Health consequences of Cuba’s Special Period

Manuel Franco and colleagues have analyzed some of the health consequences of Cuba’s socioeconomic collapse in 1990–1995, when the country lost the funding from the Soviet Union on which it had relied for the previous 30 years.1,2 During this period, Cubans essentially experienced a famine: adults had an average daily protein intake of 15–20 g and lost an average of 5%–25% of their body weight. Franco and colleagues neglected to mention many of the negative physical, mental and social consequences of this so-called Special Period.

The famine in Cuba during the Special Period was caused by political and economic factors similar to the ones that caused a famine in North Korea in the mid-1990s. Both countries were run by authoritarian regimes that denied ordinary people the food to which they were entitled when the public food distribution collapsed; priority was given to the elite classes and the military.3 In North Korea, 3%–5% of the population died; in Cuba the death rate among the elderly increased by 20% from 1982 to 1993.2,4 Thirty thousand Cubans fled the country, and thousands of these immigrants drowned or were killed by sharks in the Gulf of Mexico. Cuba finally accepted US donations of food, medicines and cash in 1993, and a system of private farmers’ markets was set up in 1994 to provide easy access to locally grown food.

The effect of the economic collapse on Cuba’s infant mortality rate was softened by a decrease in the birth rate because of poverty, an exponential increase in the number of transvaginal aspirations to end early-stage pregnancies (which are not recorded as abortions in Cuba), the availability of contraceptives supplied by the United Nations Population Fund, and quasi-exclusive health care for infants and expectant mothers. The 60% increase in the direct maternal mortality rate (a measure of maternal deaths resulting from obstetric complications of the pregnant state) and the 43% increase in the total maternal mortality rate during this period in Cuba reflect the collapse of the health care system for adults.4

In its population statistics, the Cuban government has hidden for the past 49 years the fact that 2 million Cubans have emigrated or have died as a result of political executions, wars fought overseas, unsafe emigration and poor health care for adults (particularly for the elderly).5 It is therefore uncertain whether the all-cause mortality rate (with age adjustment done using questionable data from the 1981 Cuban National Census) and the rates of death from diabetes mellitus and cardiovascular disease cited by Franco and colleagues have in fact declined as much as they claimed in parallel with the population-wide weight loss.1,2 Cubans have survived for almost 5 decades on a monthly diet of 6 pounds of refined sugar per person, and there has been a resultant increase in the prevalence of diabetes mellitus.5 The prevalence of other risk factors for cardiovascular disease, such as hypertension, alcoholism and stress, has also increased and the prevalence of smoking has remained constant.

Cuba’s population is aging, in part because of the emigration of young people since 1959. The deaths of some older Cubans might have been delayed as a result of weight loss, but the same conditions that led to this weight loss also led to the deaths of many young Cubans at sea as they made a desperate attempt to emigrate. If we are to examine the benefits of weight loss during the Special Period, we must also examine the negative consequences of the conditions in Cuba during this period: the deaths, the illnesses and the psychological suffering.

Individual civil rights, political freedom and a growing, self-sustaining market economy that provides ready access to goods and services have been proven to be the key to reducing living and health inequities. In Cuba, individual civil rights and political freedom are repressed. The economy is strictly controlled by the socialist central government and is currently heavily dependent on huge subsidies from Venezuela and Iran.

Editor’s note: The author’s name has been withheld in order to safeguard her or his right to free communication.

Competing interests: None declared.

REFERENCES

DOI:10.1503/cmaj.1080068

Correction

In the Salon article about John Snow, an error was made about the date of his death.1 Snow died in 1858, thus making it 150 years since his death. CMAJ regrets the error and apologizes for any inconvenience it may have caused.

REFERENCE

DOI:10.1503/cmaj.080976