

Values Revealed: COVID-19 in Cuba

CARLOS JESÚS DELGADO DÍAZ

The first case of COVID-19 was reported in Cuba on March 11, 2020. Since then, 2291 patients have been confirmed to have had the disease, with 1893¹ recovering and being discharged from hospital, and 84 deaths. 240 are currently hospitalized and another 516 suspected cases are in isolation due to epidemiological safeguarding (MINSAP 2020b). After exactly three months, the authorities announced the imminent limitation of the restrictions and the return, in stages, to normality (Martínez, 2020).

Between March 11 and June 11, Cuba undertook various acts of international solidarity. It welcomed a British-operated cruise as other countries denied it access to their ports since some of its passengers tested positive for coronavirus.² Cuban specialists journeyed to provide medical services and advice on COVID-19 to 26 countries (12 Caribbean, 5 Latin American, 5 African and 4 in Europe and the Middle East) (Argailot, 2020). Scientific research centers and the national pharmaceutical industry made medications and treatments available for all via the public health system. A new diagnostic test was developed, and research was undertaken to prove the efficacy of antiviral medications previously used for other illnesses. At the same time sufficient health facilities to attend to patients were ensured and people at risk were kept under observation at their homes (Prensa Latina 2020, Progreso Semanal, 2020, Yaffe 2020).

In the course of three months Cuba had successfully addressed the virus, significantly controlling the number of confirmed cases and fatalities without its health care system collapsing. Although it is too early to draw definitive conclusions, an analysis reveals that part of the Cuban success in facing COVID-19 is linked to an established collaboration between the public health system and national scientific institutes. The capacity to coordinate a close collaboration between public health officials, scientific bodies and the general population was itself sustained by the social recognition that science and medicine have traditionally enjoyed in Cuba. Confidence in the health system and the deep-rooted idea that adversity is overcome through shared 'collective' effort were both ideological elements consolidated before the pandemic.

The Cuban health system has had a humanistic tradition that emanates from the work of José Martí. Since the 19th century Martí linked the problems of health with those of nature and education (Martí, 1991, p. 298). Thus ethical and political ideals of humanistic thought were used to build a vocation for care and service in the health system after the social revolution of 1959. As part of this political process, health and the protection of life were constitutionally recognized as public goods, inalienable human rights (Constitution, 2020, articles 46, 69, 72, 90 clause i). In addition, since the 1960s, Cuba has invested in an international agenda based on cooperation and solidarity. The presence of Cuban specialists in natural disasters and medical emergencies in various corners of the planet has required the training of emergency specialists. Thus, the COVID-19 situation

¹ The hospital discharge criteria for COVID-19 in Cuba comprise receipt of treatment and subsequently testing negative, thus allowing for discharge, plus an additional 14 days testing negative.

² See: <https://www.thenation.com/article/world/coronavirus-cuba-cruise-ship/>

was faced by a country where international cooperation was not a novelty and where high-level specialists with certified experience were already equipped to deal with such emergencies.

The Cuban experience in dealing with Covid-19 has had its ups and downs, as is natural given the current social complexity. The supply and distribution of medical merchandise still poses one of the greatest challenges. It has been impossible to establish a market supply capable of meeting the needs of the moment. Infringements of social distancing on a mass scale were to be seen at sites of commercial activity. Added to the lack of goods were the closure of stores and the suspension of public transportation. The extraordinary situation of COVID-19 converged with social tensions among the public – perhaps underestimated- due to the experience of living through the economic crisis of the nineties and the more recent shortages of fuel and other goods caused by the renewal of the United States' embargo (bloqueo), which was not suspended during the pandemic (Veiga, 2020). To these circumstances and the public's tendency to stock up – always with an eye on present or potential future shortages- one must add the reiteration of an old problem: the inability to design effective forms of reorganization of services in order to meet people's needs.

These flaws were also revealed in the emerging electronic trade (i.e. smart phones), which suffered myriad peaks and troughs. Although communication technologies have made a positive difference facilitating (distanced) trade and payment options, these have been gradually and slowly introduced in Cuba during the period leading up to the pandemic. Government action encouraged the leadership of various actors, firstly scientists, then volunteers and diverse government agencies, such as the Ministry of Public Health, territorial entities, and civil defense.

In the state sector, there is no lack of negligence, inadequate control, and carelessness that foster crime. Under these circumstances, during the period prior to the pandemic, the illegality of certain forms of wholesale supply, provision, sale, and distribution of products was established. Though suddenly brought out into the open in the midst of the pandemic, these networks did not appear overnight; they were already in existence and point to the need to attend to these in the post-pandemic future. This is not a new phenomenon, nor can it be considered and dealt with simply as an infringement of the law by some self-seeking people. What is needed is to take into consideration the historical lesson of some analogous situations, such as the trade linked to the prohibition of alcohol in the United States. In the event of economic needs that are unattended to, automatically we see the creation of opportunities for individual actors and networks of production, distribution and trade—at once illegal, since they break the law, but also legitimate insofar as they satisfy economic needs. The crime committed by any one specific individual can be penalized by the law, but as long as the gray area is maintained intact, need will bring to light new actors to continue these practices that may differ in appearance, but which are no less law-breaking. Thus, the existence of these types of situations cannot be resolved solely by coercive means and the force of law. It is unavoidable and necessary to enforce existing law, but this also requires a consideration of what legitimate, unmet needs exist, and to conceive of the economic and legal actions that would cover them.

In despite of these challenges, the Cuban government has been constantly active while simultaneously giving space to concede to scientists and health specialists the leading role in societal communication, transparency in health-related decisions and the value of knowledge. The Cuban 'volunteer community', for its part, played a fundamental role (IPS, 2020). It has been driven by both the State and civil society, with broad participation from young people, with notable contributions from sportspeople, artists, university students, non-governmental organizations, churches, and community social research projects. (XinHua, 2020) This

volunteerism is neither complementary nor secondary. Without the active participation of volunteers, early identification of the first cases would not have been possible, neither would the isolation centers for people suspected of having the disease been maintained, nor many of the activities of a social nature such as active tracing, which involved the systematic participation of young people. The behavior of the public, the institutions, and civil society is the product of various decades of the revolutionary process and its socialist orientation.

Social communication and language also had their own particular features and contributed to the process. These comprised everything from memes to lessons, songs, and informational spots. Additionally, it is, to a certain degree, contradictory and controversial the belligerent way in which, at times, Cuba also resorted to calls to action using language such as “confrontation”, “struggle”, “battle”, and other such messages implying a vague call to arms, as if the health emergency were some sort of war against an invisible enemy. Linguistic nuances also reveal the ecological lacunae which were often manifested in the concerns of people for their pets and lives in general. Volunteers contributed actively to the translation of general messages into the communicative logic of people in their contexts—something that needs to be studied and increased in the future. There is still much to be done with regard to language, social communication, and dialog in order to bring out the lessons of the pandemic. The call for collaboration and mutual aid prevailed, and the work of health personnel was accompanied in the press, TV and social networks by writers and artists who sang about it.

A particular feature of Cuban cooperation can be seen in the fact that, throughout the period of restrictions, all labor activities that had financing, supplies and demand for their products were kept open. There was no total closedown of productive activities, nor a national quarantine that would have restricted free movement of citizens either absolutely or via permits. From the start, judicial and economic protections were instituted for workers and the state and non-state sectors of the economy. Quarantines were established in highly localized areas subject to the detection of foci of infection, with a return to social distancing while the spread of the virus was controlled. The actions of doctors and healthcare staff in general deserves a chapter in itself, as they managed to maintain the services necessary for the diversity of patients and illnesses, managing conditions to attend to emergencies arising from the start of the season of rains and hurricanes and responding to a health crisis in both a care-related and preventive manner. At the same time, active tracing placed the health system, thanks to the intensive work of staff, volunteers and the collaboration of citizens, in the position of not having to wait for patients to arrive with symptoms health institutions asking for help, but rather, they were able to detect them at their homes and provide them with the proper care.

Now that the initial impact of the pandemic has almost been overcome, the question becomes about the future: What does it hold for Cuba? The question of the future is a key one. Filled with a yearning for a lost past, language once more plays us for fools with talk of returning to normality, as if it were possible to recover a past state. In all earnestness, we should not wish or attempt to go back to normality. We have to come back to an uncertain future that needs to be changed on the basis of what we have learned about our vulnerabilities and with our eyes fixed on the uncertainty that this disease still holds in store and its effects on the country’s social and economic life. We have to come back to a future that needs to be changed in order to, perhaps, construct a new normality together. If COVID-19 represents a life crisis, we have no option, either in Cuba or worldwide, but to attempt a reorganization of life. This is an intense period that we have been fated to live in and it makes sense to contribute to making it better.

ABOUT THE AUTHOR

Carlos Jesús Delgado Díaz is a Philosopher, Professor of Philosophy, Master of Arts in Philosophy (State University of Belarus, 1983). Doctor in Philosophical Sciences (Cuba, 1992). Professor at the University of Havana (2000). Member of the Cuban Academy of Sciences (2012-2018, 2018-2022). Rector of the Edgar Morin Real World Multiversity (2015-2018). Dean of the UH Faculty of Philosophy and History (2013-2017). Vice President of the Cuban National Bioethics Committee. Vice President of the Cuban Philosophical Research Society. Coordinator of courses on Paulo Freire (UH) and Complexity (Havana). Author of articles published in journals and books in America and Europe and the books *Reinventar la educación* (Sao Paulo 2016, Mexico 2017, Havana 2017, Bogota 2018), *Filosofía, política y dialéctica en Materialismo y empiriocriticismo* (Havana, 2014), *Hacia un nuevo saber. La bioética en la revolución contemporánea del saber* (Havana 2007 y 2011, Bogota 2008), *Bioética y medio ambiente* (Havana 2006, Mexico 2008), *La revolución contemporánea del saber y la complejidad social* (Buenos Aires 2006), *Límites socioculturales de la educación ambiental* (México 2002), *Diccionario Temático Ernesto Che Guevara* (Havana 2000), *Cuba verde* (Havana 1999, 2003, 2011), *Ecología y Sociedad Estudios* (Habana 1996, 1999). His teaching and research activities have received awards in the USSR (1982), Mexico (2001), Argentina (2004) and Cuba (2004, 2005, 2009, 2011, 2014, 2017).

REFERENCES

- Argailot, J. (12 abril 2020). Cuba y el coronavirus: un pueblo preparado para la adversidad y médicos de fama internacional. The Conversation. <https://theconversation.com/cuba-y-el-coronavirus-un-pueblo-preparado-para-la-adversidad-y-medicos-de-fama-internacional-136116> (Revisado 11 junio 2020)
- Cubadebate (9 junio 2020). ¿Qué es el Jusvinza o CIGB-258? Disponible en: <https://www.facebook.com/watch/?v=277567593390644> (Revisado 11 junio 2020)
- Díaz-Canel Bermúdez, Miguel y Núñez Jover, Jorge (2020). Gestión gubernamental y ciencia cubana en el enfrentamiento a la COVID-19. *Anales de la Academia de Ciencias de Cuba*; Vol. 10, No. 2 (2020): especial COVID-19.
- DW. (17 marzo 2020). Cuba pone fin a la odisea del crucero MS Braemar. Disponible en <https://www.dw.com/es/cuba-pone-fin-a-la-odisea-del-crucero-ms-braemar/a-52810027>. (Revisado 11 junio 2020)
- IPS (25 Abril 2020). Más redes voluntarias contrarrestan la covid-19 en Cuba <https://www.ipscuba.net/sociedad/mas-redes-voluntarias-contrarrestan-la-covid-19-en-cuba/> (Revisado 11 junio 2020)
- Martínez Hernández, L. (10 junio 2020). Cuba se alista para la recuperación tras la epidemia. <http://www.granma.cu/cuba-covid-19/2020-06-10/cuba-se-alista-para-la-recuperacion-tras-la-epidemia-10-06-2020-20-06-42> (Revisado 11 junio 2020)
- MINSAP (2020a). Protocolo de actuación nacional para la COVID-19. Disponible en http://files.sld.cu/editorhome/files/2020/05/MINSAP_Protocolo-de-Actuaci%C3%B3n-Nacional-para-la-COVID-19_versi%C3%B3n-1.4_mayo-2020.pdf (Revisado 11 junio 2020)
- MINSAP (2020b). Parte de cierre del día 10 de junio a las 12 de la noche. Disponible en: <https://salud.msp.gob.cu/?p=5700> (Revisado 11 junio 2020)
- Prensa Latina (22 de mayo 2020). Vacuna cubana muestra eficacia en pacientes graves de Covid-19. <https://www.prensa-latina.cu/index.php?o=rn&id=368139&SEO=vacuna-cubana-muestra-eficacia-en-pacientes-graves-de-covid-19> (Revisado 11 junio 2020)
- Redacción digital (6 abril 2020). <http://www.granma.cu/cuba-covid-19/2020-04-06/en-fotos-la-informacion-en-tiempos-pandemicos-05-04-2020-16-04-43> (Revisado 11 junio 2020)

Stone, Jon (7 abril 2020). UK thanks Cuba for 'great gesture of solidarity' in rescuing passengers from coronavirus cruise ship <https://www.independent.co.uk/news/world/americas/coronavirus-cruise-ship-cuba-rescue-ms-braemar-havana-cases-a9451741.html> (Revisado 11 junio 2020)

Veiga, Gustavo (25 mayo 2020). Cuba y sus dos pandemias: El coronavirus y el bloqueo. <http://www.cubadebate.cu/especiales/2020/05/25/cuba-y-sus-dos-pandemias-el-coronavirus-y-el-bloqueo/#.XwHtgj0mMo> (Revisado 11 junio 2020)

XinHua (2020). Especial: Voluntarios cubanos apoyan lucha contra la covid-19. <https://www.mes.gob.cu/es/noticias/especial-voluntarios-cubanos-apoyan-lucha-contra-la-covid-19> (Revisado 11 junio 2020)