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***“Universal” doesn’t just apply to health care, but to every sector’s actions taken to protect the population’s health.***

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Dr Pastor Castell-Florit’s career in public health spans work at local, national and international levels. In 2016, he received PAHO’s Award for Health Administration in the Americas, for “outstanding leadership and valuable contributions to the management and administration of the Cuban National Health System.” He serves as president of Cuba’s National Council of Scientific Societies in Health, as director of the National School of Public Health, and is a member of the Cuban Academy of Sciences. He has published numerous books and articles on social determinants of health and intersectoral actions to address them, and holds doctorates in science and the health sciences.



E. Añé

**MEDICC Review: How would you describe Cuba’s response to COVID-19, in terms of multisector or intersectoral actions?**

**Pastor Castell-Florit:** For the last 61 years, Cuba has been applying an intersectoral approach to problems of health, well-being and quality of life. In fact, described as the coordinated actions of institutions across sectors, this is one of the principles of Cuban public health, along with community participation.

Nevertheless, it’s undeniable that times of crisis, like the one humanity is confronting now, demand greater integration and solidarity from the social and economic sectors, in our case through coordinated action at the local, national and international levels under a central government-state leadership. This is essential if we’re to eliminate or minimize the problems and their associated causes that endanger people’s lives—and thus threaten social and economic development if not tackled in time—by assessing the situation and applying the resources at hand.

When the first imported COVID-19 cases appeared in Cuba, the government broadly convened social and economic sectors, social organizations and others to plan, organize, lead and monitor concrete actions aimed at safeguarding the population’s health.

**MEDICC Review: How is Cuba’s COVID-19 response structured?**

**Pastor Castell-Florit:** Among those convened to confront the pandemic were the Council of Ministers, provincial and municipal governments and their health system dependencies, as well as others such as the biotech sector and the Ministries of Labor and Social Security; Education; Transportation; Communications; Culture; Food Industry; Agriculture; Domestic Trade; Hydraulic Resources; Science, Technology and the Environment; and the Ministry of the Interior.

At the same time, community organizations were mobilized, including the Committees for the Defense of the Revolution, the Federation of Cuban Women, Small Farmers’ Association, University Student Federation, and High School Student Federation, among others.

President Miguel Díaz-Canel Bermúdez chairs daily meetings to review specific actions taken by each sector, monitor their implementation, and decide new ones as demanded by the stage of the pandemic in Cuba. Timely information from these meetings and on the measures taken is made public via the media and official bulletins.

# Leading Voices on COVID-19

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## **MEDICC Review: What are some of the intersectoral actions being taken?**

**Pastor Castell-Florit:** The main intersectoral activities are aimed at reinforcing health promotion (information, education and communication), so the public understands the situation and can act in ways that keep them from contracting the disease or transmitting it to others. These are also aimed at controlling risk factors by introducing more ways to sanitize and disinfect; ensuring food supplies; protecting the most vulnerable populations; social distancing and border control.

Here are some examples:

The Ministry of Public Health set up a central command post to daily update detailed information on the incidence and prevalence of the disease, cases isolated, confirmed cases, patient status, operation of the surveillance system and active case-finding in the neighborhood. The basic work teams (family doctors and nurses) are key for case finding (active screening) at the neighborhood level. They are assisted by medical school professors and students, as well as local organizations. Depending on the clinical picture in each case, and taking into account the patterns of viral circulation in the area, it's decided how to proceed: whether to confine a patient at home, send a suspected case to one of the isolation centers for observation, or send the person directly to hospital.

The entire health system is now geared to prevent and control the spread of COVID-19, including separate areas in health facilities for walk-ins who feel ill, postponement of elective surgeries, and so forth. At the same time, we continue to prioritize maternal and child health care, with specialized attention to pregnant women and newborns, for example. I should also mention that, in order to avoid crowding at doctors' offices, prescription drugs for chronic disease patients, normally refillable for up to a year, have been extended for at least six months, and may be extended further depending on how the situation develops. This of course has particular importance for older adults who tend to have more comorbidities.

The Ministry of the Economy and Planning systematically analyzes how to ensure basic resources needed to confront the epidemic, making required adjustments to the national economic plan.

The Ministries of Agriculture and the Food Industry assess current production levels of foodstuffs and project those needed to respond to the population's basic needs in this situation.

The Ministry of Domestic Trade organizes distribution throughout the country of foodstuffs as well as personal hygiene, cleaning, protection and disinfection supplies. This also means delivering these items, for example, in areas under quarantine. It also ensures that subsidized basic food staples reach local grocery stores as they do in normal times, and that persons with particular nutritional needs continue to receive their special allotments... whether due to their age (children) or health conditions (diabetics, for example).

Community Services establishes a sustainable program for collection and management of garbage and other waste, to help maintain a clean environment.

The media is responsible for systematically communicating preventive messages and providing updates on the behavior of the pandemic globally and in Cuba. Radio and television entertainment programming has also been augmented to help encourage people to stay sheltered at home.

The Ministries of Education and Higher Education have developed teleclasses for primary and secondary school students and also through information-communication technologies, to provide continuity to teaching while schools are closed.

The Ministry of Labor and Social Security approved resolutions to protect workers, orienting telecommuting where possible. These have also maintained people's salaries and provided support in cases where people cannot continue working because they are either particularly vulnerable themselves or are taking care of someone at home. The resolutions also protect workers sick with the flu or other ailments, or who are either placed in isolation or hospitalized.

The Hydraulic Resources Institute is taking on special projects and finding alternatives to address the deficit of water supplies in some areas, so that potable water continues to reach everyone at home.

The Ministry of Transportation took measures for their employees to apply special cleaning fluids in public buses and mandated their drivers, other workers and the general public to fulfill rules on board, including use of face masks. Transportation to and from health facilities is prioritized. As we move forward, public transportation is expected to be minimized.

The Ministry of the Interior, through the national police force, helps keep the public informed and insists on respect for physical distancing and use of face masks. It is also responsible for monitoring implementation of national regulations concerning such issues as physical distancing, quarantine, and so forth, and are empowered to impose fines or detain people who violate these measures, who can be charged with propagating an epidemic disease.

Members of social organizations participate in active screening (case finding) and pay particular attention to older adults who live alone and who must shelter at home, given their vulnerability.

It's important to note the role of intersectoral support activities to transport and attend to the specialized Cuban health professionals who are traveling abroad (with the Henry Reeve Emergency Medical Contingent) to assist other COVID-19 affected countries. And I should also mention those who helped transfer the passengers (some sick with COVID-19) from the MS Braemar cruise ship to charter flights to return to the UK.

## **MEDICC Review: What role is National Civil Defense playing?**

**Pastor Castell-Florit:** The National Civil Defense network is responsible for protecting the population and the economy in times of disaster and exceptional situations like this one, and it also has a role in rescue operations and urgent repairs of vital systems.

So now, Civil Defense plays an important part in organizing and implementing measures related to physical distancing, assisting in food distribution, and generally in supporting organizationally the various activities being carried out to address the pandemic.

During the phase of limited local transmission—in which case clusters have been identified in specific locales with no known contact traced to a traveler from a country where COVID-19 is present—Civil Defense works with others to carry out the quarantine measures according to the Ministry of Public Health's technical guidelines and the national plan in place for COVID-19 prevention and control.

This means seeing to it that movement is restricted within and also in and out of quarantined areas, coupled with support for increased case-finding efforts, isolation of suspected cases, timely treatment of confirmed patients, disinfecting and other health and hygiene measures.

**MEDICC Review: Each country has resources and strengths it can draw upon in such times of crisis, in this case, a pandemic. What are the most important ones in Cuba?**

**Pastor Castell-Florit:** The first is establishing health as every person's right and as the responsibility of the state; accessible, free, health services oriented towards health promotion and disease prevention, community-engaged and oriented around pri-

mary health care. Then the conscious political will to make this a reality, to empower levels of government, the different sectors and the population (at the community level and individually) to work towards health, well-being and quality of life for the whole population.

We have a tradition of intersectoral actions for health with community engagement, and also of managerial programmatic planning and monitoring, from the national to the local levels. These are vital, since intersectoral actions concerning health are directly related to the population's problems. There is a sense in which "universal" doesn't just apply to health care, but to every sector's actions taken to protect the population's health. In turn, we depend upon a population that is well organized and also disciplined.

In short, unified, state leadership opens the way for all social and economic sectors to contribute from their particular vantage points, to ensure security and social welfare for everyone, so that essential resources are distributed rationally to the whole population, providing the context for health in all policies. 