



Socialized Healthcare and  
Medical Internationalism:  
Cuba and the Coronavirus  
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Six months into the worldwide panic induced by SARS-CoV-2 and the calamitous consequences in its wake, a few countries are often mentioned in the world press among those which have been more successful in stemming the advance of the virus. These countries include South Korea, New Zealand, Taiwan, and Singapore. The supposition, it is very likely, is that countries which are still struggling to contain the virus may have something to learn from those which have (nearly) vanquished the virus, though countries, much like individuals, seem notoriously impervious to the idea that there are any 'lessons' to be drawn from history. Everyone likes to speak of the 'lessons of history', but the habit is ingrained enough in most that such lessons are deemed worthy of emulation by others though not by oneself. Moreover, that memorable adage which opens *Anna Karenina* comes to mind: 'All happy families are alike; each unhappy family is unhappy in its own way.'

One might complicate the narrative still more: barring New Zealand, the other three nations—and the sovereignty of Taiwan (formally, the Republic of China), let us recall, is disputed by the People's Republic of China—that I have mentioned fall within Southeast Asia, where, as many will argue, the historical memory of SARS (2003) played a role in preparing them for this iteration of the coronavirus's assault upon the human world. Some may therefore submit that the experience of these countries is at great variance from the experience of other nations. Similarly, barring South Korea, the other three nations are exceedingly small, and the

containment of epidemic disease has almost always been a greater challenge for more populous countries. The experience of China would, of course, appear to belie this claim, but understandably there are reasons to feel squeamish about putting forward China as a country that might be emulated in this connection. It is in China that the virus almost certainly originated, and there are substantial majorities in countries such as India, the United States, and Germany which, even as they may quietly marvel at China's success in squashing the virus after the first horrific scenes of its rampage through Wuhan had been flashed to the world, are clamoring to have China held responsible for the deep wounds that have been inflicted everywhere by COVID-19. Even those saner voices which rebel at the idea of holding one country accountable for a condition that has doubtless been precipitated by the reckless human advance upon reservoirs of nature are, nonetheless constrained to admit that China almost certainly was dissimulating in withholding information about the virus and the disease that it causes, from the rest of the world. Apart from all this, not every country is prepared, at least not yet, to follow the path of totalitarianism on which China seems set for the present.

It is in this connection that the near omission of Cuba from the global narrative that has come into shape around the coronavirus is altogether striking. As shall be presently seen, Cuba has been admirably successful in containing the virus, but there is comparatively little mention of it in the world press – certainly very little in comparison with the attention lavished upon the other aforementioned countries. While the United States exports arms, ammunition, and obesity – inducing diets to the rest of the world, Cuba has acquired a reputation the world over not just for its cigars but for its wholly unique corps of healthcare professionals. In the six decades since the revolution that overthrew the US-backed regime of Fulgencio Batista and brought Fidel Castro to power, and then turned Castro's comrade-at-arms, Che Guevara, into perhaps (besides Mohandas Gandhi) the world's most iconic figure of resistance to oppression, well over 400,000 Cuban doctors and healthcare workers have served abroad, rendered aid to countries at times of disaster and epidemics, and created what is unquestionably the most mobile force of medical professionals in history.<sup>1</sup>

To be sure, not everything is hunky-dory in this island nation, which lies around 100 miles to the south of Florida and has for the last 60 years resisted attempts by the

gigantic hegemon to its north to bend it to its will. The US, by its own admission, has maintained a comprehensive economic embargo against Cuba since 1962, and not hesitated to penalize and bully countries that have dared to violate or evade the sanctions that have to, varying degrees, been in place since the initial embargo was announced by President John F. Kennedy. A Central Intelligence Agency assessment in 1986 noted that the annual subsidy from the Soviet Union to Cuba, averaging in the first half of the 1980s to around \$4.5 billion, had shored up what was in every other respect a failing economy. This subsidy took various forms, from the Soviet Union importing 80 per cent of all Cuban sugar to generous and favourable terms of trade extended to Cuba and heavy Soviet investments in the Cuban economy.<sup>2</sup> The dissolution of the Soviet Union in December 1991 brought this period to an end and the withdrawal of Soviet aid, and the US has since taken various steps in attempts to throttle Cuba's economy, facilitate the country's collapse, and initiate what is called 'regime change'. To all these woes may be added the Communist party's own stranglehold on power—manifested in a tight control on economic activity, the containment of political dissent, and adroitness in using a propaganda machine aimed at enlisting the power of the people to help resist 'Yankee imperialism'.

Interesting and germane as is the history of communist Cuba's survival as an independent nation in the face of unremitting hostility from the US, its enviable success in containing the threat of COVID-19 contrasts sharply with the chaos that has unfolded in the US. It is difficult in the US, even for a purportedly liberal and cosmopolitan newspaper such as the New York Times, to admit as much and the coverage of Cuba's experience with COVID-19 has been, as I have suggested, slight in the American media—an omission that appears all the more glaring when contrasted with the gushing admiration showered upon New Zealand and its young female prime minister. On 1 July 2020, Cuba had 2,348 cases and 86 deaths; this number had inched up to 2,608 cases and 87 deaths at the end of July. At the end of August, the tally stood at a little over 4,000 cases and 100 deaths. New Zealand, which has a population of 5 million in comparison to Cuba's 11.4 million, has done marginally better than Cuba. It has approximately half the number of cases and one-fourth the number of deaths. Both countries, after an initial spike, had been remarkably successful in holding the number of deaths constant: though in mid-August the number of cases in both countries began to

rise once again, the virus is still remarkably under control and far from entering the community transmission stage. But the comparison is also misleading in at least two respects: first, with a GDP per capita that is five times larger than that of Cuba, New Zealand has far greater resources at its command to tackle the threat from the pandemic; and, secondly, Cuba continues to remain under an economic blockade that has curtailed the supply of medicine, medical equipment, and other essential goods. A group of 'UN human rights experts', supported by independent experts and groups, was moved in late April to call upon the US to lift the blockade noting that 'the impact of the comprehensive embargo has imposed additional financial burden, increased cargo travel time due to an inability to procure supplies, reagents, medical equipment and medicines necessary for the diagnosis and treatment of COVID-19.' These UN special rapporteurs pointedly remarked that 'the lack of will of the US Government to suspend sanctions may lead to a higher risk of such suffering in Cuba and other countries targeted by its sanctions.'<sup>3</sup>

When the first case of COVID-19 in Cuba was detected on March 11, the country already had in place an elaborate plan to counter the threat of the virus; indeed, it may be said that Cuba has been well prepared for such emergencies for decades, having shown the way to the rest of the world not only through its consistent commitment to public healthcare expenditures but its expeditious if understandably controversial response to the AIDS crisis. Some commentators have argued that the country's commitment to public health can be seen from the outset of the revolution, in concerted efforts to improve literacy, nutrition, sanitation, and housing for the working class, and an article published in the socialist journal, *Monthly Review*, appears to offer what may justifiably seem to some as an idealized representation of the revolution's healthcare goals in suggesting that 'Che Guevara taught Cuba how to confront COVID-19.'<sup>4</sup> The article points to Che's nine-month break from medical school in 1951-52 to gain, among other things, practical experience of leprosy that is chronicled in his *Motorcycle Diaries*, though he and his companion, Alberto Granado, were far from being the international leprosy experts for whom they were sometimes mistaken by villagers.<sup>5</sup> If the halo around Che in some circles, and contrariwise the American-led efforts to cast his life as one of unmitigated and spectacular failure,<sup>6</sup> suggest that a nuanced assessment of Che's place in shaping the

priorities of the revolution is entirely outside the scope of this brief essay, what seems to be relatively more indisputable is Cuba's success in having achieved milestones in healthcare that are not merely significant but a model to the rest of the developing world. In a densely compact report published in January 2016, the greatly respected *Lancet* notes the changes in the Cuban health system over the last several decades, registering shifts in emphasis in infectious diseases, community care, and chronic diseases, but suggesting that throughout, Cuba did not diverge from the objective of securing preventive care. The report states unequivocally that 'health became a major priority' since 'the regime came into power in the 1960s' and that the emphasis on preventive care has 'paid off.'<sup>7</sup>

To gauge what circumstances have permitted Cuba to halt the advance of the coronavirus, it is also necessary to revisit the country's experience with infectious diseases. Cuba had set up a National AIDS Commission in 1983, well before AIDS arrived on the island in 1986, and all foreign-derived blood products were destroyed. As one scholarly study notes, 'although this action put a strain on the country's blood supply, it enabled Cuba to escape transmission of HIV to hemophiliacs and other blood recipients.'<sup>8</sup> The government also instituted a system of mandatory isolation for persons suspected of suffering from a communicable disease, and sanatoriums were established, first in Havana and then extended to the rest of the country, for the forcible confinement of HIV-positive individuals. The sanatoria have been credited with helping control the epidemic; others have criticized them as prisons.<sup>9</sup> By the early 1990s, Cuba had around 200 AIDS cases, while New York, which had roughly the same population, had 43,000 cases. In 1994, the system of compulsory confinement to a sanatorium was relaxed, but other stringent regulations have been retained. Pregnant women must undergo an HIV test; HIV-positive people are required to provide the names of all their sexual partners in the last six months, and each of those persons is required to take an HIV test; and patients released from a sanatorium must similarly continue to report to a physician at periodic intervals for education and counseling. Cuba developed its own HIV diagnostic test in 1987 and has since 2001 produced anti-retroviral drugs which are administered free to HIV-positive patients. It is not surprising, in view of these circumstances, that even as ethical concerns arise from the harshness of some of the country's regulations, including the forcible quarantining of HIV infected people, what impresses most is Cuba's

success which has been virtually ‘unmatched anywhere in the world.’ In Cuba, concludes one scholar, ‘the collective community is protected by sacrifices made by the individual. Judging by statistics, there is little doubt that if other countries around the world had adopted Cuba’s program twenty years ago, it would have saved millions of lives.’<sup>10</sup> The aforementioned 2016 report in *The Lancet* provides other startling figures—for example, there has been a decline in Cuba in infant mortality of 40 per cent since the 1960s, ‘even as the basic economy remained flat. . . . Today, Cuba’s infant mortality rate is lower than that of the USA.’<sup>11</sup>

Sometime in January 2020, the Cuban government, having taken the warning signs emanating from China seriously, put into place a ‘prevention and control’ plan, one also facilitated by the nearly unique system of community healthcare already prevalent in the country.<sup>12</sup> Cuba has the highest number of doctors per capita in the world: 84.5 for every 10,000 inhabitants, while India, China, Brazil, the United States, the United Kingdom, and Sweden have 8.5, 20, 22, 26, 28, and 40, respectively.<sup>13</sup> These figures, unless parsed further, do not sufficiently reveal the immense gap between Cuba’s investment in public healthcare and the appalling, indeed one should say criminal, neglect of it in many countries—especially a country such as India. There are no private medical practitioners in Cuba; in India, on the other hand, the state has increasingly withdrawn from critical social services, leaving most people to fend for themselves. The average of 8.5 doctors for every 10,000 inhabitants in India does not reflect the enormous and still widening discrepancies in accessibility to healthcare between the poor and the affluent, and between those in rural areas and the urban-dwelling population; nor does it reflect the fact that accessibility is a function of both proximity and affordability.

Cuba similarly outstrips every other country in apportioning nearly 13 per cent of its GDP for healthcare. Each neighbourhood is assigned at least one general practitioner and one nurse, and medical personnel are almost always on intimate terms with their patients, living in the very neighbourhood, comprising generally of 150–200 families, that they serve. A little more than a week after the first case was reported on March 11, the government announced a ban on tourist arrivals — a much greater sacrifice than it may have been in other countries, since Cuba, operating under the chokehold that the US has applied for decades,

is heavily dependent on tourism for revenue and its foreign exchange reserves.<sup>14</sup> Community health surveys are carried out periodically, and in this instance, as has happened previously during dengue outbreaks, teams were dispatched to carry out door-to-door surveys to identify those with greater vulnerability to the virus, identify and test those with symptoms, and place those proven or suspected to be positive under quarantine. 'The whole organization of their healthcare system', a professor of government at an American university remarks, 'is to be in close touch with the population, identify health problems as they emerge, and deal with them immediately.'<sup>15</sup> It is in this manner that Cuba was able to prevent the virus from entering the community transmission stage. A more critical assessment of Cuba's methods, while dwelling on the country's success in battling COVID-19, argues that what has been debated in some other countries — 'whether you should wear masks, what that means for your freedom, whether people should be tested, or they should remain at home or be treated' — is in Cuba not debatable at all, and violation of the rule requiring the use of masks can lead to a fine and, after multiple offenses, a prison term.<sup>16</sup> But requiring people to wear face masks is, or has been, mandatory in over 50 countries, including Austria, the Czech Republic, Israel, Argentina, Luxembourg, Germany, France, and Jamaica — none of these being countries that critics of Cuba would deign to characterize as 'fascist' or 'authoritarian' states.

In considering Cuba's success in keeping the virus at bay, a few simple facts merit mention or reiteration. First, healthcare in Cuba is universal and free, no mean accomplishment for any country in the world. Secondly, with its limited economic resources and comparative isolation, Cuba has displayed considerable wisdom in its investments in public health, literacy, and sanitation. Its achievement in containing the advance of the coronavirus is all the more admirable considering that the country faces a considerable housing shortage and that the system of queuing up for food and essential items at ration shops — a system known as *La Libreta* — means that the risk of infection increases just as it suggests that the enforcement of physical distancing poses difficulties that every country does not have to face.<sup>17</sup> Thirdly, the country has a history of showing a level of preparedness for public health emergencies from which most countries, and most particularly a behemoth such as the US which far from facilitating international cooperation has done everything possible to obstruct it, could take some cues.<sup>18</sup> Fourthly, the



system of community healthcare, which is at the same time interwoven into a national healthcare system that permits a rapid system of testing, tracing, treatment, and evacuation of the vulnerable, allows for a coherent system of response at every level. Fifthly, and most critically, notwithstanding the fact that some Cubans are bound to experience the regulations that have been imposed in the wake of the pandemic as an imposition, the majority of the people feel invested in the healthcare system and have shown that the problems posed by the coronavirus can only be tackled if there is some synergy between the state and civil society.

A more exhaustive account of Cuba's healthcare system and its success in meeting the immense challenge posed by the threat of the pandemic would bring other considerations to the fore, two of which may be mentioned by way of a conclusion. Contrary to the prevalent orthodox wisdom which grants full and unquestionable sovereignty to allopathic medicine, Cuban medical education and practice have also been hospitable to homeopathy.<sup>19</sup> Conventional physicians can do little more than express outrage or chuckle when they hear the word 'homeopathy', associating it with sugary pills, and the National Institutes of Health (NIH) in the US insists that 'there is little evidence to support homeopathy as an effective treatment for any specific health condition' just as the Federal Drug Administration (FDA) has not approved any homeopathic compound for medicinal use.<sup>20</sup> Considering the present state of the US, neither organization can be viewed as an undisputed fount of authority on such matters, and over 30 countries have sought to buy from Cuba supplies of PrevenzHo-Vir, a homeopathic immunological booster used to help prevent viral infections. (The Cuban pharmaceutical industry has also developed an allopathic drug, Interferon alfa-2b, that has previously been used for the treatment of certain types of cancer, hepatitis, and AIDS, and has now been used in China to treat COVID-19 patients, but that is another story – though it is worth noting that Cuba 'has now received requests for the product from 45 countries.'<sup>21</sup>) It may well be that the treatment is not in the least efficacious; nor would it be surprising if PrevenzHo-Vir, which Cuban authorities do not at all claim as a cure to COVID-19, should be dismissed by many as a form of quackery.

Some writers have argued that there is a record of Cuba having achieved some success in combating epidemics partly with the aid of homeopathy. One striking illustration of the homeoprophylactic approach, states a defender of Cuba's more ecumenical thinking on medical practice, is furnished by the greatly reduced incidence and control of leptospirosis, defined by the CDC as 'a bacterial disease that affects humans and animals caused by bacteria of the genus *Leptospira*', which struck Cuba in 2007 and was addressed in part by the administration of a homeopathic compound.<sup>22</sup> Homeopathy is not a mere afterthought in Cuba, a remedy sought in desperation, or a form of treatment taken in a spirit of defiant rejection of allopathic or mainstream medicine. The point here is a more complex one, taking us to the heart of the politics of knowledge that is at stake here: where allopathy has insisted on its full and complete sovereignty, as the only form of medical intervention derived from the scientific method, the exponents of homeopathy – and likewise of traditional Chinese medicine and Ayurveda – have a far more expansive and pluralistic view of what counts as science. In this respect, Cuba's integration of homeopathy into the curriculum of its renowned medical school, The Latin American School of Medicine, generally known by the acronym ELAM, is as far-reaching and radical as anything else that the country has done to secure the well-being of its people. What is also distinct to homeopathic practice, and aligns it more closely to the spirit embodied in the Cuban idea of healthcare revolving around neighbourhood doctors, is the kind of relationship it encourages between the doctor and the patient. As Paul Starr wrote in his magisterial work on the making of modern medicine, built on the edifice of a ruthless drive to weed out all competing systems, 'homeopathy stressed the need for sympathetic attention by the physician and individualized diagnosis and treatment of patients.'<sup>23</sup>

This essay commenced with an invocation of Cuban medical internationalism and it is fitting that it should conclude on the same note. Cuban medical missions date back to 1960, when an earthquake struck Chile, and have since firmly established Cuba as a global health leader. The story has been told often of the 10,000 Cuban medical professionals who volunteered for a mission to West Africa during the Ebola outbreak, 260 of whom were selected to work, in the World Health Organization's own assessment, 'under very demanding conditions'.<sup>24</sup> Whatever one's view of the Obama administration, it had the decency to recognize the

stellar work of the Cuban medical mission, which is credited with having worked effectively in Guinea, Sierra Leone, and Liberia to reduce the patients' mortality rate from 50 per cent to 20 per cent.<sup>25</sup> The editorial board of the New York Times, no friend of Cuba, wrote at the time in grudgingly admiring terms that 'Cuba stands to play the most robust role among the nations seeking to contain the virus. Cuba's contribution is doubtlessly meant at least in part to bolster its beleaguered international standing. Nonetheless, it should be lauded and emulated.'<sup>26</sup>

What is insinuated here, namely that Cuba's medical internationalism is primarily a form of cultural capital sought by a largely or wholly discredited nation, which is also desperate for foreign exchange reserves, is given substantially more weight by critics who, apart from the general animosity harboured against the communist state, have taken the island nation to task for the violation of rights of patients and the labor rights of physicians. Cuban doctors, for instance, are only permitted to retain a small portion of the wages they earn overseas for themselves, having to transmit the rest to the state, but this criticism entirely overlooks the fact that their education is entirely subsidized by the state.<sup>27</sup> That is a far cry from the predatory practices of American medical schools where an MD degree would typically set a student back \$250,000 – one reason among others why ELAM's graduates include Americans among other international students.<sup>28</sup> One could with good reason, similarly be just as critical of Cuba as I have been of China in its draconian deployment of measures to contain the virus, but such criticisms must also show some awareness of the extraordinary resilience with which Cuba has faced the depredations of its neighbor el norte. In the present crisis, it has certainly done far more than the US in showing the way both to international cooperation and the way out of the pandemic – from its acceptance of a British ocean liner with 50 virus - stricken passengers and crew aboard that no other country was willing to allow to dock, to its dispatch of medical teams to nearly 40 countries, commencing with China and Italy, where COVID-19 patients were treated.<sup>29</sup> John Donne's poem, 'No man is an island', is familiar to nearly everyone; but Cuba, a small island nation, suggests a more apt modification: an island is not always just an island, and may yet even be a continent.

## Notes and References:

- <sup>1</sup> Conner Gorry, 'Six Decades of Cuban Global Health Cooperation', *MEDICC Review* [International Journal of Cuban Health and Medicine] 21, no. 4 (October 2019), pp. 83–92, also online: <https://scielosp.org/article/medicc/2019.v21n4/83-92/en/>. A table of the principal Cuban medical missions to the world is to be found on p. 89. The most complete account of Cuba's unique place in the history of global medical cooperation is John M. Kirk, *Healthcare without Borders: Understanding Cuban Medical Internationalism* (Gainesville: University Press of Florida, 2015).
- <sup>2</sup> US Central Intelligence Agency, *The Cuban-Soviet Connection: Costs, Benefits, and Directions: An Intelligence Assessment* (June 1986), online: <https://www.cia.gov/library/readingroom/docs/CIA-RDP04T00794R000100080001-0.pdf>
- <sup>3</sup> UN News, 'Lift Cuba embargo or risk many lives lost to COVID-19, UN rights experts warn US' (30 April 2020), online: <https://news.un.org/en/story/2020/04/1062982>
- <sup>4</sup> Don Fritz, 'How Che Guevara Taught Cuba to Confront COVID-19', *Monthly Review* (1 June 2020), online: <https://monthlyreview.org/2020/06/01/how-che-guevara-taught-cuba-to-confront-covid-19/>
- <sup>5</sup> Patience A. Schell, 'Beauty and Bounty in Che's Chile', in *Che's Travels: The Making of a Revolutionary in 1950s Latin America*, ed. Paul Drinot (Durham: Duke University Press, 2010), p. 71 at pp. 53–87.
- <sup>6</sup> US Central Intelligence Agency, *The Life of Che Guevara: A Series of Failures* (September 1968), online: <https://www.cia.gov/library/readingroom/docs/CIA-RDP78-03061A000400030027-7.pdf>
- <sup>7</sup> Sam Lowenberg, 'Cuba's focus on preventive medicine pays off', *The Lancet*, Vol. 387 (23 January 2016), online: <https://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2816%2900155-0/fulltext?rss=yes>
- <sup>8</sup> Sarah Z. Hoffman, 'HIV/AIDS in Cuba: a model for care or an ethical dilemma?', *African Health Services* 4, no. 3 (December 2004), pp. 208–09, online: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2688320/>
- <sup>9</sup> Rebecca Sananes, 'Love, Loss and Beauty Pageants: Inside a Cuban HIV Sanitarium', *National Public Radio* (26 March 2016), online: <https://www.npr.org/sections/goatsandsoda/2016/03/26/471765424/love-loss-and-beauty-pageants-inside-a-cuban-hiv-sanitarium>
- <sup>10</sup> Hoffman, 'HIV/AIDS in Cuba'.
- <sup>11</sup> Lowenberg, 'Cuba's focus on preventive medicine pays off'.
- <sup>12</sup> Emily Morris and Ilan Kelman, 'Coronavirus response: why Cuba is such an interesting case', *The Conversation* (15 April 2020), online: <https://theconversation.com/coronavirus-response-why-cuba-is-such-an-interesting-case-135749>
- <sup>13</sup> WHO, 'Medical doctors (per 10,000 population)', data for 2018 for most countries, online: [https://www.who.int/data/gho/data/indicators/indicator-details/GHO/medical-doctors-\(per-10-000-population\)](https://www.who.int/data/gho/data/indicators/indicator-details/GHO/medical-doctors-(per-10-000-population))
- <sup>14</sup> Cuba's reliance on tourism is underscored in a report filed by a Miami-based American journalist that betrays the flamboyance of the Yankee imperialist typically derided in Cuba. 'On official state media like "Gramma", writes Tim Padgett, 'you will see headlines like: "Cuba has recovered and defeated the pandemic." The island has in fact reported fewer than 2,500 COVID-19 cases and fewer than 100 deaths. But whether or not Cuba has really subdued the new coronavirus, it's opening its doors again to foreign visitors.' The article is a sly attempt to question the official narrative stemming from Cuba, but its author might be better served critiquing the official narrative flowing out of the White House. See his 'Claiming "Recovery" From COVID-19, Cuba (Slightly) Opens The Door To Tourism', *WLRN* (2 July 2020), online: <https://www.wlrn.org/news/2020-07-02/claiming-recovery-from-covid-19->

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<sup>15</sup> Cited by Ed Augustin, 'Cuba sets example with successful programme to contain coronavirus', *The Guardian* (7 June 2020), online: <https://www.theguardian.com/world/2020/jun/07/cuba-coronavirus-success-contact-tracing-isolation>

<sup>16</sup> Joyce Hackel, 'As Cuba battles coronavirus, activists see an opening to protest police brutality', *The World* (28 July 2020), online: <https://www.pri.org/stories/2020-07-28/cuba-battles-coronavirus-activists-see-opening-protest-police-brutality>

<sup>16</sup> 'Coronavirus worsens Cuba's economic woes', *Deutsche Welle* (29 June 2020), online: <https://www.dw.com/en/coronavirus-worsens-cubas-economic-woes/a-53981899>

<sup>18</sup> Granma, the official voice of the Communist Party of Cuba, is forthright on this matter: 'United States officials are knowingly committing a crime, when in the midst of a pandemic they attack Cuba's international cooperation, seeking to deprive millions of people of the universal human right to healthcare services. . . . No country should assume it is large enough, rich enough or powerful enough to defend itself, isolating itself and ignoring the efforts and needs of others.' See Ministry of Foreign Affairs Statement, 'The COVID-19 pandemic makes clear the need to cooperate despite political differences', *Granma* (16 April 2020), online: <http://en.granma.cu/cuba/2020-04-16/the-covid-19-pandemic-makes-clear-the-need-to-cooperate-despite-political-differences>

<sup>19</sup> Fitz, 'How Che Guevara Taught Cuba to Confront COVID-19'.

<sup>20</sup> Nora Gámez Torres, 'Cuba promotes homeopathy as effective "weapon" against the coronavirus', *Miami Herald* (7 April 2020), online: <https://www.miamiherald.com/news/nation-world/world/americas/cuba/article241803371.html>

<sup>21</sup> Helen Yaffe, 'The world rediscovers Cuban medical internationalism', *Le Monde Diplomatique* (30 March 2020), online: <https://mondediplo.com/outsidein/cuban-medical-covid>

<sup>22</sup> Bill Graham, 'Cuba—The Country That Dares To Be Wise', n.d. [7 May 2020], online: <https://magicpillsmovie.com/cuba-the-country-that-dares-to-be-wise/>

<sup>23</sup> Paul Starr, *The Social Transformation of American Medicine* (New York: Basic Books, 1992), p. 97.

<sup>24</sup> Yaffe, 'The world rediscovers Cuban medical internationalism'.

<sup>25</sup> Peter Kornbluh, 'Cuba's Welcome to a Covid-19-Stricken Cruise Ship Reflects a Long Pattern of Global Humanitarian Commitment', *The Nation* (21 March 2020), online: <https://www.thenation.com/article/world/coronavirus-cuba-cruise-ship/>

<sup>26</sup> Quoted in *The Lancet* report, 'Cuba's focus on preventive medicine pays off'.

<sup>27</sup> Octavio Gómez Dantés, 'The Dark Side of Cuba's Health System: Free Speech, Rights of Patients and Labor Rights of Physicians', *Health Systems & Reform* 4, no. 3 (2018), pp. 175-82, also online—DOI: 10.1080/23288604.2018.1446275

<sup>28</sup> One American student's report on the medical education he received in Cuba makes for instructive reading: see Rich Warner, 'Is the Cuban healthcare system really as great as people claim?', *The Conversation* (30 November 2016), online: <https://theconversation.com/is-the-cuban-healthcare-system-really-as-great-as-people-claim-69526>

<sup>29</sup> See Yaffe, 'The world rediscovers Cuban medical internationalism', and Kornbluh, 'Cuba's Welcome to a Covid-19-Stricken Cruise Ship'.