Lessons from Cuba for Addressing Health and Human Services in Rural Communities- AZ Rural Health Conference, August 4, 2015, Sedona, AZ
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National Geographic Expedition “People to People” Tour-April 11-21, 2015
- US Restrictions and Requirements

Cuban Health and Human Services in Context
- Political Economics
  - US Imperialism and Control
  - Fidel Castro-Communism and Revolution
  - Raul Castro-Practical and Pragmatic
- Cuban Population Characteristics
  - Rural vs Urban
  - Racial Makeup and Relations
  - Socialistic Class Structure, Employment and Income
  - Cultural Mixture
- Rural vs Urban Infrastructure
  - Housing
  - Transportation
  - Agriculture
- Social Issues
  - Individual vs Common Good
  - Basic Needs for Food, Shelter, Health and Education
  - Crime and Law Enforcement
  - Poverty, Homelessness and Neighborhood Revitalization
  - Provincial vs Centralized Governance
  - Lessening of Military Presence and Exportation
  - Communities in Defense of the Revolution
- Education
  - K-12 Requirement
  - Higher Education-Selection on Aptitude
  - Free Medical and Dental
- Cultural Aspects
  - Art, Music, Dance and Literature
  - Religion
  - Universities and Museums
  - Recreation and Entertainment
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- **Healthcare**
  - Beveridge Model of Socialized Medicine
  - Removal of Profit Motive
  - Elitist Class Eliminated
  - Rural Priority for Primary Care
  - Recreation and Cultural Activities for Wellness
  - Quality Medical Schools and Hospitals
  - Exportation of Medical Care
  - Pharmaceutical Research and Development

**Challenges of Communist Revolution**
- Reliance On Other Communist Countries
- Increased Trade Deficit
- Inadequacy of State Resources
- Capital vs Labor Imbalance
- Bureaucratic Inefficiencies and Corruption
- Governance by Elite Few and Communist Party
- Lack of Individual Incentives
- Elimination of Middle Class
- Agricultural Inefficiencies and Shortages
- US Embargo and Travel Restrictions
- Reduction in Tourism
- Privatization and Tax Revenue Eliminated
- Crumbling Infrastructure and Poor Transportation
- Military Involvement In Other Countries
- US Crises and Tit For Tat Propaganda

**Strengths and Opportunities**
- Community Involvement and Neighborhood Revitalization
- Cultural Activity as Social Determinants of Health
- Innovative Recreational Approaches
- Basic Needs Met
- Class and Income Equalization
- Increased Privatization and Improved Trade Relations
- Innovative Solutions
- Improved and Required Education
References

P18. “Although this welfare-state approach to health care seems thoroughly European, the two purest examples of the Beveridge Model—or “socialized medicine”—are both found in the Western Hemisphere: Cuba and the U.S. Department of Veterans Affairs. In both of those systems, all the health care professionals work for the government in government-owned facilities, and patients generally receive no bills.”

P36. “…where the Communist Party is an elite organization that allows for no political competition…There can be different relationships between dictators and the party, where in some cases the party exerts huge influence (the Soviet Union) while in others the leader wields the power (Cuba).

P120. “The inherent vice of capitalism is the unequal sharing of blessings; the inherent virtue of socialism is the equal sharing of miseries.”  
WINSTON CHURCHILL

P23. “Communism’s base of support is in the countryside, where many of the promises of the revolution have been realized.”

4. Marc Frank, *Cuban Revelations-Behind the Scenes in Havana*,  
(University Press of Florida, 2013)