CONCEPT NOTE FOR MINISTRY OF HEALTH

Learning from the Cuban Experience in Medical Education

Cuban medical education: a valuable model

Cuba trains huge numbers of doctors for many countries in Africa, including more than 2000 South African medical students currently in training in Cuba. There has been some criticism of the training from Deans of Medical Schools in South Africa - but the criticism appears to be based more on perceptions and anecdote than evidence and efforts are needed to document the benefits of increasing doctor numbers and to quantify the rate of return on the investments being made. There has also been a lack of recognition of the unique aspects of Cuban medical education, which focuses heavily on community health, community diagnosis and primary care. The Cuba/South Africa partnership could help ensure that the large numbers of doctors currently being trained in Cuba play a transformative role in re-shaping primary care provision in South Africa, and become a major part of the answer to South Africa's crisis in primary care provision. Providing the evidence base which will allow the South African medical establishment to better understand how the primary care orientation of Cuban training can further South Africa's ambition to re-engineer primary care, could help strengthen the current partnership between Cuba and South Africa.

This project is part of a Memorandum of Understanding between the UK Department of Health and the Government of South Africa which provides a mechanism for the UK to support South Africa. The UK/South Africa MOU has been discussed and South Africa has indicated it is willing to modify the MOU to reflect joint work on primary care, if Cuba indicates its support for this approach. This would allow trilateral cooperation to make effective use of the 2000 doctors currently in training in Cuba who will be returning to South Africa from 2017 onwards. The UK aid programme seeks to support South Africa's own priorities for development, and recognising the significant investment that South Africa has made in Cuban training, is committed to supporting South Africa achieve the maximum benefit and value from its investment.

Cuban trained doctors are orientated to primary care and currently undergo a 're-orientation' to South Africa's health needs by repeating the 4th and 5th years of medical school in South Africa. An alternative strategy, discussed at a consultation meeting conducted under this project in South Africa, would be to establish a rural Primary Health Care training platform. This platform would receive returning Cuban trained doctors, making good use of their skills, and provide training for South African trained doctors wanting a career in Primary Health Care/Family Medicine.

The UK is already providing support to South Africa to introduce 'family medicine' training at a post-graduate level, through a partnership with the UK Royal College of General Practitioners (RCGP). The RCGP recognise the potential benefits that the returning Cuban trained doctors could have on primary health care (PHC), and have indicated their commitment to support South Africa to develop PHC service which draw on this capacity. South African officials have indicated that they would like the bilateral agreements with both Cuba and South Africa to reflect the tri-lateral relationship between South Africa, Cuba and the UK, which would reinforce collaboration and synergy between these partners to benefit the health of all South Africans.

Who are we?

Following a visit by National Institute of Health & Care Excellence (NICE) International discussions around Cuban medical education in Africa led to the development of a project, funded by the Department for International Development (DfID) UK, to explore the value of Cuban-trained doctors in Africa. During two visits to Cuba in 2014/15, discussions were held with the Cuban Ministry of Public Health, other relevant Cuban agencies and MEDICC. Research work, with a focus on South Africa, was initiated in collaboration with PAHO, Cuba office and the Training for Health Equity Network (THEnet).

Our core group is comprised of NICE International (Kalipso Chalkidou, Shah Ebrahim), Public Health England (Neil Squires) and London School of Hygiene & Tropical Medicine (Shah Ebrahim). Health Sciences Research Council, South Africa (Priscilla Reddy) is contracted to conduct field work in South Africa. Discussions have been held with the Cuban National School of Public Health in the expectation that they will provide technical support to the project.

What do we want to do?

- a) Gather evidence about the impact of the Cuban approach to aid policy decisions on improving primary health care and deployment of increased numbers of Cuban trained doctors in South Africa. We also want to explore what can be learnt from the Cuban approach to medical education that might be useful for transforming existing medical schools.
- b) Up-date existing overviews of Cuban medical education and conduct African country case studies to illuminate the ways in which Cuban-trained doctors are contributing to the health system in Africa.
- c) Use the UK Global Health Fellowship programme, which offers work experience in South Africa to UK doctors, to work with the Government of South Africa to develop primary health care training platforms. This would require the current UK support to move beyond clinical service provision to support the strategic development of training in order to strengthen South Africa's primary care training.
- d) Collect more data to understand the skills, career aspirations and experiences of Cuban-trained doctors on returning to their countries.
- e) We propose the following research which would be conducted in South Africa and in Cuba:
 - A self-completed questionnaire survey of medical students and recent graduates comparing those trained in Cuba and in South Africa to collect data on experiences of medical education, medical employment, and career aspirations.
 - Interviews and focus group discussions of medical students, graduates and faculty in Cuba and South Africa. Here we wish to explore the ways in which these different groups perceive the value of medical training, the health system and their work experience.
 - Use a Health Technology Assessment approach to measure the cost-effectiveness analysis of the Cuban approach compared to other methods of medical education in terms of: 1) training doctors capable of working in rural and under-served urban communities of South Africa, and 2) estimated lives saved through improvements in maternal child health services.
 - Develop, with support of UK Global Health Fellowship programme, UK Department of Health and Government of South Africa and Cuban Ministry of Health, plans to establish rural and under-served urban primary health care training platforms.

What is the value of this research?

The potential value of this research in providing an evidence base for future support of the Cuban medical education programme. The research will produce cost data and link this to an assessment of impact which should help identify the rate of return of the investment, and by building a picture of where Cuban doctors ultimately work, should help to demonstrate that the programme can make a significant contribution to meeting South Africa's need to expand access to primary care physicians in rural areas throughout South Africa.

The research, by examining the policy context and commitments that South Africa has made to strengthen primary care, may result in changes in the work experience and career development of returning Cuban trained doctors. Potentially, such changes would strengthen primary care provision in rural and under-served urban communities and, ultimately, result in reductions in avoidable mortality and morbidity.