

“Integrating ‘Traditional’ and ‘Scientific’

Medicine in contemporary Cuba”

Candidate: Chiara Stella Cochetti

Date of submission: 15th September 2008

**Name of Institute: Institute for the Study of the Americas,
University of London, School of Advanced Studies**

**Degree Title: Msc Globalisation and Latin American
Development**

Supervisor: Dr. Kate Quinn



(“Calixto García” Hospital, La Habana, Cuba)



TABLE OF CONTENTS:

❖ *PREFACE AND ACKNOWLEDGEMENTS (PAG. 3-4)*

❖ *METHODOLOGY (PAG. 5 -6)*

❖ *INTRODUCTION (PAG.7 -15)*

❖ *FIRST CHAPTER (PAG.16 -30)*

❖ *SECOND CHAPTER (PAG.31-38)*

❖ *CONCLUSIONS (PAG.39 - 43)*

❖ *BIBLIOGRAPHY (PAG.44 -45)*

PREFACE AND ACKNOWLEDGEMENTS:

The following research on the integration of “natural” and “traditional” medical practices into the Cuban Health System has the main aim of identifying the historical, anthropological, economic and religious causes that have brought to the introduction of the **“Programa de Medicina Natural y Tradicional del Ministerio de Salud Pública de Cuba”** at the beginning of the 1990es, and locate its main outcomes.

The work has been carried out with the help and support of the “CESBH”, “Centro de Estudios de Salud y Bienestar Humano” University of La Habana, Cuba, during the months of June/ July 2008. With their hard work and discipline they have guided me through the vast field of “natural” and “traditional” medicine in contemporary Cuba. A big acknowledgement goes to Dr. Ruth Daisy Henríquez Rodríguez, Director of CESBH.

In addition, a significant acknowledgement and thought goes also to my two “Cuban mothers”, Dr. Milagros Niebla Delgado, anthropologist and specialist in “Religious Studies”, and Dr. Maria Luisa Torres Pàez, Doctor, both collaborating with CESBH. With their competence and warm personality they have been of great help for the coordination and success of my research. To both of them goes my warmest gratitude.

Another important acknowledgement goes to Dr. Francisco J. Moròn Rodríguez, “Professor of Pharmacology” at the “Central Laboratory of Pharmacology, Faculty of Medical Science Dr. Salvador Allende” and President of the “Comisiòn Nacional de Investigaciones y Programa RAMAL” for the help given and the passion for his work and research.

A big thanks goes also to Mercedes García biologist from the “Pasture and Forage research Institute” in La Habana, Dr. Gregorio Delgado Specialist in Microbiology and Parasitological science and official Medical Historian of the MINISAP (Ministry of Public Health) in Cuba, Dr. Carmen Mirta, Vice- Directora tecnica del Centro Nacional de Medicina Tradicional y Natural” in La Habana, Dr. Rodobaldo Pedroso from the Community “Las Terrazas”, La Moca, Pinar Del Rio,

Dra. Leticia Figueira, Dra. Rosa Cabrera Matamoros, and Dra. Zoraida Marià Amable Ambròs also collaborating with CESBH. A big thanks to Martina Allardo Llana “la negra” from “Las Terrazas”, for her knowledge on medicinal plants and for being a “living monument” of the effects of Green Medicine on the human being.

An acknowledgement also goes to the “babalaos” Ariel and Tito, and to the “Santera” Olga, from La Habana, for their capacity to guide me through the world of Afro- Cuban “Santería”.

My warmest regards go to my family and friends and to my “Cuban family” for the help and support given through my research.

A final acknowledgement goes to my Supervisor, Dr. Kate Quinn for the help and support given throughout the research.

METHODOLOGY

This work makes use of selected Primary and Secondary sources available on the chosen topic, covering the historical, anthropological, economic as well as religious aspects of this research.

The fieldwork experience carried out in Cuba between the 15th of June and the 9th of July 2008 has included:

- Interviews with Health workers at the MINISAP (Ministry of Health), Doctors, Anthropologists, Biologists, Pharmacists, Santeros practicing “Regla de Osha” and the population both in Ciudad La Habana and in the Pinar del Rio province.
- Observation and participative observation of case studies.
- Consultation of academic sources and information both at the CESBH, at the University and in specialized Libraries.
- First hand experience carried out in hospitals, “policlinicos”, family doctor programmes, cultural centres, pharmacies, pharmaceutical laboratories processing medicinal plants, and in a botanic garden.
- Visit to houses and temples related to the practice of “Regla de Osha”.

This work will be divided into **four sections**:

1) Introductive Section: Its main aim will be to present the terms “traditional” and “scientific” that appear in the main title of this dissertation and to give an outlook on the historical process that brought to the incorporation of the various Medical Traditions in Cuba throughout the centuries.

2) The *First Chapter*: Will present the economical, political and cultural background surrounding the implementation of the “**Programa Nacional de Medicina Tradicional y Natural del Ministerio de Salud Pública de Cuba**”. It will subsequently explore the main aims and

perspectives of the Programme, its implementation and achievements and the organization on a national basis.

3) The *Second Chapter*: This chapter will focus on non- institutionally integrated “**Santería**” **Healing Practices** and their degree of integration into the National Health System. A paragraph will focus on the role of “Santería” and “Green Medicine” during the Special Period.

4) *Conclusions*: This last section will be dedicated to the assessment of the degree of integration of Traditional and Natural practices into the Cuban Health System, on the degree of successful implementation of the MTN programme, and on the viability of this programme as an option to face economic restrictions in the medical field.

INTRODUCTION:

With this introduction, I aim to give an outlook on the history of the Cuban Medical Tradition, including both aspects of the “**Traditional**” and “**Natural**” cultural heritage present on the island, as well as aspects of the more **Western-Style “Scientific”** background which is part of contemporary Cuban Medical practices. This will lead to a brief summary of the health system structures before the revolution and the subsequent changes carried on during the first decades of the revolution.

The use of the term “**Scientific Medicine**” (related to Western-style, Conventional Medicine) is used in the title as well as in the course of this work in opposition to “**Traditional Medicine**”: this choice doesn’t mean to confer a more scientific character or validity to Conventional rather than Traditional Medicine. The term “**Scientific**” as it is used in this work to define Western-style medicine, relates only to the use of synthetic drugs and technological medical procedures that are proper of this type of Medicine. On the other hand, the term “**Traditional**” refers to all the practices of Traditional and Natural Medicine that are part of the broader Cuban medical culture nowadays, including the “aboriginal”, the “Asian” and the “Afro- Cuban”.

One of the purposes of the work is to present the degree to which the Cuban government has managed to achieve an equal scientific validation of “traditional uses of medicinal plants for Primary Healthcare”¹ and the incorporation of Traditional and Natural practices into the health system.

¹ From TRAMIL Website (<http://www.funredes.org/endacaribe/traduccion/tramil.html>), 03-09-2008

Brief history of the Incorporation of “Cuban Medical Traditions”:

❖ “Traditional” and “Natural” Medicine in Cuba throughout the centuries:

The use of **Traditional and Natural Medicine** in Cuba is as old as the first inhabitants of the island. We refer to the use of medicinal plants and traditional practices that goes back to the cultural heritage of those Indigenous people living on the territory before its discovery in 1492.

The population of the island of Cuba before the arrival of the Spaniards, was of approximately 100,000 inhabitants², that settled down on the island 4 thousand years³ before the colonization.

These aboriginal people, that originated from different migrations, were mainly “Siboneyos” and “Tainos”, both groups speaking the “arawak” language. The medical tradition of these original inhabitants, above all that of the “Tainos” was considered to be Mythical- Magic and based on the knowledge and use of medicinal plants. A very central character was that of the “medico-sacerdote” “doctor-priest” whose functions were carried out and based on their knowledge and expertise of medicinal plants: The role and function of these doctors- priests has been preserved in Cuba until today being embodied by those “Santeros”, “Curanderos”, and “Paleros” pertaining to the rich heritage of Afro- Cuban religions.

The second phase is represented by the incorporation of African medical traditions into the Cuban culture, originating with the slave trade which took place from Africa to Cuba. As the Cuban island gradually gained importance in the world market for its tobacco, sugar cane and coffee cultivations, the Spaniards started to need new workforce. Indigenous people on the island, although considered by Spanish law as “citizens of the Spanish kingdom”, started to be treated as slaves and forced to work in the cultivations. Strong revolts against Spaniards started to take place, followed by “mass

² From Prof. Francisco J. Moròn Rodríguez, “La Experiencia TRAMIL”, Chapter 9 “Salud y Medio Ambiente, Impacto de TRAMIL en Cuba”, in “Traditional Medicine and Public Health: the Experience and Lessons of the TRAMIL Network”, (TRAMIL ed.), IDRC- Enda-Caribe, Santo Domingo, R.D, 2009 (in the press)

³ Ibid.

suicides”; a huge part of the population disappeared due to these revolts as well as by the epidemic diseases brought by the colonizers and that affected most of the aboriginal population.

As indigenous people were slowly disappearing, African slaves coming from various parts of Africa (Congo, Nigeria, Guinea) started to be brought to the island as a response to the lack of workers in the cultivations. Most of the slaves brought came from “Equatorial Guinea”, which, of the three existing Guineas is the region where the tradition of medicinal plants is stronger and whose vegetation is more similar to that present on the Cuban island. African slaves brought to Cuba started to take with them their “Sciamanos” (priests) that were able to find and use on the new island the same medicinal plants they were using in the homeland Guinea, bringing new medicinal uses of these plants to the Colony, and opening up new “horizons”. The knowledge of medicinal plants on which Guinean Medicine was based had a strong “Mythical-Magic” character, and plants’ use was strongly linked to religion and religious rites.

The third medical culture to integrate in Cuba is that of the Chinese that started to immigrate to the island at the beginning of the 19th century. Their medical tradition will leave a very important trace in the course of the formation of the Cuban health system. The situation of Chinese medicine in Cuba is very different from that of the African, because the Chinese vegetation is very different from the Cuban one. When the Chinese first landed on the island, they were, differently from the Africans, not able to familiarize with the vegetation, because they were not able to recognize many of the botanic species present in Cuba. Despite the impossibility to use their medicinal plants on the island, massages and traditional Chinese medical practices became extremely popular in Cuba and have been successfully incorporated, throughout the centuries, into the Cuban health system.

❖ **The development of Western-style “scientific” medicine on the Cuban Island:**

The **western- style influence** of Medical Sciences in Cuba comes from the Spanish medical tradition first, followed by a strong Northern American influence which remains present in the Island until the triumph of the Revolution.

When Spaniards started to settle down on the island, they brought with them a new type of western-style medicine, whose structure was extremely rigid.

The Spanish medical profession at the time was divided into 4 categories : the “Medico Cirujano”(surgeon, placed at the top of the ladder), the “Medico”(general doctor), the “Cirujano Latino” and the “Cirujano Romanzista”(less skilled general doctors).

The problem with Cuba at the time of the Spanish colonization was that not all doctors were prepared to leave for the new world: What therefore happened was that while the most high ranking doctors remained in the mother land, those Spanish professionals that reached the Cuban shores were mainly “Romanzistas”, some “Latinos”, very few doctors and no surgeons. Those doctors that arrived to the island, being the least prepared and knowledgeable, have actually been the first to integrate and use the aboriginal medical traditions, both based on the use of medicinal plants⁴.

The integration of Cuban medicine is therefore, as Moròn argues in his work, a result of the integration of aboriginal cultures, with the Spanish classic medical tradition, the African religious healing ceremonies and magical use of medicinal plants, as well as the Haitian, Chinese and Maya cultures, that followed the Discovery of Cuba.⁵

⁴ From interview with Dr. Gregorio Delgado, Specialist in Microbiology and Parasitological science and official medical historian of the Cuban Ministry of Health MINISAP, “Oficina del Historiador del Ministerio de Salud Pública”, calzada del Cerro, Cerro, La Habana, 30-06-2008

⁵ From Prof. Francisco J. Moròn Rodríguez, “La Experiencia TRAMIL”, Chapter 9 “Salud y Medio Ambiente, Impacto de TRAMIL en Cuba”, in “Traditional Medicine and Public Health: the Experience and Lessons of the TRAMIL Network”, 2009

From the early decades of the 19th century Medical Sciences start to gain influence and to become one of the most developed sciences in Cuba at the time.

Furthermore, in addition to the European medical tradition gained through the Spanish colonization, Cuba was closely influenced by that Northern American style medicine, which was a mixture between European tradition and Northern American modern science. This means touching a very delicate aspect of Cuban history. This means to admit that part of what is nowadays “Cuban medicine” is in fact of North American influence, and that the education of the Cuban doctor has in fact very strong Northern American roots.

Among the various interviews I have collected for the purposes of my work, I have managed to interview Dr. Gregorio Delgado, Specialist in Microbiology and Parasitological science and, since the early years of the revolution, official medical historian of the Cuban Ministry of Health MINISAP. Dr. Delgado is really among those few Cuban intellectuals left that can still be considered as a “living monument of the revolution”.

The aim of my interview with him was to closely understand the historical and scientific causes that brought Cuba to the incorporation of different scientific traditions into one health system.

To my question on how Cuban medicine has been influenced by the Northern American Medicine he replies, to my expectations, that the influence has been very strong. He affirms that the United States have been a “good influence on the island for what concern the medical, the scientific aspects, although it’s been a very bad influence on the economic side”⁶.

Delgado notes that: “It was a custom for Cuban doctors to go and specialize to the United States, because that was actually closer than travelling to Santiago de Cuba. It was a habit for Cuban doctors to go and study in the United States for a time and subsequently go back to Cuba and apply what they learned.”⁷

⁶ From interview with Dr. Gregorio Delgado, La Habana, 30-06-2008

⁷ Ibid.

In the meantime the population, lacking assistance and needing solutions to their healthcare problems, had never stopped using medicinal plants, to treat themselves, mainly with success.

With the advent of the revolution, and the subsequent very tense relationship among Cuba and the United States, the situation changed drastically.

Cuban doctors didn't go to specialize in the United States anymore, but still retained and used mostly a European/ Northern American approach in the cure of diseases. They didn't have much knowledge of those principles of natural medicine that had for centuries been the most important resource for the health and wellbeing of the population. Dr. Delgado himself affirms in his interview that, the study of medicinal plants and natural medicine in Cuba didn't play such an important role for Cuban doctors during the first decades of the revolution. Cuban doctors were not trained on natural medicine and the use of medicinal plants was still mostly considered as a part of the population's cultural heritage⁸.

With the improvements made by the Health System under the revolution, the use of technology and more sophisticated drugs to cure nearly any kind of illness, Cuban doctors started to impose a western style medical model that would have eventually been able to take over the use of traditional medicine and medicinal plants retained by the population. Most of what was related to "natural" and traditional was considered as backward and ineffective.

“Moving the first steps towards integration”: Cultural and Historical background of Medical Practices in Cuba before and after the Revolution

In order to fully understand this process of homogenization and incorporation of traditional and natural practices into the health system we have, once again, to take an historical route into how once was the Cuban health system organized, divided and fractioned before the revolution. Due to

⁸ From interview with Dr. Gregorio Delgado, La Habana, 30-06-2008

the lacks of the system and the impossibility to guarantee equal and free access for all, most of the population in the country side and remotest areas, as well as most of the population in the cities had to rely on homemade natural and traditional remedies for their treatments, presenting one of the main reasons why traditional and natural practices have always been part of the Cuban cultural heritage. This **Cuban popular medicine** is characterized by very strong popular roots mixed with a strong religious “syncretic” tradition.

Before the beginning of the revolution, there were three “Health Systems” in Cuba:

- 1- “**Medicina Privada**”, Private Medicine (European and North American tradition): This type of medicine, guaranteeing expensive top class European and North American style services based on the use of synthetic drugs mainly, was for the exclusive use of those citizens able to pay for these services⁹.
- 2- “**Mutualismo**”: Health centres that were dispensing treatments to those citizens that were associated to them, paying a fairly cheap regular monthly fee¹⁰.
- 3- “**Medicina estatal**”, **State Medicine**: This was the only form of free assistance, for those citizens not able to pay for any of the above services. Public hospitals and “Casas de Socorro” were part of this type of medicine. Nevertheless, assistance in this field was not meeting the needs of that big part of the population not able to pay for medical assistance¹¹.

Although at the time, thanks to this peculiar division, the Cuban medical system was considered to be one of the best of the whole of Latin America, the system could not guarantee universal assistance to the population. As Delgado confirms during his interview: “In the remotest areas, in the mountains or in the Sierra Maestra, where there had never ever been doctors, the population

⁹ Ibid.

¹⁰ Ibid.

¹¹ Ibid.

continued to use traditional medicine. In these areas people never existed for the law, never had a birth or death certificate, and never voted for any of the elections”¹².

Among the interviews to the population carried out during my research I have myself come across older people living in remote areas before the revolution, people that had used traditional and natural Medicine for at least half of their lives to treat themselves. The most remarkable one was the interview with Martina Allardo Llane known as “la negra”, a very old Lady from the community “Las Terrazas, in La Moca, Pinar del Rio province: she had always been well known in the community to be the most knowledgeable person on medicinal plants. Even the local doctor, Dr. Rodobaldo Pedroso, asks her daily advice on medicinal plants and “cocimientos” (infusions) for the benefit of the whole population in the community. At the beginning of the revolution, she registered as a citizen from the first time since her birth; she was given a birth certificate and an approximate age. From what was written on the certificate, she says, “I should now be 89, but I’m actually much older than that”¹³. She carries on explaining that before the triumph of the revolution: “There was no doctor in the community, no hospital nearby, and I have started to use medicinal plants and natural medicines to look after my health, and that of my family. Until now, although the doctor comes to visit me in my house to ask suggestions on what medicinal plants to use, I have never gone to visit him”¹⁴.

After the triumph of the revolution, the first law presented in the public health field was the “Servicio Medico Rural” (Rural Medical Service), seeking to provide assistance to that part of the population living in the mountains, in the “Sierra”, in remote areas difficult to access. In 1959- 1960 the government started the “Departemento de Ayuda al Campesino” (Department of help for farmers), which subsequently becomes officialized in 1960 with the “Servicio Medico Social Rural” (Rural Medical Social Service).

¹² Ibid.

¹³ From interview with Martina Allardo Llane, Community of “Las Terrazas”, La Moca, Pinar del Rio, Cuba, 25-06-2008.

¹⁴ Ibid.

During the first decades of the revolution, while the first steps towards reforms in the health system were being made, the Cuban population was still extremely accustomed to the use of traditional and natural medicine for the treatment of almost any kind of disease. The use of medicinal plants and traditional medicine especially in rural areas and in “la provincia” (the province), was linked to the syncretism of religion and religious beliefs that have always played an extremely important role in the Cuban society.

Thanks to the health system’s reforms and the new techniques introduced during the first decades of the revolution, free and accessible healthcare was achieved for all and Cuban people easily adapted to this change, quickly “leaving aside” (although never completely abandoning), those natural and traditional remedies that had been used as treatments for centuries.

The gradual “medicalization” of the health system took place with the support of the majority of the population and the health revolution quickly became one of the most important successes the Cuban could export throughout the world.

It is only with the shortages and severe economic measures applied from the beginning of 1990es and known as “Periodo Especial” (Special Period), adding up to the already existent the economic shortages created by the American “embargo”, that Traditional and Natural Medicine has come back into consideration.

CHAPTER ONE:

While the historical outlook I have given in the introductory part helps us understand how the process has slowly taken place and how the various cultures present on the island have taken part in it, the aim of this first part will be to present the efforts made and the successes achieved by the Cuban government in order to introduce traditional and natural practices into the National Health System, beginning from the latter part of the 1980s onwards. It is important to understand that this process has not been a process of “introduction” of new practices into the health system, but of re-introduction of practices that had been, for centuries, part of the common cultural heritage of the island of Cuba.

Through the analysis of the “Programa de Medicina Natural y Tradicional” del Ministerio de Salud Pública de Cuba” I will present the work undertaken by the Cuban government in order to give a solution to the main problems suffered by its healthcare system during the 1990s crisis.

Towards the implementation of the MTN (Programa Nacional de Medicina Tradicional y Natural): Background and Investigations on Medicinal Plants

As I have already discussed above, despite a period of relative decadence of traditional and natural practices in Cuba, mainly during the first decades of the revolution, the use of medicinal plants was never completely abandoned and always played a very important role for the whole of the population. For this reason, medicinal plants have been a central focus of investigation for many Cuban scientists since colonial times. Worth to mention is the most complete and important study on the Cuban flora of all times, “Plantas Medicinales, Aromáticas y Venenosas de Cuba” (Medicinal, Aromatic and Poisonous plants of Cuba) redacted throughout the 20th century by the famous Cuban scientist Dr. Juan Tomàs Roig y Mesa (1877- 1971), considered “the father of Cuban

Green Medicine”.¹⁵ Following up to Dr. Roig’s work, in 1973 the Medicinal Plants Experiment Station was established in La Habana Province, building a collection of more than 5, 000 species¹⁶. Despite consistent improvement in the field, it’s only from the decade of the 1980es onwards that concrete scientific researches on medicinal plants started to take off.

At the time, Cuba had participated in only one previous research project on plants, that had been carried out by the “CAME” (Comisiòn de Ayuda Mutuo-Economica), in collaboration with other socialist countries and the Soviet Union. This Commission, whose function was to undertake scientific and technological research for the socialist block, gave life to a small research on the medicinal plants active in these countries. Despite the efforts, the research came short of providing any concrete or useful results.

In Cuba, the project of validation of medicinal plants used by the population started to gain more effectiveness in the period 1987- 1989, thanks to the creation of a national level network that included all the medical faculties of the country. The aim of this work was to validate the pharmacological and toxicological activity of most of these plants, in order to achieve the redaction of “clinical essays”. This was considered, at the time to be a very ambitious project since clinical essays at the time were commonly redacted for synthetic drugs only.

During the 1980es, when investigations on the effective validity of medicinal plants used by the population started to take place, Cuba wasn’t in a period of particular economic need, and incorporation therefore didn’t seem as urgent as for other Latin American countries.

The incorporation of traditional and natural practices into the Cuban health system was still not seen as a fundamental and urgent need, but as an option that started to be implemented in order to verify the function and pharmacological activity of some of the most common plants used by the population at the time.

¹⁵ From Mercedes García, Pasture and Forage Research Institute, “Green Medicine: an Option of Richness” in “Sustainable Agriculture and Resistance: Transforming Food Production in Cuba” (F. Funes, L. García, M. Bourque, N. Pèrez, P. Rosset), Food First Books, Oakland, California, 2002, Institute for Food and Development Policy, pag. 212

¹⁶ Ibid. Pag. 212-213

Cuba from the “Blockade” to the “Special Period”: brief outlook on the political and economic difficulties and the need for a change

In order to understand the urgent needs that brought Cuba to the construction of a natural and traditional medical system in such a short time, we need to give an outlook on some of the political and economic problems that afflicted the island since the beginning of the revolution.

As Mercedes García explains in her paper “Green Medicine: An Option of Richness”, due to the everlasting hostility with the United States, Cuba had “long envisioned as part of their wartime plans that the country would be totally blockaded, and therefore unable to receive any external supplies”¹⁷.

This meant that the island needed to gain sufficient expertise in order to manufacture natural products and medicine derived from plants, guaranteeing enough scientific controls and efficiency in order to protect the health of the whole population. As Mercedes analyzes in her paper as well as in the course of my interview with her, “military policy used the fact that the country had to be prepared to be self- sufficient in medicines in the event of a total blockade as a strategic issue. The Ministry of Defence (MIN- FAR) even opened the Central Laboratory of herbal Medicine at the Higher Institute of Military Medicine”¹⁸.

Considering this, it is easy to understand that the same strategic measures taken by the government at the beginning of the U.S blockade, became of extreme importance at the beginning of the 1990es. In 1989, with the collapse of the commercial relations with the socialist block, Cuba not only lost the most important trading partner, but also “the main source of inputs and raw materials for industrial pharmaceuticals”¹⁹.

¹⁷ From Mercedes García, Pasture and Forage Research Institute, “Green Medicine: an Option of Richness” in “Sustainable Agriculture and Resistance: Transforming Food Production in Cuba” pag. 213

¹⁸ Ibid., pag. 213

¹⁹ Ibid., pag. 213

Considering that the Ministry of Defence had prepared for years on the eventuality of a war, when the “Special Period” came into force, the Army was already prepared and knew exactly how to start the work: the economic crisis of the 1990es was in fact very similar to that that took place during the first decades of the blockade.

The Ministry of Defence, in collaboration with many research institutes started to work and implement the cultivation of medicinal plants throughout the country. The “Pasture and Forage Research Institute” in La Habana, where Doctor Mercedes García worked, started to research on the production of natural medicines since the beginning of the Special Period.

Due to the necessities, the projects of investigation and research on medicinal plants that had been started in the previous decades had to be undertaken at a different speed, and with different modalities. In this specific period, the country needed these researches on medicinal plants to be much shorter and concrete, something able to give a viable option to the shortage of medicinal products in a short time.

“PROGRAMA NACIONAL DE MEDICINA TRADICIONAL Y NATURAL (MTN)” DEL MINISTERIO DE SALUD PUBLICA DE CUBA: AIMS AND PERSPECTIVES

The institutional process of incorporation of “Medicina Tradicional y Natural” MTN into the national healthcare system traces back to the beginning of the 1990es, when the Ministry of Public Health (MINISAP) realised the necessity of revitalizing traditional Cuban practices in the form of medicinal plants and introducing the recourses of the traditional Chinese medicine into the national healthcare system. This process of incorporation took place, not only in the light of the socio-economic problems already presented, but also as a permanent and valid “scientific” option to conventional medicine. The project has been carried out as part of the objectives of the 1978 WHO “International Conference on Primary Attention” at Alma Atà, establishing “health for all by the year 2000” as a goal for developing countries: in order to achieve this, the first recommended action was to introduce scientifically tested traditional and natural practices into the health systems²⁰. The development of MTN practices is of extreme importance for developing countries like Cuba, as natural products are, in these areas, much cheaper and easier to find than industrial products. For the redaction of this part of the work I will be using, as a reference, the “Programa Nacional de Medicina Tradicional y Natural”, Ministerio de Salud Publica de Cuba, dated September 1999.

WHAT IS “MTN”?

MTN (Medicina Tradicional y Natural) is an extremely broad specialty, combing an integrative and holistic approach to health and health problems. As a medical specialty, MTN implies the use of health promotion and education, prevention, diagnosis, treatment and rehabilitation of patients as in Asiatic Traditional medicine through the use of acupuncture, moxibustion, massages and traditional

²⁰ From Leoncio Padròn Càceres, Martha Perez Viñas, “Integracion de las practicas de la medicina Tradicional y Natural al sistema de salud”, IDEASS Cuba, “Innovaciòn para el Desarrollo y la Cooperaciòn Sur- Sur”, Centro Nacional para el desarrollo de la Medicina Tradicional y Natural de Cuba, Ciudad de La Habana, Cuba, 2002, pag.1

exercises, exercises of relaxation and hypnosis, natural practices (Dietotherapy, Phytotherapy, Apitherapy. Homeopathy and other therapeutical methods based on natural elements like Flower Therapy are also included²¹.

Among the various holistic disciplines that have been adopted, “Sanology” has played a very important role. Through the sanological approach, which is mainly based on prevention, both “health” and “illness” are treated with natural techniques, that should be the as less aggressive as possible.

Of all therapies, medicinal plants are considered as a fundamental part of the programme, because they are the only really “Cuban” traditional therapy and constitute part of the Afro- Cuban heritage of the country.

FACTS:

- 1991: the Comandante en Jefe General Fidel Castro started to orient the country towards the implementation of a programme that included the scientific use of medicinal plants, aiming at the pharmaceutical elaboration of natural products, the determination of their phitotherapeutical complexes, the therapeutical effects and the elaboration of clinical essays.
- March 1995: creation of the “Comisiòn Estatal Interministerial para el Desarrollo de la MTN”
- September 1995: creation of the “Direcciòn de Medicina Tradicional y Natural” of the Ministry of Health, MINISAP
- . 1996: Approval of the “Programa para el Desarrollo de la Medicina Tradicional y Natural”

²¹ From Direction of Traditional and Natural Medicine, MINISAP, “Programa Nacional de Medicina Tradicional y Natural”, Ministerio de Salud Publica (Ministry of Public Health), September 1999, Ciudad La Habana, Cuba, pag. 12

- 2002: Approval of the Agreement No. 4282 of the “Comitè Ejecutivo del Consejo de Ministros” (Executive Committee of the Council of Ministry). This legislation aims at establishing a series of measures related to the practice of Traditional and Natural Medicine in the country, and, among them, the creation of a “ Centro Nacional para el Desarrollo de la MTN” (National Centre for the Development of MTN)²².

AIMS AND PERSPECTIVES OF THE PROGRAMME:

- Introduction and implementation of a systemic, integrative, dynamic and open system, for the development of a true Sub- system of medical attention, whose functions aim at the progressive introduction of a system of “traditional and natural” medicine throughout the country²³.
- MTN is one of the principle strategies used by the MINISAP to fulfil the lacks of its health system and aims at the betterment of the national health system.
- Achieve a high level of quality and professionalism in the practices of MTN throughout the country.
- Establishing the basis that can allow the formation of the human and technical resources necessary to the development of MTN as a specialty²⁴.
- Contribute to the work on medicinal plants undertaken by the ministry of Agriculture (MINIAGRI), in order to develop a uniform and organic system of cultivation and quality controls²⁵.

²² From Leoncio Padròn Càceres, Martha Perez Viñas, “Integracion de las practicas de la medicina Tradicional y Natural al sistema de salud”, IDEASS Cuba, pag.3

²³ From Direction of Traditional and Natural Medicine, MINISAP, “Programa Nacional de Medicina Tradicional y Natural”, Ministerio de Salud Publica (Ministry of Public Health), September 1999, pag. 9

²⁴ Ibid. Pag. 9

²⁵ Ibid. Pag. 10

- Contribute to the education and technical preparation of all doctors and health workers in the specialty of MTN, and especially those working within the Primary Care sector²⁶.
- Contribute with the Ministry of Science, Technology and Environment (CITMA), to the development of a national programme of scientific investigation for the quality and development of medical attention in the country²⁷.
- Implementing and developing a system of Statistic and Technical- Scientific information that would help evaluate the progresses of the programme²⁸.
- Development of an “Integral Programme of scientific divulgation” for the benefit and education of the population²⁹.

IMPLEMENTATION AND ACHIEVEMENTS OF THE PROGRAMME:

1-RESEARCH ON MEDICINAL PLANTS:

The research on medicinal plants, as carried out by the Cuban government from the 1990es onwards, clearly differentiated from those undertaken in the previous decades as the latter was animated by necessity and had a practical aim of fulfilling the lacks creates by the economic crisis during the Special Period.

Cuba in the 1990es was clearly not in a position to waste time and resources on pointless research, and had to stick on defined parameters in order to undertake investigation on these plants.

²⁶ Ibid. Pag.10

²⁷ Ibid. Pag. 10

²⁸ Ibid. Pag. 10

²⁹ Ibid. Pag. 10

Here is a schematic presentation of how research on medicinal plants was undertaken in Cuba from the decade of the 1990s onwards. The work I have carried out in La Habana in collaboration with Dr. Francisco Moròn has helped me through the redaction of this part.

1. In order to undertake research on a certain medicinal plant, the first important point is the availability of that plant on the territory.
2. Before testing the plant on a patient, the plant must have been validated, in order not to be dangerous. Once validation is completed, the plant is introduced in a “farmacopea” and a clinical essay should be written on it.
3. The third and extremely important point is investigating on the toxicity of that plant.
4. Information must be given to the population to implement the cultivation of that plant.
5. Research on the existence of any processed medicinal product containing that specific plant, and their validation. In case no medicinal product had ever been processed using that plant, the Research Institutes together with the Pharmaceutical Industries had to start working on that³⁰.

Thanks to its multidisciplinary character, the work on medicinal plants carried out in Cuba in this particular period achieved the results needed in a faster and more effective way.

The work on the validation of the medicinal plants mainly used by the population was so successful that the Cuban Research Institutes finally achieved the ambitious redaction of “ensayos clinicos” (clinical essays) on these plants, something that had been, until that stage, reserved only to chemical products. These clinical essays aimed at informing and educating health workers as well as the population on the active principles and the collateral effects of the plants that were currently in use, as well as making them aware of the quantity to be taken in order for a certain product to be effective.

³⁰ Points 1 to 5, from interview with Prof. Francisco J. Moròn Rodríguez, “Professor of Pharmacology” at the “Central Laboratory of Pharmacology, Faculty of Medical Science Dr. Salvador Allende”, specialist in “Phytotherapy” and President of the “Comisión Nacional de Investigaciones y Programa RAMAL”, Faculty of medical Sciences Dr. Salvador Allende, La Habana , Cuba, 01-07-2008.

Despite the difficulties of the Special period, all the Research Institutes, Universities and Centres of the country took part into the project.

A new research programme on medicinal plants, the “Programa RAMAL de Investigaciòn”, of whose National Commission Dr. Moròn is President, was created in 1996-1997 by the Ministry of Health, MINISAP. This is a broad project, including not only research and validation on medicinal plants, but also those health practices and therapies linked to the use and development of green medicine.

The TRAMIL Programme: One of the projects that, tracing back to the late 1980es, has been of great help to Cuba to fulfil the necessities of the Special Period has been the TRAMIL programme. The TRAMIL (Traditional Medicine in the Islands) programme, “is a programme of applied research to popular medicine in the Caribbean that aims to rationalize health practices based on the use of medicinal plants”³¹.

At the end of the 1980es, while Cuba was still carrying on its research on medicinal plants on a national basis, some Cuban scientists active in the health sector, started to become aware of the ethno- pharmacological research carried out on the topic of medicinal plants in the closely located island of “Hispaniola” (Haiti and Dominican Republic) using very modern techniques and a very new approach. This work, the TRAMIL project, gradually expanded to other Caribbean countries and Cuba became an official member of it in 1986.

The TRAMIL’s experiment is not only an investigation on medicinal plants, but a concrete help to solve the problems and the lack of synthetic medicines in these countries.

As Moròn argues in his paper “Farmacología y ensayos clinicos de plantas TRAMIL: La experiencia de Cuba”, one of the most striking characteristics of the project is that “its work aims, as a first goal, at establishing the security and effectiveness of those plants that are most commonly

³¹ From TRAMIL Website (<http://www.funredes.org/endacaribe/traduccion/tramil.html>), 03-09-2008

used by the population”³². The success of the TRAMIL’s experiment actually comes from its practical and concrete vision. This is what has probably attracted many scientists coming from developing countries in the Caribbean, including Dr. Moròn. As he states in the same paper, which seems to me to be the main point of the programme, “us professionals that work as researchers in developing countries like those of the Caribbean basin, with limited economic sources, can’t aim at doing any kind of research which is not focused on one or more concrete goals. Abstract investigation, whose results don’t beneficiate the people in the short term, must be considered by us as an unnecessary and luxurious waste”³³.

The general aim of the TRAMIL programme throughout the years has therefore been that of validating those traditional and popular health practices based on medicinal plants that are part of the cultural heritage of the Caribbean people, estimate their effectiveness and security in order to introduce them into the health systems as a support to the basic healthcare systems (Atención Primaria). This has been helpful in the Cuban case during the years of major economic crisis.

2-ACADEMIA, COURSES AND EDUCATION IN THE FIELD OF “MTN”:

Together with healthcare, one of the most appreciated and well known aspects of the Cuban system is the accessibility and quality of its educational system. In the field of MTN, the expertise of many professionals and specialists has been used, at all levels to educate and spread information on the great variety of disciplines related to Traditional and Natural Medicine.

From the 1990es onwards, the Cuban government organized a wide variety of courses, Masters and specializations in MTN for the benefit of doctors, health professionals, students as well as the population. Thanks to the uniformity of the institutional programmes, the teaching of disciplines related to MTN has equally and successfully reached the whole country.

³² From Prof. Francisco J. Moròn Rodríguez, “Farmacología y ensayos clínicos de plantas TRAMIL: La experiencia de Cuba”, Chapter 5 “Validación Científica- seguridad y eficacia” in “Traditional Medicine and Public Health: the Experience and Lessons of the TRAMIL Network”, (TRAMIL ed.)

³³ Ibid.

The academic preparation guaranteed by this variety of courses has proved essential for those doctors and health professionals previously trained in western style medicine only, and allowed to prepare themselves to an integrative medicine model that included MTN practices.

The different courses made available by the MINISAP range from a “**Curso Basico Integral**” (**Integral Basic Course**) that includes essential theoretical and practical knowledge on MTN practices, to **Diplomas, Masters** and a **Specialty** all in disciplines related to MTN.

From what I have analyzed, in order to achieve a complete and successful integration it is therefore essential for the new generations to cultivate and maintain their heritage of knowledge on medicinal plants and traditional practices, and apply it to a modern, technology-based approach to medicine.

Education must therefore be considered as the first basic step towards integration.

THE ORGANIZATION OF “MTN” SERVICES ON THE NATIONAL TERRITORY AND THE NATIONAL HEALTHCARE SYSTEM NETWORK:

With this paragraph, I aim to give an outlook on the two most important centres for the development of MTN services, and their organized at a national, provincial and municipal level. As for most of this section, the main reference for this part will be the “Programa Nacional de Medicina Tradicional y Natural” of the Ministry of Public Health, September 1999.

The two basic institutions for the development of MTN throughout the country are:

1-The first and most important institution on Traditional and natural Medicine at the **national level** is the “**Dirección Nacional de Medicina Tradicional y Natural**”, (National Direction for Traditional and Natural Medicine), whose main function is to establish the methodological basis to for the development, evaluation and application of the programme in the whole of the National Health System. A department of the “Dirección Nacional de Medicina Tradicional y Natural” is present at the **provincial level**, and its director is usually a member of the “Consejo del Director Municipal”.

At the **municipal level**, a functionary of the “Departamento Municipal” is present to perform the tasks and decisions taken at the higher levels³⁴.

2.1- The second vital centre for the development of MTN throughout the country is the “**Centro Integral para el Desarrollo de la Medicina Tradicional y Natural**” (**Integral Centre for the Development of Traditional and Natural Medicine**), which is the central unity for the development and integration of MTN into the national healthcare system, and which is present at

³⁴ From Direction of Traditional and Natural Medicine, MINISAP, “Programa Nacional de Medicina Tradicional y Natural”, Ministerio de Salud Publica (Ministry of Public Health), September 1999, Ciudad La Habana, Cuba, pag. 16-1999

national, provincial and municipal level. It is an organizational unit, whose principal function is the promotion, prevention, diagnosis, treatment and rehabilitation of those patients that are treated with any of the MTN therapies. These centres must be accredited by the government, and integrated both with the Traditional and Natural Medicine department at the MINISAP as well as with the other “Centros Integrales para el Desarrollo de la MTN” throughout the country, following that horizontal structure which is typical of the Cuban system. These centres allow an integral work in the areas of assistance, education and investigation, and promote the systematic use of MTN in all the unities of the local health system³⁵.

At the time of me writing, the “**Centro Integral para el Desarrollo de la Medicina Tradicional y Natural**” in La Habana is located in the “Municipio Playa”, and its Director is Dr. Nancy Cabrera.

2.2 “Centro Integral Para el Desarrollo de la Medicina Tradicional y Natural en las Montañas” (Integral Centre for the Development of Traditional and Natural Medicine in the Mountains):

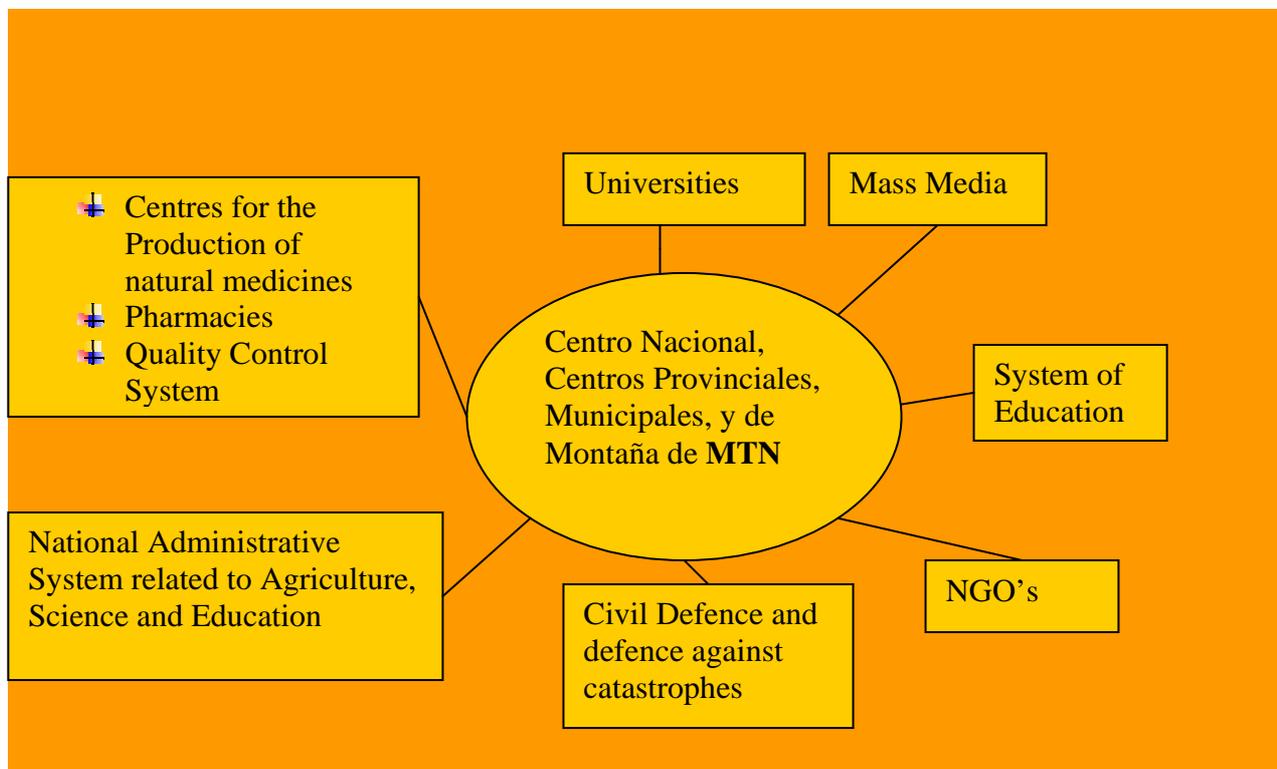
This Centre can be found within or outside the Health Structures already existing in the area, depending on the condition of each territory³⁶. As I have already mentioned, the practice of MTN is especially important in remote areas that have been much more affected by the necessities and economic crisis. The practice of MTN is in fact strategically important for human development as it can be applied in areas of complete scarcity or insufficient healthcare assistance³⁷. That’s why the development of MTN practices is particularly important in the mountains and in the rural areas.

³⁵ From Direction of Traditional and Natural Medicine, MINISAP, “Programa Nacional de Medicina Tradicional y Natural”, Ministerio de Salud Publica (Ministry of Public Health), September 1999, Ciudad La Habana, Cuba, pag. 16

³⁶ Ibid. Pag. 22

³⁷ From Leoncio Padròn Càceres, Martha Perez Viñas, “Integracion de las practicas de la medicina Tradicional y Natural al sistema de salud”, IDEASS Cuba, pag.2

In order to summarize the information presented in this section, this diagram exemplifies the integration of Traditional and Natural Medicine into the National Health System³⁸.



³⁸ “Organigrama de trabajo sobre la integración e la Medicina Tradicional y Natural en el Sistema Nacional de Salud”, from From Leoncio Padrón Cáceres, Martha Perez Viñas, “Integración de las prácticas de la medicina Tradicional y Natural al sistema de salud”, IDEASS Cuba, pag.6

CHAPTER TWO:

After having discussed in depth the institutional process of integration of “Traditional” and “Natural” practices into the Cuban health system, this chapter will leave space to the less institutionalized discourses related to the Afro-Cuban cultural heritage of Traditional Healing Practices.

This part, which is redacted in relation to the previous section, aims at giving a conclusive outlook on the relationship between Cuban “Religious Healing Practices” and the “**Health System**” and on how the 1990es economic crisis influenced and implemented the use of Religious Healing Practices to fulfil the lacks of the health system during the Special Period. Among the various Afro-Cuban religions present in Cuba nowadays, “Santería” practices will be taken as example, as they constituted the main part of my fieldwork research on religious healing practices during my time in Cuba. Part of this experience will be presented through the words of two of the “Babalawos” practicing “Regla de Osha” (“Santería”) that I have interviewed for this project.

The use of Medicinal Plants in Afro- Cuban religious Tradition and Healing Practices: “el monte”and “los negros curanderos”

The use of medicinal plants in contemporary Cuba today, both as part of the population’s cultural heritage as well as their introduction into the health system, is the first tangible product of the ancient Afro- Cuban tradition and practice of Green Medicine, and the only purely Cuban form of Traditional Medicine.

The most important element of these Afro- Cuban healing practices, which is also fundamental part of the spirituality of the Cuban, is **the Mountain, “el Monte”**. As the famous Cuban writer Lydia Cabrera writes in her work on medicinal plants “El Monte”, “the Cuban and especially the Afro-

Cuban still believes in the important role of the mountain. The mountain is spirituality, and it is home to those ancestral divinities and spirits that are part of the Cuban Pantheon”³⁹.

The mountain, as it is conceived in the Afro- Cuban tradition, therefore embodies the spiritual life and is home to all those natural resources and medicinal plants used in religious healing practices.

“**El Negro Curandero**”, the “**Afro- Cuban Healer**”, passing his knowledge from generation to generation has managed to keep alive the secrets of the “Mountain”.

Characterized by wisdom, experience and knowledge, his character has been compared and contrasted with the role of the doctor in the Cuban society. The author Lydia Cabrera, in another important work on Traditional Medicine in Cuba, explains how, since colonial times, “Afro- Cuban healers were considered as being rivals of the doctors. In most cases, due to their particular experience and attitude towards healing practices, *el negro y tambien la negra curanderos* were considered by many at the time to be more reliable and trustworthy than the feared personality of the doctor.”⁴⁰

Until the present days, both doctors and high ranking “Santería” priests, rely on the “curanderos” for their knowledge on medicinal plants. In fact, those Santería priests that don’t have enough knowledge on the topic usually need to ask advice to the “Osainistas” (Santeros specialized in medicinal-magic plants), or Curanderos that live on the mountains.

“Santería” Healing Practices, as they will be analyzed in the course of this Chapter, base their rituals on the use of medicinal plants and share many elements with traditional and natural medical practices. Through the experience and research carried on, I have personally been able to realize that although not institutionally integrated into the Cuban health system, these healing practices still belong in Cuba to the broader field of “Traditional and Natural Medicine”.

³⁹ From Lydia Cabrera, Chapter 1 “El Monte” in “El Monte”, Centro de Estudios Martianos, Editorial Letras Cubanas, La Habana, Cuba, 1993, pag. 17

⁴⁰ From Lydia Cabrera, Chapter 7 “Los Negros Curanderos” in “La Medicina Popular de Cuba: Médicos de antaño, curanderos, santeros y paleros de hogaño”, “Colección del Chicherekù en el Exilio”, Ultra Graphics Corporation, Miami, Florida 33166, 1984, pag. 127

“Santería”, Green Medicine and the 1990es Economic Crisis

With the triumph of the revolution in Cuba, Afro- Cuban religious’ manifestations, including healing practices started to become repressed and hidden because considered as backward and irrational. The tendency of the regime in those years was to present religion as “folklore”. For this reason, the “National Institute of Ethnology and Folklore” was founded in 1961. As Johan Wedel, author of an interesting work on the relation between Afro-Cuban “Santería” and healing processes affirms in his work: “the establishment of the Institute had to do not only with scientific interests; the government also wanted to better control the Afro- Cuban religions, partly because they constituted an informal economic network that did not fall under the control of the centrally planned economy of the State”⁴¹. During the 1970es the situation gradually relaxed, although it’s only from the 1980es that things started to change.

From the 1990es onwards, while medicinal plants and Natural medicine were slowly re-introduced into the system due to the economic crisis and shortages in the medical field, “Santería” healing practices also re- gained consideration and importance.

As Wedel argues, one of the side effects of this re- introduction of natural products in the market and of the new encouragement towards the use of green medicine has been that “*Santería* and *Palo Monte* are gaining recognition due to their extensive knowledge of medicinal plants and herbs.

These plants could be easily found and can be bought at the private store or *yerbero*”⁴².

Furthermore, in this period of difficulties and economic crisis, the population in Cuba has suffered and in different ways sought the help of “Santería” to solve many of their problems. Since Santería healing believes that social conditions, interactions and stress are the primary causes of a physical disease, the crisis of the Special Period generated stress and health problems to the population.

⁴¹ From J. Wedel, Chapter 2 “Cuba and the Formation of “Santería”, in “Santería Healing: A journey into the Afro-Cuban World of Divinities, Spirits, and Sorcery”, University Press of Florida, 2004, pag. 33-34

⁴² Ibid. Pag. 45

As the “babalawo” Tito explains in my interview with him, “although the whole population was undergoing severe economic difficulties, they still continued to perform religious rituals, and it’s not that the cost of Santería Healing rituals or any other ceremony was kept lower because of the crisis”⁴³. The cost remained steady, and for people during this period, it was very difficult to find the money or the material necessary for the rites. Furthermore, as Tito adds, “it was very difficult at the time to find anything like white clothes, necklaces and bracelets required for the rituals, and it was equally difficult to find the washing powder to wash white clothes. In order to cope with this emergency situation, santeros had to make many concessions to the normal course of the rituals”⁴⁴. As Wedel affirms, “Santería’s adaptability and ability to respond to extreme situations, from the brutal and harsh conditions of slavery to the anxiety and lack of medicines during the economic crisis, have been vital for its survival and development. Today Santería is flourishing both in Cuba and abroad”⁴⁵.

“Biomedicine versus “Santeria”? The “Doctor” and the “Babalawo”: **blurred boundary between the two terms**

“Santería” healing practices, that are themselves part of a common religious healing tradition based on medicinal plants, believe that illness originates from a lack of “ashè”(vital power), that is in turn, related to an “imbalance of **hot** and **cool** liquids and objects”⁴⁶. In a situation of imbalance or lack of ashè, the main aim of the Santería consultation will be to find a way to restore the balance, in order to bring the person back to the original health situation. As Wedel writes, “Santería relates

⁴³ From interview with the “Babalawo” Jose Cardena Rodríguez (Tito), “Centro Universitario Estudiantil de la Universidad de la Habana”, 04-07-2008

⁴⁴ Ibid.

⁴⁵ From J. Wedel, Chapter 3 “Etiology and Healing”, in “Santería Healing”, pag. 46

⁴⁶ Ibid. Pag. 47

sickness (*aro* or *ano*) to a larger whole, to a world of divinities and spirits, and to a person's social situation"⁴⁷.

The latter is important to understand how in "Santerìa" as well as in all the other traditional healing practices, illness is caused by the psychosomatal reaction to a psychological problem that therefore becomes a physical problem. While Biomedicine "does not generally recognize that sickness can be socially created"⁴⁸, "Santerìa" healing practices believe that emotions make the self become ill. Healing as a process therefore "refers to the whole person or the whole body seen as an integrated system with both physical and spiritual components"⁴⁹.

In "Santerìa", for a person that suffers from an illness, the body is more than a "physical object" or a "physiological state"⁵⁰. It is also an essential part of the self and a source of experience⁵¹.

The anthropologist Johan Wedel, compares the concepts of "**healing**" and "**illness**", with those of "**curing**" and "**disease**", terms that are instead part of Western natural sciences.

"**Healing**" is related to the traditional, natural and religious elements of medical disciplines because it "focuses on meaning and experience in order to make something whole that is disrupted or disturbed"⁵². "Healing" in "Santeria" as well as in traditional medicine is considered as a process, through which healing is not just related to the body but also to the person as a whole, including his psyche. "**Curing**" on the other hand refers to the local treatment of a problem, to "the successful treatment of a specific physical condition, such as a wound or an infection"⁵³, which relates to a

⁴⁷ Ibid. Pag. 47

⁴⁸ From J. Wedel, Chapter 5 "Healing, Curing, and the Self", in "Santerìa Healing", pag. 119

⁴⁹ From Strathern and Stewart, "Curing and Healing: Medical Anthropology in Global Perspective", Carolina Academic Press, Durham N.C, 1999, pag. 7

⁵⁰ From J. Wedel, Chapter 5 "Healing, Curing, and the Self", in "Santerìa Healing", pag. 116

⁵¹ From B. J. Good, "Medicine, Rationality, and Experience: An Anthropological Perspective", Cambridge University Press, Cambridge, 1994, pag. 116

⁵² From J. Wedel, Chapter 5 "Healing, Curing, and the Self", in "Santerìa Healing", pag. 116

⁵³ Ibid. pag. 116

more westernized medical concept. A second relevant distinction is made by the author on the difference between **“illness”** and **“disease”**: while “illness” is related to the concepts of natural, traditional medicine and religion because it “includes experiences and beliefs⁵⁴” and “is constituted with an openness to change and to healing⁵⁵”, the concept of **“disease”** belongs to biomedicine and Western natural sciences as it refers only to a “biological and biochemical malfunction”.

“Santería” and Biomedicine therefore have opposite visions of health and disease, and act differently on the treatment: while biomedicine aims more at treating locally, traditional and natural practices (including religious) are directed to a gradual construction of health.

Despite this, it would be wrong to think at **“the babalawo”** and **“the doctor”**, as two characters in opposition. The peculiarity of the Cuban case in fact, presents the two healing characters as often acting together, and complementing each other’s work and knowledge.

To my question on the relation and interaction between “babalawos” and “doctors”, and on the contrast between “religion” and “biomedicine”, both of the “babalawos” I interviewed for my research replied in a very positive way.

Tito affirms: “I think this relation doctor- babalawo is a very positive thing, is more a relation than a contrast, as many people would think. From our point of view, that of the religious, if we think that the person needs a kind of help that we can’t give, a medical treatment or a surgery, we always suggest this person to go and see a doctor. We usually do divination, we ask the “santos” directly whether the problem can be solved with a religious healing ritual, or if the patient has to go to the doctor. And the interaction also works on the other way round, because when a doctor has tried everything, and has finished with all the scientific resources he has, then he sends the patient to the babalawo. I think this is a really positive interaction between science and religion”⁵⁶. Usually, when

⁵⁴ Ibid. pag. 116

⁵⁵ From B. J. Good, “Medicine, Rationality, and Experience: An Anthropological Perspective” 1994, pag. 158

⁵⁶ From interview with the “Babalawo” Jose Cardena Rodríguez (Tito), “Centro Universitario Estudiantil de la Universidad de la Habana”, 04-07-2008

the babalawo finds out that the solution of a problem is not in his hands, he spontaneously advises his patient to “ir para la bata blanca” (go to see the “white coat”), which is, the doctor.

Arièl Odoardo, the other babalawo I visited in his house in “El Vedado”, La Habana, agrees with the view Tito had on the same topic. He says: “There are doctors that, although they are sceptical and they don’t believe in this religion they still respect it, and they use this interaction science-religion which is very strong in Cuba. If doctors realize that they can’t find solution to a problem, then they send the patient to visit a santero or a babalawo. I do have a friend who is a doctor, and we do use this kind of interaction. Illnesses and problems of most people originate from their relation with the others and from social interactions”⁵⁷.

The role of the “**doctor**” in Cuban society nowadays is very different from the past. The contemporary Cuban doctor has opened up his mind towards issues of incorporation of MTN into the health system, and furthermore, lives in an era where in Cuba, talking about religion and religious practices is not considered anymore as backward and irrational.

The function of the doctor in Cuba now focuses on prevention, on being able to avoid rather than treating the disease. The personality of the modern Cuban doctor, who has studied on a “conventional” Medicine course, but has also been trained in MTN, is more open towards different traditional and natural therapies that are, most of the times, in agreement with those therapies used in religious healing practices such as “Santería”.

Furthermore, within the complex Cuban health system, it is not rare to come across the “borderline” character of the “**doctor- babalawo**”. This double- faceted character is the perfect embodiment of the unofficial incorporation of scientific and religious healing practices presented above. As Tito explained to me “this type of interaction doesn’t take place only between doctors and babalawos (that belong to “Santería”), but also with other Afro- Cuban religions in the same way”⁵⁸. As

⁵⁷ From interview with the “Babalawo” Arièl Odoardo, El Vedado, la habana, Cuba, 04-07-2008

⁵⁸ From interview with the “Babalawo” Jose Cardena Rodríguez (Tito), “Centro Universitario Estudiantil de la Universidad de la Habana”, 04-07-2008

Wedel argues, when “santeros and babalawos work as medical doctors, they frequently encourage patients to become involved in Santería, if religious healing is thought to be a more effective form of treatment than Biomedicine”⁵⁹.

One of the most important consequences of this positive interaction is that patients have benefited from it: In case of necessity, they are in fact offered more options in order to solve their problem. And this interaction has also benefited the health system, especially in period of economic or social crisis. Although the institutional incorporation of religious healing practices into the Cuban health system has not yet taken place, this is the result that a “not- institutionalized” and “unwritten” type of incorporation has been successfully carried on. Patients usually use both “Santería” and “conventional medicine” because “one can be more sure, if you attack illness in two ways because they make each other stronger. If one fails, the other will resolve it”⁶⁰.

As a conclusion, “Santería” healing practices don’t have to be considered as in “competition” to Biomedicine: “Santería” and Biomedicine in Cuba, although drawing from different visions of health and disease, don’t “compete” but “complement” each other.

⁵⁹ From J. Wedel, Chapter 5 “Healing, Curing, and the Self”, in “Santería Healing”, pag. 119

⁶⁰ From Jose Seoane Gallo, “El Folclor mèdico de Cuba”, Editorial de Ciencias Sociales, La Habana, 1988, pag. 4

CONCLUSIONS

The purpose of this section is to draw a conclusion on the degree of successful integration of Traditional and natural medical practices into the Cuban health system through the “**Programa de Medicina Natural y Tradicional del Ministerio de Salud Pública de Cuba**”. The analysis of the integrated Cuban healthcare model which has been carried out throughout the course of this work, as an “alternative” option to a period of economic crisis, will raise a final question on the possible applicability of the same model to other Latin American developing countries suffering from remarkable lacks into their health system.

The arguments presented in the course of this work, originating from the existent scholarship on the topic as well my fieldwork research carried on in Cuba, aimed at describing the successful process of incorporation MTN practices into the national healthcare system in contemporary Cuba.

The main factors behind the success of this fast-track incorporative process refer to the cultural, political, economic and characteristics of the Cuban island.

In Cuba, the strong cultural heritage on traditional and natural medicine of its population has played a very important role during the process of incorporation of MTN practices into the health system of the country. Without the same cultural conditions and favourable approach towards traditional practices, this process would have possibly not been as successful.

The distinctive character of the Cuban healthcare structure, its nationalized public system and accessibility has, in a period of crisis, helped it to remain strong and united and to take equal decisions for all sectors of the health care system. Furthermore, education and courses in MTN, based on the same criteria of accessibility for all, follow a standard national programme throughout the island, that has benefited all students and health personnel in this field. As Mercedes Garcia argues: “In an innovative mixture of tradition and science, the Cuban government has incorporated the use of medicinal plants in an internationally recognized health system. The Ministries of

Agriculture (MINIAG) and Health (MINISAP) have closely collaborated in successful research for the production and marketing on a large scale since 1990, taking advantage on traditional knowledge, enriched by scientific research. The rapid success achieved in the past decade was made possible by earlier comprehensive studies of Cuban medicinal flora and a solid healthcare structure. Cuban citizens were predisposed in favour of green medicine, and responded positively to government initiatives in this direction during the difficult Special Period. Training programs for healthcare personnel and the general public(...), have helped”⁶¹.

It is a fact that the economical difficulties and shortages affecting the Cuban population actually facilitated that process of investigation on medicinal plants that had been undertaken for years in such a slower and more theoretical way. As a consequence of the crisis instead, the results of these research were introduced into the system straight away. Throughout the years, the incorporation of medicinal plants and natural medicine into the health system has been important, and has helped and improved the recuperation of the system.

On the economic side, it is important to give an overview on the economic advantages of MTN in a developing country like Cuba: Through the introduction of MTN in a period of necessity, Cuba has been able to fully develop its healthcare resources, through the use of less expensive techniques in Primary Healthcare as well as in the health system as a whole.⁶² The use of MTN has helped those sectors that were most lacking assistance and resources. Furthermore, the cost of natural products in Cuba is much lower than that of the equivalent synthetic drug. For example, as Dr. Moròn explained in his interview: “The most expensive synthetic drug (among those for first-aid treatment) currently on the market in Cuba costs about 30 CUP (Cuban Pesos), which roughly equals 1 CUC and 20 cents (Convertible Pesos). On the other hand, the natural medicines actually on the market are sold

⁶¹ From Mercedes García, Pasture and Forage Research Institute, “Green Medicine: an Option of Richness” in “Sustainable Agriculture and Resistance: Transforming Food Production in Cuba”, pag. 218

⁶² From Leoncio Padròn Càceres, Martha Perez Viñas, “Integración de las prácticas de la medicina Tradicional y Natural al sistema de salud”, IDEASS Cuba, “Innovación para el Desarrollo y la Cooperación Sur- Sur”, pag. 4

for a price of 1 or 2 CUP, which means around 10 cents of CUC”⁶³. For the average Cuban, it is therefore much cheaper and convenient to buy a natural rather than a synthetic product.

A final important economic factor to consider is that the use of MTN practices in Cuba, as well as in other developing countries, is able to generate a strong source of employment. In fact, through the development of traditional and natural medicine, local employment can be created in the forms of agricultural work, local production of natural medicines, information on MTN, traditional health practices (massages, digital puncture carried out by health personnel) and development can be enhanced in these areas.

Cuba in comparative lights.....

Natural medicine, which is considered by developed countries as a simple “*option*”, has become a “*necessity*” for developing countries. Medicinal plants and traditional medicine are playing a very important role in underdeveloped countries of Latin America, the Caribbean, Asia and Africa, where the need for medicines and healthcare is extremely high.

It is not part of this research to draw a specific comparison between the health system in Cuba and that of any other Latin American and Caribbean country. Nevertheless, a very interesting question that is currently under debate is whether the Cuban integrated health model could be an effective solution to the problems undergone by many health systems throughout the Caribbean, Latin America as well as other developing countries.

The Cuban healthcare system, and its successful integration of MTN practices questions the “WTO (World Health Organization), World Bank and IMF (International Monetary Fund) principle that assumes that economic development is a premise to population’s health”⁶⁴.

⁶³ From interview with Prof. Francisco J. Moròn Rodríguez, Faculty of medical Sciences Dr. Salvador Allende, La Habana, Cuba, 01-07-2008.

⁶⁴ From Harris, R.L & Seid, M.G, “Globalisation and Health in the New Millennium” in Globalisation and Health, Leiden, Brill, 2004

Although Cuba could in many respects be considered as a Third World country, the mentality of its population on health matters is much more “westernized”, and mixes principles of western medicine together with principles of traditional and natural medicine. While most of the other developing countries’ health systems in and outside Latin America are still based on low technology, paramedic- based systems, Cuba has fought to developed a technological, physician based system. In the case of Cuba in fact, health has been achieved for all as a basic condition, notwithstanding the economic situation on the island.

In those Latin American countries with indigenous medical tradition like Bolivia, Peru, Brazil, Costa Rica, their health systems could, with the support of the state, work as effectively as in the Cuban case, and give solution to many of their healthcare problems. Nevertheless, as Dr. Moròn argues: “Due to the weakness of political decision in the healthcare field, indigenous traditional medicine is still emarginated and has never been integrated into the national health systems. In some of these countries, the health needs of the population are much higher than what we had in Cuba during the Special Period. During the 1980es and the 1990es many countries in Latin America and the Caribbean tried to achieve a programme of integration of MTN practices into the health system, but mostly with scarce results. For example Brazil in the 1990es created a very good programme on medicinal plants, but its integration into the health system never really took place”⁶⁵. As Moròn concludes: “From the point of view of a non socialist country, the introduction of MTN practices into the health system acts against the interests of pharmaceutical industries that are really strong in these countries”. Without entering any further economical debate, the success of the natural products’ trade in Cuba, relates, among other causes, to the lower level of capitalist interest and less investment undertaken by pharmaceutical companies on the island.

⁶⁵ From interview with Prof. Francisco J. Moròn Rodríguez, Faculty of medical Sciences Dr. Salvador Allende, La Habana , Cuba, 01-07-2008.

What has been achieved in Cuba can therefore be achieved in other countries with similar cultural, political and economic conditions. Nevertheless, in order to give solution to the problems suffered by the health systems of most developing countries, and achieve a Cuban-style integrative model, a strong governmental decision on health issues must be considered as a primary fundamental action.

“Las verdaderas tradiciones no prograsan, ya que representan el punto màs avanzado de toda verdad. Y el unico progreso realizable consiste en el conservar la forma y la fuerza de dichas tradiciones”⁶⁶.

STATEMENT OF WORD COUNT:

This dissertation contains 11, 951 words, including footnotes and references but excluding bibliography.

Chiara Stella Cochetti, 15/ 09/ 2008

⁶⁶ From Antonin Artaud, “Los ritos de los reyes de la Atlantida”, in “Los Takahumara”, Tusquets Editores, Barcelona, 1985

BIBLIOGRAPHY

- Artaud, Antonin, “Los ritos de los reyes de la Atlantida”, in “Los Takahumara”, Tusquets Editores, Barcelona, 1985
- Cabrera, Lydia, “El Monte”, Centro de Estudios Martianos, Editorial Letras Cubanas, La Habana, Cuba, 1993
- Cabrera, Lydia, “La Medicina Popular de Cuba: Mèdicos de antaño, curanderos, santeros y paleros de hogaño”, “Colección del Chicherekù en el Exilio”, Ultra Graphics Corporation, Miami, Florida 33166, 1984
- Direction of Traditional and Natural Medicine, MINISAP, “Programa Nacional de Medicina Tradicional y Natural”, Ministerio de Salud Pública (Ministry of Public Health), September 1999, Ciudad La Habana
- Gallo, Jose Seoane, “El Folclor mèdico de Cuba”, Editorial de Ciencias Sociales, La Habana, 1988
- García, Mercedes, Pasture and Forage Research Institute, “Green Medicine: an Option of Richness” in “Sustainable Agriculture and Resistance: Transforming Food Production in Cuba” (F. Funes, L. García, M. Bourque, N. Pèrez, P. Rosset), Food First Books, Oakland, California, 2002, Institute for Food and Development Policy
- Good, B. J., “Medicine, Rationality, and Experience: An Anthropological Perspective”, Cambridge University Press, Cambridge, 1994
- Harris, R.L & Seid, M.G, “Globalisation and Health in the New Millennium” in Globalisation and Health, Leiden, Brill, 2004
- Moròn Rodríguez, Francisco J., “La Experiencia TRAMIL”, Chapter 9 “Salud y Medio Ambiente, Impacto de TRAMIL en Cuba”, in “Traditional Medicine and Public Health: the Experience and Lessons of the TRAMIL Network”, (TRAMIL ed.), IDRC- Enda-Caribe, Santo Domingo, R.D, 2009 (in the press)
- Moròn Rodríguez, Francisco J., Chapter 5 “Farmacología y ensayos clínicos de plantas TRAMIL: La experiencia de Cuba”, “Validación Científica- seguridad y eficacia” in “Traditional Medicine and Public Health: the Experience and Lessons of the TRAMIL Network”, (TRAMIL ed.), IDRC- Enda-Caribe, Santo Domingo, R.D, 2009 (in the press)
- Padròn Càceres, Leoncio, Perez Viñas, Martha, “Integración de las prácticas de la medicina Tradicional y Natural al sistema de salud”, IDEASS Cuba, “Innovación para el Desarrollo y la Cooperación Sur- Sur”, Centro Nacional para el desarrollo de la Medicina Tradicional y Natural de Cuba, Ciudad de La Habana, Cuba, 2002
- Strathern and Stewart, “Curing and Healing: Medical Anthropology in Global Perspective”, Carolina Academic Press, Durham N.C, 1999
- TRAMIL Website (<http://www.funredes.org/endacaribe/traduccion/tramil.html>), 03-09-2008

Wedel, Johan, "Santería Healing: A journey into the Afro- Cuban World of Divinities, Spirits, and Sorcery", University Press of Florida, 2004

Interviews:

Allardo Llane, Martina, Community of "Las Terrazas", La Moca, Pinar del Rio, Cuba, 25-06-2008.

Arièl Odoardo, "Babalawo", El Vedado, La Habana, Cuba, 04-07-2008

Cardena Rodríguez, Jose (Tito), "Babalawo", "Centro Universitario Estudiantil de la Universidad de la Habana", 04-07-2008

Dr. Delgado, Gregorio, Specialist in Microbiology and Parasitological science and official medical historian of the Cuban Ministry of Health MINISAP, "Oficina del Historiador del Ministerio de Salud Pública", calzada del Cerro, Cerro, La Habana, 30-06-2008

Prof. Moròn Rodríguez, Francisco J., "Professor of Pharmacology" at the "Central Laboratory of Pharmacology, Faculty of Medical Science Dr. Salvador Allende", specialist in "Phytotherapy" and President of the "Comisión Nacional de Investigaciones y Programa RAMAL", Faculty of medical Sciences Dr. Salvador Allende, La Habana , Cuba, 01-07-2008.

