Hurricanes, Atmospheric and Political

MEDICC Review’s 10th-anniversary year approaches its close in an atmosphere that is, to say the least, turbulent. This issue goes to press while Cuba, several other Caribbean nations, and parts of the USA are still reeling from an unprecedented series of hurricanes. Irma hit Cuba hard, but by October 1, the electrical grid was fully functional again. In grim contrast, Puerto Rico is said to be looking at a full year before electricity can be completely restored. Cuba offered to send Puerto Rico four brigades of engineers and electrical workers (along with a fully equipped field hospital and 41 disaster response specialists), but Washington has yet to acknowledge the offer. This lends ironic poignance to MEDICC Review’s April–July cover image of a young Cuban doctor ready to go to New Orleans after Hurricane Katrina with Cuba’s Henry Reeve International Medical Contingent. In 2005, that offer was refused; this one is simply ignored.

Yet, other countries in the region have welcomed Cuba’s assistance. Cuba reinforced its existing (since the late 1990s) collaborative contingent of 25 health workers in Dominica with 10 more Henry Reeve specialists, all experienced in disaster management and recovery. Two electricians travelled to Martinique to help restore infrastructure demolished by Hurricanes Irma and Maria. And after the earthquake in Oaxaca, Mexico, Cuba sent a field hospital and 40 doctors, nurses and support workers. The hospital, set up in a sports complex, now provides 24-hour services in family and internal medicine, pediatrics, ob/gyn, surgery, orthopedics and trauma care, as well as diagnostic imaging, psychology, psychiatry, rehabilitation and laboratory services.

In contrast to Cuba’s response to disasters at home and neighboring countries, the US has shown breathtaking indifference to Puerto Rico and its 3.4 million people after Hurricane Maria devastated the island (Would it even be an option to tell post-storm Texas or Florida residents that they would be without power for one year, the US prognosis for Puerto Rico?). The island’s health system, hard hit by María, faces a longer-standing and human-made disaster created by a funding formula that caps US federal health transfers to “territories,” regardless of need. While the poorest states can be reimbursed for up to 82% of Medicaid costs, between 1999 and 2011, Puerto Rico received just 17%. The very status of Puerto Rico is a question mark for the most diligent researchers: commonwealth, unincorporated US territory, “free” associated state? The contradictions become curiouser and curiouser when you consider that only Puerto Ricans who move to the US mainland can vote in congressional or presidential elections ... while, if they stay at home, they do not have such a right.

And the storms keep coming, despite what one observer calls, “category 5 climate change denial” in the US Administration, quick to deny any link between putative climate change and the extreme weather events of August and September in the Atlantic, which set records for numbers, intensity and damage. Not to mention one hurricane that reached as far as Ireland. Or take the fact that *Aedes aegypti*, the mosquito that spreads dengue and Zika viruses, once considered limited to tropical and subtropical regions, can now live and reproduce in almost two thirds of the continental USA?

Meanwhile, the uncertainty about continued rapprochement between the USA and Cuba that we alluded to in our previous editorial has turned into dread. Rather than solidarity after Hurricane Irma ripped across Cuba, Washington ratified the US embargo and reiterated its intention to tighten the policy’s regulatory screws. Even though new regulations have not been issued as of this writing, fear and self-censorship have already led to reduced US travel to Cuba, damaging Cuba’s economy and particularly Cubans dependent on the new US market. The US president recalled a good share of his diplomats in Havana and cancelled all pending visa processes, noting that Cubans interested in US visas could apply in Colombia(!). The justification? Supposed health “attacks” on US diplomatic personnel in Cuba that experts have dismissed as implausible, if not downright impossible. This episode provides another sharp contrast: US investigators from the FBI were given full and unfettered access on the ground in Cuba, but their “findings” are tightly guarded secrets, shared with neither Cuban investigators nor the US public. In short, there is no evidence that such “attacks” ever occurred.

Amidst such turbulence, the UN General Assembly votes November 1 on its annual resolution demanding an end to the US embargo on Cuba. This will be the 26th time that the UN has overwhelmingly called for the US to halt its mean-spirited policy that our publisher’s founders reported has damaged the health of 11 million Cubans since 1962.[1] In a stunning turnaround last year, the Obama administration voted to abstain on the resolution against the US policy. We doubt that will be the vote this year.

On the brighter side, the 20th anniversary of our publisher, MEDICC, culminates December 3–9 with a unique conference: *A Healthy Cuba, Healthy World* will bring together US, international and Cuban health professionals, artists, educators and community members to explore the links among culture, community and health in Cuban society. This conference could not come at a better time, to reinforce the values of solidarity and collaboration that are so essential to reaching health for all, and certainly to benefit the health of ordinary people around the globe.

In closing, we are pleased to congratulate our Editor-in-Chief, Dr C. William Keck, for receiving the American Public Health Association’s Presidential Citation “for his dedication to population health and public health education.” His work with MEDICC Review also manifests his lifelong commitment to population health and health equity.  

The Editors