THE IMPACT OF COVID-19 ON CUBA IN 2020

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People in Need

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**KEY WORDS**

*Cuba, COVID-19, health-care, testing, crisis, doctors, journalists*
Sars-Cov-2, a novel human coronavirus, resulted in the COVID-19 pandemic, which has caused more than 93.3 million cases and almost 2 million known fatalities worldwide since the beginning of the pandemic to January 15th, 2021. Inevitably, the coronavirus has presented innumerable challenges to health care systems worldwide, while measures taken to mitigate virus transmission have had substantive social and economic implications on countries around the world, including Cuba. Despite the Cuban government’s measures to ban tourist arrivals and impose a nationwide quarantine, the country has failed to avert the pandemic and has reported 11,205 coronavirus cases and 142 deaths as of December 28th. Moreover, Cuba’s widespread poverty, insufficiently funded and outdated health care system, supply shortages, and lack of formal employment opportunities have rendered the country especially susceptible to the distressing implications of the COVID-19 pandemic.

In response to the pandemic, the Cuban government has utilized a containment plan focused on prevention and control as opposed to mitigation, which has also enabled the regime to impose draconian restrictions on the lives of journalists, activists, and marginalized communities.[1] According to the Eye on Cuba database, there has been an important number of human rights violations occurring amidst the pandemic, with 335 reported violations of basic freedoms by Cuban authorities and 94 cases of arbitrary detentions recorded between March 1, 2020, and September 30, 2020.[2]

Notably, human rights abuses committed against Cuban civilians include threats, harassment, police summons, fines, beatings, and raids, and most frequently occurred in the provinces
of Havana, Santiago de Cuba, and Villa Clara. Moreover, the Cuban government has exhibited a repressive pattern that endeavors to illegally place human rights activists, journalists, and independent artists under house arrest during the pandemic.[3]

Although the Cuban government’s approach to mitigating the pandemic appears effective, the regime’s measures to selectively enforce social distancing, implement widespread surveillance, and silence independent journalists and activists have proven detrimental for human rights protections in the country, not to mention that there have been numerous cases of agglomerated citizens trying to obtain supplies of basic products. Additionally, the regime’s decision to make substantive cuts to the national budget for public health care, close hospitals in rural areas, and its failure to adequately supply hospitals with medical equipment has exacerbated the implications of the pandemic on Cuban civilians.
The Cuban government utilized its mask mandate to target activists for supposedly failing to understand the severity of the pandemic by not wearing a mask, even prior to declaring a national state of emergency.

While Cuba confirmed its first COVID-19 cases in mid-March, the country began to prepare its national response in late January. Dubbed The Plan for Prevention and Control of the Disease, Cuba’s pandemic strategy included healthcare worker training, reinforcement of the National Program for the Surveillance of Acute Respiratory Infections (ARI), and the expansion of laboratory infrastructure and facilities for the molecular diagnostic of COVID-19 infections. The Cuban strategy for controlling the spread of COVID-19 has been lauded by experts as effectual because it entailed extensive ARI surveillance, widespread contact tracing, and a rational testing program, as well as a mandate that civilians wear masks in public places. Moreover, proponents of Cuba’s pandemic response claim the state-controlled economy and public health policy facilitated the mobilization of emergency resources and the rapid isolation of confirmed cases. However, according to the Cuban Observatory of Human Rights, the government failed to declare a state of emergency in March when the pandemic first appeared in Cuba because it initially failed to fathom the severity of the pandemic. Furthermore, the Cuban government utilized its mask mandate to target activists for supposedly failing to understand the severity of the pandemic by not wearing a mask, even prior to declaring a national state of emergency.
Cuba employed its widespread health care system and the collaboration of undergraduate medical students to implement the door-to-door surveillance of ARI to identify suspected cases and immediately assess whether to recommend home isolation and prioritized airport, marina, and port surveillance.[7] Ultimately, the colossal surveillance program implemented before the pandemic reaching Cuba's shores proved to be invaluable to the regime's efforts to detect and contain the virus. According to official data, by March 22nd, 2020 (40 total confirmed cases) the Cuban primary health care system was monitoring over 37,000 people.[8] Early identified suspected cases were immediately isolated for 14 days and underwent molecular diagnostics, while confirmed cases were hospitalized and treated.[9] Cuba's distinctly comprehensive approach to surveillance greatly facilitated the country's containment of the virus, despite not being a final solution.

Because Cuba was incapable of performing mass testing, the country utilized molecular testing to detect the virus, which was enabled by equipping up to seven laboratories in various regions of the country. According to the Cuban government, the country followed the World Health Organization's (WHO) recommendations by gradually increasing laboratorial capacity for molecular diagnosis, performing daily tests, and ensuring that no more than 10% of these tests were positive.[10]. According to the National Director of Epidemiology Doctor Francisco Durán, Cuba began to use rapid tests in April to screen travelers coming from countries with COVID-19 transmission, then upon identifying those with a serious acute respiratory condition, a real-time polymerase chain reaction (RT-PCR) test was administered to conclusively determine the presence of COVID-19. Even so, it should be noted that the only statistics available on coronavirus cases on the island originate from the government, and official data on acute
respiratory diseases in March and April suggest that the outbreak in Cuba was likely more widespread than reported by health authorities. Additionally, despite the country’s comprehensive testing approach, Cuban officials have been noted to avoid formally identifying prospective COVID-19 cases by attributing patients’ symptoms to other respiratory illnesses, which has allowed them to refrain from testing many civilians.[11]

In conjunction with its extensive surveillance and testing programs, Cuba has also employed an intense media campaign. According to Cuban Doctor Francisco Durán, civilians across the island watch information and messages about the virus and tune in to the government’s daily briefing, during which the number and location of new cases and the population in serious condition are reported. However, according to an activist on the island, the state has been obscure concerning the spread of the pandemic, and state-controlled media does not broadcast complete information to civilians. Hospital managers also suppress the spread of information concerning the pandemic by threatening workers with consequences for publishing photos or information documenting Cuban hospital conditions. Due to the Cuban government’s failure to accurately inform citizens about COVID-19 and its active censorship of information, independent journalism has become more crucial during the pandemic for Cubans. Even so, the Cuban government has utilized the COVID-19 pandemic to imprison, persecute, and intimidate independent journalists who supply the populace with critical information. A notable tactic used by the Cuban government to suppress independent journalism, is to fine journalists under Decree 370, which bans the dissemination of “information contrary to the social interest, morals, good manners, and integrity of people” on social media before arbitrarily
detaining them for “resistance” and “disobedience”. When arrested by state agents, journalists grapple with a heightened risk of contracting COVID-19 in prisons, as Cuban facilities do not enable isolation, social distancing, or adequate sanitation practices. According to the United States Agency for International Development’s Acting Administrator John Barsa, the agency has condemned the Cuban government’s suppression of the media in the “strongest possible terms”, and the United States pays tribute to the Cuban journalists who work, at great personal risk, to bring candid news and accurate information to the Cuban people – particularly during this pandemic.[12] Moreover, numerous international non-governmental organizations, including Reporters Sans Frontières and Human Rights Watch have reported and condemned Cuba’s extensive media suppression.
Unequivocally, understanding Cuba’s health care system is integral to rationalizing the failures and triumphs of the regime’s efforts to impede the spread of COVID-19. Due to the distinct nature of Cuba’s healthcare system, the country has received great deal of attention from global health experts, who have expressed varied opinions concerning the viability of the country’s health care system. For instance, many global health experts have established Cuba’s early implementation of a universal health care system, fixation on preventative medicine, comparatively low infant mortality rate, and low doctor to patient ratio as an example for other countries to follow. Additionally, global health experts have lauded the Cuban government’s assertion that health care should be a fundamental and universally accessible right and its encouragement of public participation in the health care system’s development, principles enshrined in the country’s 1976 Constitution adopted by national plebiscite and its 1983 Public Health Law.[13]

Cuba’s health care system is also renowned for its international medical diplomacy, which has sent medical staff to numerous countries during public health crises. However, critics note that praise for Cuba’s health care system primarily stems from an excessive focus on the country’s infant mortality rate (IMR) which has been manipulated by the Cuban government to attain political legitimacy.[14] Furthermore, it has been argued that Cuba’s health achievements have been attained at the expense of fundamental human rights such as patient consent and freedom of movement. [15] Cuba’s poverty has also detrimentally impacted the overall quality of medical care available in the country by preventing the modernization of facilities, stagnating health worker salaries, and barring hospitals’ acquisition of vital medical equipment.
The Cuban health care system’s viability is undermined by the dilapidated state of many Cuban hospitals that have cracked walls, broken beds, and unsanitary conditions.[16] The evident disparity between Cuba’s enviable medical statistics and the derelict state of its hospitals has been dubbed the Cuban Health Paradox because the conditions of Cuba’s health care facilities are incongruous with its successful public health statistics.[17] Even so, it should be noted that the Cuban Health Paradox might be partially explained by the increased emphasis the Cuban government places on preventive care and public health education.

As was previously stated, Cuba possesses one of the lowest doctor-to-patient ratios in the world, which should logically improve the quality of healthcare on the island. However, the Cuban government has prioritized sending doctors abroad for profit, which has adversely impacted the quality of its domestic hospitals. Due to the precedence the Cuban government has placed in medical diplomacy at the expense of domestic improvement, “one in five local surgeries has been forced to close as a result of a lack of medical personnel and supplies”. [18]

During the pandemic, Cuba’s undue prioritization of exporting medical services to other countries above grappling with domestic health care issues has become increasingly apparent, with the government sending more than 2,000 health workers to other countries to treat COVID-19 patients while closing rural hospitals and substantially decreasing state public health expenditures. [19] As an increased number of Cuban doctors have been sent on missions abroad, hospitals have been forced to create more COVID-19 treatment groups comprised of doctors from unrelated specialties to treat new cases, reducing the number of doctors
As an increased number of Cuban doctors have been sent on missions abroad, hospitals have been forced to create more COVID-19 treatment groups comprised of doctors from unrelated specialties to treat new cases, reducing the number of doctors available to care for Cubans needing specialized treatment.
Cuba’s inadequate hospital facilities, increased emphasis on medical diplomacy at the expense of domestic health care, and cuts to public health expenditures are not the only factors detrimentally affecting its pandemic response. Increased health care costs, inefficient health resource allocation, and tight financial restrictions on importing medicines have caused circumstances to become even direr during the pandemic.[23] The pandemic has brought about a significant decline in revenue from tourism and remittances for the Cuban government, which has greatly inhibited the government’s financial ability to import basic medical supplies. Additionally, the United States’ embargo on Cuba imposed a cap on the sale of medical goods that has further reduced the availability of supplies such as masks, gloves, and ventilators.

Aside from sanctions, Cuba’s relatively impoverished position places it at an inherent disadvantage in the global competition for medical supplies during COVID-19, as manufacturers customarily respond to the highest bidder.[24] As a result, many Cuban hospitals lack the medication needed to treat patients with severe cases of COVID-19, and thus send them on long journeys to other facilities for treatment. Additionally, shortages have forced many Cubans with preexisting conditions who rely on prescriptions to join long lines and make repeated trips to the nearest clinic for medication sold at exorbitant prices, which contradicts the Cuban government’s otherwise stringent approach to enforcing social distancing and stay-at-home orders. The lives of health care workers in Cuba have also been endangered by a lack of available protective equipment, as health authorities reportedly only provide one mask to health care workers per 24-hour shift, and before donations from China, Cuban medical staff lacked disposable gowns, surgical caps, or goggles.[25]
The sanitation practices at many Cuban clinics during the pandemic fail to prevent virus transmission and ultimately jeopardize the lives of patients. According to Cuban family doctor Ernesto, some patients reside in apartments without running water, which is deleterious due to the cruciality of handwashing during the pandemic.[26] Another family doctor admitted to neglecting to practice adequate protective measures while treating COVID-19 patients due to exhaustion.[27] Additionally, the previously mentioned shortages of medical equipment in hospitals has forced some health care workers to reuse disposable materials, such as syringes, needles, and trocars, which presents numerous apparent health risks for patients.[28]

Overall, as evidenced by a study conducted by the Cuban Observatory of Human Rights, patients and their family members have experienced a significant decline in the quality of health care provided during the pandemic, reporting overwhelmed hospitals, malpractice, and negligence, with 60% of Cubans expressing concern about hospital facilities.[29]
While a majority of Latin America has been afflicted by the economic crisis due to COVID-19, the state and structure of Cuba’s economy have further compounded the significant financial challenges presented by the pandemic. Cuba’s state commanded economy has proven inefficient over the past 60 years, as the country has struggled to finance its imports and generate sustainable growth without receiving aid from foreign countries. Furthermore, the Cuban industrial, mining, and sugar production have failed to yield sufficient return, while the production of crucial agricultural and fishing products on the island has declined.

Due to the overall inefficiency of Cuba’s economy, the government inevitably turned to tourism for revenue, which proved especially effectual after the United States eased diplomatic relations with Cuba in 2015 and American tourists eventually became the second-largest group of tourists on the island after Canadians.[31] However, because of Hurricane Irma, reports of sonic attacks on American diplomats, and President Trump’s introduction of more stringent travel restrictions, tourism declined during the end of 2017 before eventually recovering due to all-inclusive cruises bringing tourists to the island.[32]

Even so, the COVID-19 pandemic has now jeopardized the tourism industry in Cuba, rendering the economy even more ill-equipped to provide for civilians and challenging the sole source of income for many Cubans who indirectly profited from the tourism. Moreover, U.S. sanctions on Cuba have rendered the country’s retail system chaotic while deleteriously impacting its economy.[33]
Cuba continually grappled with widespread, abject poverty before the pandemic: approximately 2.6 million Cuban households (66%) received less than 2,500 Cuban pesos ($100) per month, with half of such families subsisting on less than $40 a month or less than $1.33 a day.[34] However, the seemingly insurmountable economic hardships presented by the pandemic have now worsened living conditions for many Cuban families causing widespread food shortages, unemployment, and financial crises.

THE ECONOMIC IMPLICATIONS ON CIVILIANS

The Cuban Observatory on Human Right’s Second Report on the State of Social Rights in Cuba[35] reveals that as of June 2020:

- 80% of Cubans have a situation of severe or moderate economic crisis in their families.
- 40% of respondents reported trouble surviving.
- 38% of respondents reported having enough to live but no to buy anything additional.
- 81% of the population does not receive government assistance.
Tourism is vital to the Cuban economy, and in 2016 provided for approximately 2.5 percent of the country’s GDP in direct contribution to national income, and some three times that amount if indirect measures are considered.[36] Incontrovertibly, the pandemic has detrimentally impacted the global tourism industry, and consequently, the Cuban government’s ability to attain hard currency. Realizing the cruciality of tourism to its economic sustainability, the Cuban government has elected to take advantage of its success in controlling outbreaks by welcoming tourists back to the island, even as most of the world struggles with mounting cases and unmitigable outbreaks.[37] However, all tourists welcomed to Cuba are subject to mandatory testing and monitoring of their hygiene practices to prevent a resurgence in cases.

Additionally, as was previously mentioned, the Cuban government prioritizes sending doctors abroad for profit. Due to the pandemic, the government has used the global influx in demand for doctors to supplement its economy’s lost tourism revenue by sending thousands of health workers abroad at the expense of its domestic health care system. The government has also moved to introduce extensive economic reforms such as an increase in worker salaries, pension reform, eliminated subsidies, and more allotted autonomy for state-run companies. Furthermore, to increase the number of dollars and euros in circulation, the government has opened new state-run stores that do not accept Cuban pesos. However, in doing so, the government has rendered goods more inaccessible for many poorer Cubans who lack foreign currency. Critics have argued that because Cuba’s economic situation is so dire, it has resorted to extracting its impoverished civilians’ savings and remittances to recover lost revenue and pay external debts, even as many Cubans struggle to survive.[38]
While a vast majority of Cubans reported that their family’s diet was deficient prior to the pandemic, COVID-19 has made securing basic provisions more difficult for many, who have been forced to join long lines for food at the expense of their safety. Notably, while Cuba imports roughly two-thirds of the food it consumes, a decrease in Venezuelan aid and the U.S. embargo have led to shortages in imported food and have subsequently caused widespread scarcity. Additionally, despite the Cuban government’s decision to increase the food allotted by its rationing system, La Libreta, during the pandemic, food prices have still increased substantially. Due to all the above, many Cubans have resorted to purchasing goods from the country’s expensive and illegal black market or to growing their own food.

Internal migrants have been barred from acquiring rationed goods during the pandemic because the supplies are customarily delivered to their home addresses which have been made inaccessible due to the government cutting off transportation between provinces during the pandemic. Cuban President Miguel Díaz-Canel also announced in October that the government intends to eliminate La Libreta after the Cuban monetary and exchange unification transpires which may further bar Cubans from accessing food. Income inequality has further stratified the impact of food shortages on Cuban civilians, as while more affluent families were able to stockpile necessities before the nation-wide quarantine, poorer Cubans lacked the finances necessary to accumulate supplies. Overall, Cuba’s food crisis during COVID-19 has presented a significant humanitarian crisis on the island, as more civilians struggle to acquire basic provisions and stretch insufficient government rations.
With the emergence of the COVID-19 pandemic necessitating social isolation and adequate sanitation practices for civilians, housing quality and availability have proven crucial to many countries’ pandemic response. However, housing is among the complex challenges that have undermined the Cuban government’s pandemic strategy. Before the pandemic, due to the inability of the Cuban government to meet housing demands, most Cubans lacked sufficient housing, with 63% of those living in households with less than 40 square meters being families comprised of between 3 and 6 people.[45] Inevitably, the overpopulated nature of many Cuban households has presented numerous public health challenges for the government during the pandemic, as social distancing is fundamental to Cuba’s outbreak prevention strategy.

“Housing conditions on the island are precarious, with a staggering seven out of ten of the homes in need of repair.”

Additionally, although handwashing is vital to preventing COVID-19 transmission among Cubans, many reside in households without continual access to water due to the country’s inefficient water system, rendering the practice difficult. While Cuba boasts a near-zero rate of homelessness, skeptics note that government housing subsidies and the cultural tradition of multifamily homes cause actual rates of homelessness to go underreported, which is integral to accurately identifying vulnerable populations.[46]
Furthermore, although statistics indicate that most Cubans have access to shelter, housing conditions on the island are precarious, with a staggering seven out of ten of the nation’s homes in need of repair.[47] As the pandemic has sequestered many Cubans into their homes for prolonged periods, the significant percentage of houses on the island vulnerable to collapse continually endangers the lives of civilians.
As with other countries, the pandemic has had a disproportionate impact on certain marginalized populations in Cuba and has also rendered certain subsets of the population more vulnerable to contracting or dying from the virus. For instance, 81% of elderly Cubans have a preexisting condition, and as a result, account for 85.1% of COVID-19 deaths.[48]

Additionally, retired Cubans are more susceptible to homelessness during the pandemic due to their fixed, insufficient pensions. As 10.6% of Cubans are over 65 years of age, this means that a substantial part of the population has been forced to grapple with financial hardship, a lack of shelter, and a deadly pandemic at the same time.[49]

Cuban women have also been disproportionately impacted by the pandemic, as while they represent more than 68.8% of the staff working in the health and social care sector, they also account for 48.4% of heads of households on the island.[50] Another factor exacerbating the excessive burden of caretaking that a substantial number of women carry during the pandemic, is the increased psychological vulnerability that many report due to fears of contracting COVID-19. According to research, the probability of a woman reporting a high level of fear compared to low fear due to the pandemic was 3.45 times more than that for a male.[51]

Additionally, an increased number of Cuban women have experienced domestic violence during quarantine, as they have been forced to live near their abusers for more prolonged periods. Despite this apparent influx in cases, the Cuban government has neglected to take adequate measures to combat domestic violence.
against women during quarantine, and cases of femicide are not disclosed by authorities or reported by the state media.[52] Notably, most domestic abuse cases in Cuba go unreported because of the financial dependence that many women have on their partners as well as the dismissive response that women receive from authorities upon reporting domestic violence. Irrefutably, the pandemic has rendered life in Cuba more precarious for many vulnerable groups, who do not receive adequate governmental protections or provisions.
From an epidemiological, economic, and humanitarian standpoint, the pandemic has presented numerous challenges for the Cuban government, while exacerbating preexisting ones. Although the Cuban government has taken extensive measures to curtail the spread of the pandemic such as testing civilians and enforcing social distancing measures, the country’s decision to export an increased number of physicians during the pandemic, its dilapidated medical facilities, insufficient medical equipment imports, and substantial budget cuts to public health care have undermined its pandemic response. Moreover, the government has engaged in extensive media suppression, barring much of the populace from accessing crucial information during the pandemic, while utilizing COVID-19 to target and punish activists through fines.

Despite the shortcomings present in its response, the Cuban government has voiced intent to introduce economic reform. However, the government’s economic strategy is unlikely to alleviate the unprecedented financial and psychological hardships that deleteriously impact Cubans’ ability to sustain themselves. Furthermore, facets of its proposed approach to economic reform have exacerbated the financial difficulties faced by impoverished Cubans without access to foreign currencies. Overall, while the centralized, state-controlled nature of Cuba’s government and economy facilitated its rapid and concerted response to the pandemic, COVID-19 has further compounded factors challenging its ability to provide for Cuban civilians, while revealing evident gaps in its widely revered health care system.


[30] Mesa-Lago, There’s Only One Way Out for Cuba’s Dismal Economy

[39] El Estado De Los Derechos Sociales En Cuba


[41] La Libreta, otherwise known as the “Supplies Booklet” is a rationing book dating back to 1962. The book determines which rations are allotted and how often they can be acquired. Allowances in the book vary based on age group and needs and rationed goods are sold at a small percentage of market value.


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[48] Mesa-Lago, La COVID-19 En Cuba Y Sus Consecuencias En La Etapa De Post-Pandemia
[49] Hawthorne, Hidden Homelessness in Cuba
[50] Mesa-Lago, La COVID-19 En Cuba Y Sus Consecuencias En La Etapa De Post-Pandemia