba. Dr. Alcides Lorenzo, who served as the head of Cuba's National Group of Family Medicine before leaving to Mexico, stated in 2006 that, "most of the 31,000 doctors who in 2003 tended to family clinics all over the island had been sent abroad, creating a crisis in public health" due to an absence of doctors⁷³. This, although serving to advance medical diplomacy and fill oil needs, also actively hurts the socialist idea of readily- available care that Cuba is paradoxically trying to support elsewhere.

⁷² "Cuban Doctors' Opinions." Interview by Juan Herzberg and Anonymous Cuban Doctor.

⁷³ Werlau, Maria C. "Cuba-Venezuela Health Diplomacy: The Politics of Humanitarianism"

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