Homeopathy in maternity care in Cuba by Adela Stockton
Winston Churchill Travel Fellowship 2004

‘truth’ - the quality of being true, genuine, actual or factual; fidelity to a required standard or law; honesty, reliability or veracity; accuracy; the quality of being faithful; allegiance. Collins English Dictionary (1995)

‘reality’ – the state of things as they are or appear to be, rather than as one might wish then to be; that which exists, independent of human awareness. Collins English Dictionary (1995)

Introduction
Cuba. Island of rum, sun, salsa and cigars? Last of the Communist regimes? Leading exemplary in healthcare and education? Developing or developing country? Despite being a ‘one party, one line’ state, in reality there appears to be no one line of truth in Cuba, news is like Chinese Whispers - created by the people, of the people, on the street; everyone tells their own truth and with no ‘official’ sources or media spin (only one free state run newspaper), these truths inevitably contradict themselves. Diversity and dichotomy are Cuba’s reality.

My work as a childbirth homeopath is as much about speaking my own personal truth as it is about making available a remarkable system of medicine to women during the childbearing year. When I was awarded a Winston Churchill Travel Fellowship to go to Cuba to research the integration of homeopathy within the Cuban system of maternity care, I never imagined how deeply the experience would affect my life. This account is my reality of Cuba.

Churchill Fellowship - preparations
If access to consistent information appears nebulous once inside Cuba, attempting to find out basic facts, such as whether a Visa card is acceptable for withdrawing funds from a Cuban bank, proved near nigh impossible from outside the
country! Situations, regulations and conditions change rapidly; personal accounts of Cuba that I gathered from UK citizens ranged from those who had holidayed (gloriously) but only in the tourist resort areas, to freelance workers whose (extraordinary) experiences were years out of date, to recent research visitors whose colourful, vibrant visions of Cuba were however tainted with disillusionment by the corruption that tourism (capitalism) has instigated amongst local people.

The ‘Special Period’ (declared after the end of Soviet support for the Cuban economy) shortages of essential resources such as food, water, energy and fuel have created an extraordinarily resourceful population but, over these past ten years, while the tourist industry has emerged as Cuba’s primary source of ‘hard currency’, the accompanying influx of Western values has made its impact upon the socialist state and the seeds of materialism have been sown. With a double economy in place, Cuban citizens can only earn in pesos nacionales (the low value local currency) but they are now also ‘permitted’ to ‘hold’ pesos convertibles (‘dollars’) with which it is possible to purchase ‘luxury’ goods such as TVs, VCRs, fashionable clothes, cameras and cars. However, if they cannot earn in convertibles, the only way for Cubans to obtain ‘hard’ currency is through cash sent by family abroad or from tourist ‘tips’.

As with all global information, access to the internet in Cuba is limited, websites are state run and set up mainly for tourist related facilities or scientific/medical research purposes; for the vast majority of the few Cubans who enjoy the luxury of owning, or having work/study related use of a computer, internet access is limited to email only and besides, telecommunications are notoriously unreliable (with often only one telephone per street). As if preparing me for the world of contradiction that I was soon to experience, my initial research into the provision of homeopathy in maternity care in Cuba turned up websites, articles and contacts offering somewhat conflicting advice about just exactly how much homeopathy was being practised on the island as well as the suggestion that midwives did not exist in Cuba at all.

Not to be deterred however, I was eventually hugely fortunate in my communications with the British Council in Havana who put me in touch with my first contact, Dr Davide Casagrandi Casanova, former Chavening scholar and consultant.

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obstetrician in the capital’s Ramon Gonzalez Coro Hospital. Davide was generously resourceful in many ways during my Fellowship for which I am eternally grateful, for example, when my repeated attempts to communicate with Dra Mayra Riveron, head of the Cuban Department of Homeopathy, attracted no response, Davide made contact with her on my behalf, collected her official letter of invitation to me for my business visa and delivered it to the British Council diplomatic bag so as to guarantee its arrival in the UK. As it transpired, Dra Riveron had been preparing to leave Cuba to work abroad at that time and was handing over to her deputy Dra Gilsa Cabrera Leal, with whom I subsequently exchanged several enthusiastic emails before setting off on my trip. Davide also put me in touch with Dra Ana Maria Acuna Adan, a homeopathic obstetrician based in Camaguey who was keen to meet with me too.

So I had three firm contacts when I left for Cuba, a few plans with no set dates – “Call me when you get here!” they had all encouraged enthusiastically. Although I did not realise it then, this is the Cuban way, life is lived very much in the present and both business and social arrangements are frequently made by telephone at the last minute. I also purposefully wanted to allow time and opportunity for spontaneous follow-ups that might evolve from these initial meetings, and, I knew that it would be hot. I had chosen to go during the winter month of January 2005, avoiding the hurricane season and when the climate was allegedly cooler and less humid, although as it turned out, daily temperatures averaged at 35-40 degrees centigrade often with high humidity! Not only did it take several days to acclimatise, but moving around the city and keeping myself in any physical and mental state to attend meetings, I knew would take time and effort.

Most of my Fellowship was undertaken in Havana, although I also visited Pinar del Rio in the North West and Santa Clara in the Central South. I stayed in both hotels and casa particulares (B&B with Cuban families) in different areas of Havana and elsewhere, ranging from Spanish colonial style accommodation sometimes-with-sometimes-without running water to pink frilly nylon bedspreads and the best homecooked food in Cuba.
La Habana Vieja

Within 36 hours of my arrival, Davide had shown me around Havana Vieja as well as the ‘dollar shop’ where I could buy food and bottled water (peso shops sell only the barest essentials although fresh produce is available in the markets). Architectural legacy of colonial Spain, this oldest part of the capital city is a tourist mecca, saturated with breathtaking plazas edged in elegant colonnaded balconyed buildings, formidably impressive museum and art collections, quality live music (salsa, rumba, flamenco) resounds from every café and the rich aromatic scent of cigars fills the air. To my delight I was also able to catch a vibrant and sensual performance of the Cuban National Ballet at Havana’s Gran Teatro.

Davide had also set up my first meeting, at his hospital in the residential district of Vedado, with Dra Manzana, head of the Department of Obstetrics & Gyneacology, midwife Lic. Miriela Ebarra Hernandez, obstetric/gynaecology nurse Lic. Isabel Vazquez Prieto and Gilsa. Although my Spanish was somewhat rusty - learnt in Peru 20 years ago - the Latin American accent was familiar and with a bit of help from Davide (whose English is perfect), I managed to stay in the discussion. Homeopathy is not at present part of the standard care provided within this maternity unit although Dra Manzana is keen that it should become so. Gilsa lamented the lack of resources such as teachers and books to train more homeopathic practitioners, but she and I enjoyed much exchange and explanation to our non-homeopathically trained colleagues of ways of using homeopathic remedies within obstetric practice. Miriela and Isabel then took me on a guided tour of the hospital.

Miriela, herself a midwife with many years experience of working in Cuba and Angola, explained that at the time of the Revolution (1959) midwives had delivered the majority of care to childbearing women when the maternal and perinatal mortality rates had been low. (Current maternal mortality 38.5:10,000 live births, perinatal mortality 15.1:1000 live births (www.sld.cu/servicios/estadisticas 2004)). While the new socialist government’s vision had been to drastically improve the provision of healthcare in Cuba
and create the globally admired medical system that exists today, this had also meant a massive influx of doctors to all areas of practice. Maternity care subsequently became increasingly medicalised which took its toll on the midwifery profession and the midwife’s role was largely rendered to that of ‘obstetric nurse’ (obstetrician’s assistant). Miriela seemed hopeful however, that in conjunction with the ‘natural childbirth’ movement in other countries, the trend in Cuba would move towards returning ‘normal’ birth skills to the realm of the midwife.

**Maternity Care in Cuba**

During pregnancy, Cuban women receive regular antenatal screening for raised blood pressure, anaemia, fetal growth including, more recently, one ultrasound scan for fetal anomaly. Allegedly, all babies are born in hospital and, allegedly, no ‘traditional midwives’ exist in Cuba, although I was later told by a Cuban friend in Scotland that a few ancient ‘conmadronas’ do still live and practise (unofficially) in the rural areas.

The Ramon Gonzalez Coro hospital provides both maternity and gynaecology facilities. The former is made up of three wards: antenatal (high risk), labour/delivery and neonatal intensive care, the admissions area is shared with the gynaecology department. Although the paintwork is chipped and the furnishings sparse (beds and rocking chairs only), there is an air of professionalism and commitment amongst the practitioners who wear pristine white (including hats for the midwives) except in Labour ward, where ‘scrubs’ (green gowns) and masks are worn. Women give birth on their backs on narrow obstetric beds with the maximum intervention even during a normal physiological birth, although with minimal pain management. Similar to US maternity care, doctors carry out the normal deliveries, unlike in the UK where this lies within the midwives’ realm of practice. The cesarian section rate at the Ramon Gonzalez Coro Hospital was 35% in 2004 (personal communication, 2005) (US national cesarian rate 26.1% (National Center for Health Statistics 2002), 24.3% in Scotland (Birthchoice UK 2003) and 23.25% in England & Wales (Birthchoice UK 2004)). The substantial neonatal unit is well equipped with 30 cots, ten incubators (compared to one per equivalent unit in Madagascar) and one ventilator facility.

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Breastfeeding rates are around 80% (personal communication, 2005), although most women give up at three months to feed their babies with the state supplied (Soviet produced) formula milk. This is provided free to all new mothers until their baby is one year, each child is then entitled to one free litre of fresh milk per day until he/she is 7 years old. Every citizen is also entitled to a basic monthly amount of other state provided rations including rice, sugar, beans, oil, pasta, coffee, soap, toothpaste and toilet paper.

Healthcare is free and all medical facilities are state run (doctors wages average less than $24 per month), in theory, any therapeutic intervention on offer to the individual is available to all 11 million Cubans. Medicines however, must be paid for and, with the 40 year old US trade embargo still in place, pharmaceutical drugs are not only scarce but also expensive. Further to the Eastern Bloc crash and subsequent withdrawal of Soviet funds from Cuba in 1990, and three years into the ensuing ‘Special Period’, President Castro declared ‘natural and traditional' medicine (NTM) as a recognised system of medical treatment to be promoted thereafter within public healthcare. Cheap and effective, NTM includes homeopathy as well as reflexology, massage, yoga, osteopathy and acupuncture.

**Homeopathy in Cuba – the local level**

Gilsa had already invited me to attend the monthly Homeopathic department meeting later in the month but first insisted that I went to visit her at home for some informal chat about our work. I set off from Havana Vieja towards the magnificent yet crumbling area of Havana Centro in the fading golden rose evening light, a welcome cooling breeze filtering off the sea that runs the length of one side of the capital, to attract the attention of a ‘tourist’ taxi and negotiate the fare (approximately $4) before I entered the cab. He took me as far as he could before getting snarled up in the one-way systems, which meant I still needed to walk three blocks before finding Gilsa’s street. At first attempt I found myself in the wrong rubble strewn road at the wrong doorway and quickly surrounded by helpful Cubans keen to show me the right way. Eventually I stepped through the entrance to her building into a pitch black stairwell and

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climbed tentatively to the first floor where I found two doors behind heavily bolted wrought iron gates. In the dim light I made out some Born Again Christian stickers on one door, I chose the other and rang the bell. No one answered until some time after I had pressed the button for a second time, and my sense of growing nervousness was only exacerbated when the door finally opened to reveal one fit young Afro-Caribbean man, swiftly joined by another. They convinced me that Gilsa did live there and that I was to follow them into the house to find her, which I did somewhat hesitantly!

I entered up some steps into a spacious high ceilinged room, two tall shuttered windows gave way to a balcony at the front, twin Corinthian columns stood grandly towards the back of the room and a rear window lay open to a seemingly ‘dead’ inner space between Gilsa’s apartment block and the next. The tiled floor was intricately laid in coloured mosaic. It felt as if time had stood still since the day the building was constructed in the c.1800s, with only the passing of the years having taken its natural toll. The boys ushered me towards a rear door which led, as if the whole apartment was a corridor, through four further rooms, along a inner back balcony and finally into a last tiny bedroom where I found the wonderful smiling Gilsa hard at work in front of her computer. She introduced me to one young man as her son and the other as her student!

We sat and talked, sipping orange squash and tea from thermoses Gilsa had prepared and snacking on small packets of sweet biscuits. Homeopathy was originally brought to Cuba from Spain approximately 300 years ago, although its popularity diminished during US occupation of the island early last century until President Castro revived its reputation in 1993. All homeopaths must be medically qualified practitioners, for economic rather than preferential reasons as it is simply cheaper to use the existing workforce. There is one homeopathic specialist in each province of Cuba (12) although from various disciplines of medicine, some practising in hospitals others in education. Gilsa also spoke of how deeply she loves her country (“Mi Cuba!”), of how proud she is to be Communist and of the merits of the genuine concern amongst Cubans for the greater good of their fellow human beings. When it was time to go she accompanied me into the pitch dark street (street lamps waste electricity) and flagged down a private
car willing to take passengers for a small fee in pesos nacionales (approximately 25 cents) and we returned to my casa. My landlady greeted Gilsa with disdain despite my introductions, such is the suspicion among local people that any Cuban accompanying a European must be chasing ‘hard currency’. I felt embarrassed that such a high ranking professional woman should be treated in this way although I was to experience another similar scenario at a later date with Davide.

**Vinales, Pinar del Rio**

I set off to spend a few days in the pretty town of Vinales in the lush agricultural Pinar del Rio area in the North West of the island, by bus. I was interested to see the vast herb farms where medicinal plants used in the manufacture of the mother tinctures of the homeopathic remedies are grown as part of Cuba’s ongoing trend in self-sufficiency, as well as to experience something of the rural side of the island. This peaceful, picturesque region, distinguishable from the more arid southern plains by its sugar loaf mountains and acres of green vegetation, served an essential role during the early days of the ‘Special Period’ when half of the food grown there was sent to Havana to alleviate human starvation, despite also leaving the local population short of nourishment.

I was guided around the Botanic Garden owned by two elderly women in which grew every fruit and vegetable imaginable as well as a variety of medicinal plants, I explored the naturally sculpted caves and underground waterways where the traditional Amerindian peoples of Cuba once lived and where the escaped African slaves first hid out, and I witnessed the deft fingers of the female workforce sorting tobacco leaves in the cigar factory. I also heard of a small group of people named ‘Los Acuaticos’ living 40kms hike into the mountains (too far away for me!), who allegedly use water as their only source of medicine. With reference to the water component of homeopathic medicine and the absence of any original substance in potencies higher than 24c, this was a fascinating concept.

**Homeopathic Pharmacy, Havana**

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On return to Havana I rented a simple apartment in the next street from Davide’s lovely home in the residential area of Playa, where, despite the alarming sparks that flew out from the power points when using the plugs, there was the best hot water shower I experienced in the whole of Cuba. Davide, his family and friends offered their generous hospitality on a daily basis, from guided tours - packed into Davide’s tiny Fiat - around the local area to delicious spaghetti dinners accompanied by shots of old rum. I was pleased to be able to treat them to a bottle of wine (not generally available or affordable to Cubans) and a fine dinner out at the end of my stay in return.

The monthly meeting of the Homeopathic Department was held at the Homeopathic Pharmacy, situated on a principal highway through Vedado, on an intensely humid afternoon of intermittent torrential rain. We sat on beaten up plastic sofas in one wide corridor of the L-shaped room beneath massive tall open windows, it was hard to tell whether the rain splashing in or the sweat generated from bodies on plastic was more wetting. The roar of the traffic outside and its plentiful polluting fumes also bellowed in to our space. There were nine of us, from various different medical disciplines including oncology, dentistry, pharmacy as well as obstetrics. The warm and cheery Ana Maria, with whom I felt instantly connected, and myself were early for the meeting and immediately began to exchange notes on our uses for remedies within our practices. I was interested to discover her use of Ricinus (Castor Oil) to encourage increased milk supply during breastfeeding, she was fascinated that I prescribe Arnica at a potency of 200c to be taken four hourly throughout labour. She invited me to visit her clinic in East Havana for further exchange at a later date.

Gilsa read out a paper that she had prepared on the use of homeopathy in cases of infertility which was followed by some discussion (Cubans LOVE to talk) over tiny plastic cups of coffee and more packets of sweet biscuits produced from Gilsa’s handbag. The meeting was also an opportunity for practitioners to exchange thoughts and ideas about our work as homeopaths in both Cuba and Scotland, we were united in our enthusiasm and commitment to spreading the word despite the degree of suspicion that still exists in both countries about non-orthodox medicine. Then the Head
Pharmacist took me on a guided tour.

There is a homeopathic pharmacy in every district of Cuba, where remedies are produced and clinics are offered on both a drop-in and GP referral basis. The homeopathic remedies are prepared from the mother tinctures in liquid form only, but in all potencies, and are subject to rigorous standards and quality assurance. Tablets need to be imported from abroad and are therefore more costly, I had brought some supplies in tablet form with me from Scotland which I was glad to share around my colleagues. The clinics at the pharmacy treat many children and adults with chronic and life threatening complaints such as asthma, AIDS and cancer. One of the aspects of the Cuban medical world that most struck me was the refreshing lack of professional jealousy; it appeared that every practitioner is simply concerned with the needs of the patient, prescribing the most appropriate treatment dependent on the best available cure for the patient’s condition (regardless of who might provide it) as well as on the patient’s choice.

Mario Escalona Polyclinico Docente, Alamar, Habana Este

I set off for the Mario Escalona Polyclinico in Alamar, 15 miles out in the Eastern provinces of Havana, some days later. It took the best part on an hour’s cab ride at full throttle in a beaten up old car stinking of fuel. There was a second passenger along for the ride who was a nurse and coincidentally interested in my Fellowship, by the time we arrived she had given me the name of her head of department and invited me to visit her hospital – ‘call me tomorrow’ she said waving goodbye.

Alamar is a 60’s purpose built residential area with rows of brightly coloured four storeyed apartment blocks, similar to those typically seen in Southern Europe although shabbier, and not much else. Residents commonly own their flats and I got the impression that it was an up and coming area for young couples, despite its distance from the city centre. One of eight of its kind in the area, the Mario Escalona Polyclinico is built in a two storeyed quadrant set around an open central courtyard area. It is the utopia of a Primary Healthcare facility, something akin to the UK ‘cottage’ hospital model combined with that of the health centre. It offers services from day surgery, dentistry
and basic A&E to x-ray, ultrasound, occupational health and physiotherapy to obstetrics, paediatrics, gynaecology, mother & baby clinics to haematology and cardiology to library, lecture/computer room and a staff café. Each clinical area is decorated entirely in turquoise green wall tiles, otherwise the walls are white and the furnishings minimal.

Ana Maria has her own consulting room where the sign on the door indicates *Medicina Natural y Tradicional* (MNT). It is a long room flanked on one side with tall windows and containing two high examination beds half concealed behind curtains, a sink and a small desk. She consults not only as a homeopathic obstetrician but also in acupuncture, reflexology, massage and ear pressure points. In order to refer to a homeopathic Materia Medica or Repertory, reference books that are deemed essential to our practice and which every UK homeopath would own, Ana Maria must go to the Central Library, such is the shortage of literature in Cuba. She needs to hold all the information on remedy pictures in her head or scribbled in a notebook for quick reference and prescribes only up to the 30\(^{th}\) potency in her practice. I promised to send her and Gilsa copies of a combined text for their use on return to the UK.

As ever, consultations are a sociable event. For example, a young woman in early pregnancy with her first child, who had previously been treated by Ana Maria for scoliosis and tendonitis, was returning for her standard maternity care. She brought with her a flask of coffee which we all three shared, and then the Director of the *Polyclinico* and the Gynaecologist popped in for a chat and more sharing of coffee from the flask. The consultation consisted of much talk about life in general as well as pregnancy issues, so that this mother-to-be’s case was viewed in a truly holistic way.

Once Gilsa had arrived and following our guided tour, we ended up in the Director’s office to bid our farewells. My colleagues were interested to hear about the Churchill Fellowship Trust and wondered if I could organise ongoing communications with practitioners in the UK. I asked if I could take a photo of everyone in front of the (ever-present) portrait of Che Guevara in his medical, rather than revolutionary days. Out came hair combs, eye shadows and lipsticks, we all fell about laughing (see photo)!

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Ana Maria, Gilsa and I then walked down the road to the market garden where Ana Maria wanted to show me the medicinal plants growing. Her friend, a smiley rosy old man in blue overalls with battered straw hat and gardener’s hands hugged us all before pointing out huge leafed oregano, passiflora, spring onions, lettuce, dill and many more, all used as teas or in the preparation of homeopathic and herbal medicines. It was time for Gilsa and I to return to town and we rather half-heartedly waited for a taxi, there were hardly any cars on the road let alone taxis, until a giant pink Camello pulled up. The mainstay of public transport, this two carriaged ‘camel truck’ bus is designed to hold 300 people and is usually crammed to the hilt; payable only in pesos nacionales it is not supposed to be used by tourists. Seemingly our only option however, and since it was more than half empty I suggested to Gilsa that we got on it, she hesitated but a moment before grabbing my wrist and pulling me up the steps into it’s vast belly, “Hold on to your handbag!” she shouted above the roar of the engine before we lurched forward in a black cloud of diesel towards our homeward destination.

Santa Clara – ‘El Che’s’ final resting place

Although the open practice of religious faith in Cuba has been suppressed under the Communist regime and marriages still only take place in the Registry Office, many churches have latterly reopened their doors to their congregations as well as in the cultural interest of tourism. While the Catholic and Afro-Cuban Santeria faiths dominate, it was as if that the legacy of Che Guevara mirrored something of a religion too, with his
image displayed on every billboard and public wall, his history nationally revered. It did not seem right to leave Cuba without visiting Santa Clara, the town where the Revolution began, and I was keen to visit another homeopathic pharmacy and to experience a little of typical urban life outwith the capital city.

The system at the long distance bus station is most organised if lengthy: once you purchase your ticket (written in triplicate), you hand your luggage in for which you receive another ticket, and then you board the bus in an orderly line. The man in charge of luggage handling asked me if I had somewhere to stay in Santa Clara, further to my negative response he pressed a business card into my hand for a *casa particular* run by a ‘friend’ of his. Aware that it is wise to check out a *casa* before making any commitment beforehand, I thanked him warmly but still spent some moments deliberating where to look for accommodation once I had arrived in Santa Clara. That was until I noticed a smiling headscarfed lady waving urgently at me from behind the exit gate and pointing to her handwritten placard upon which I eventually made out my surname, evenly scrawled. The woman turned out to be not the luggage handler’s friend (who had no running water in her *casa* that day), but the luggage handler’s friend’s neighbour, Amneris, who had come to escort me back to her *casa* instead. I agreed, with slight trepidation, yet how could I refuse? As events unfolded, Amneris and Alberto’s *casa* was the best place I stayed in the whole of Cuba. Not only were they warm, kind hosts offering clean, quiet, comfortable accommodation, but Alberto, a retired chef from the army, effortlessly produced spreads of delicious fresh food morning and night which was just as well because, as Amneris warned, there really was nowhere else to eat out on the street.

Despite having its own university, Santa Clara is a small town with one main ‘shopping’ street including two ‘dollar’ shops, a well stocked bookshop and numerous *peso* stores selling a tiny but eclectic mix of wares ranging from Chinese manufactured washers to toothbrushes to giant soap dispensers to nylon bedspreads. Some shop-fronts are divided into small cubicles where people ‘fix’ things, sewing, sticking and
hammering - bags, bicycles and other essential items. On Saturday nights, the wide restful colonnaded main square becomes a vibrant open-air venue with outside café’s, live bands and people of all ages dancing in the street. Adjacent sits the magnificent 19th century theatre, where Cuban families gather to enjoy spectacles of mask, dance and music in the traditional way (most households do not have TV). Santa Clara also boasts a massive Soviet style ‘ice-cream parlour’ offering (after 2 hours of queuing) one flavour of icecream served with fruit sauce and dry sweet cake. The public transport system consists of horse drawn carts (carrying up to 8 passengers) and bicycle taxis (up to two adults plus one child); cars are minimal, mostly glorious American relics from the 50’s, battered and held together by Cuban mechanical ingenuity. The bullet holes still visible in the walls of the principal (and only) high rise hotel, the overturned train carriage from behind which the revolutionists defended and won Santa Clara, the moving tribute to Che Guevara in his monumental bronze statue standing high above the town and the intriguing factual information presented within his mausoleum, more than illustrate the local pride with which the Cuban Revolution is upheld.

The homeopathic pharmacy is a delightful place, adorned with large coloured traditional medicine bottles on glass shelves and an informative mural painted high on the wall behind the counter. This provides a simple outline in words as well as pictures of the principles of homeopathy, a great idea for keeping the customers focused while waiting in line. It functions along the same principles as its counterpart in Havana and is well used by local people.

During the time that I was there, apart from the modest dribble from the taps in my casa, there was apparently no water in the entire town of Santa Clara, neither in the toilets nor the sinks. Travelling on, south to the coast, it was therefore somewhat of a relief to spend the following weekend upon long white sandy beaches edged in sapphire seas, fantastically flamboyant cabaret shows and one or two mojitos thrown into the deal. I felt disheartened to discover however, that beach culture is all that the majority of foreign visitors know of Cuba, for while such tourist facilities are generating the mainstay

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of the island’s income, they provide a superficial view of a country to which there is so much more.

Homeopathy in Cuba - the wider picture

On my return to Havana, Gilsa had organised a meeting with Dr Marcos Diaz, Head of the Department of Natural and Traditional Medicines. We went to his house in Vedado where he lives with his extended family and spent a fascinating afternoon discussing the philosophy of ‘energetic’ medicine. He insisted on speaking in his perfect lilting English (he had once studied Ancient English History) and although Gilsa assured us she would still be able to follow the conversation, it was not long before she was snoring in her rocking chair. Marcos kindly expressed great respect for Scotland: “You have always retained your identity despite being so small”, I sensed that he was making a passionate comparison with his own homeland and duly returned the complement. He also spoke of how he saw the issue with complementary medicine as simply one of politics: against the argument of there not being enough scientific evidence to support the practice of homeopathy he raised the example of Thalidomide where an orthodox drug had not been researched before distribution with serious repercussions, against the argument that there is no funding to undertake research into homeopathy he raised the point that homeopathic medicine is cheap to produce and could potentially be a financial threat to orthodox drug companies if it became a principle resource of medication. I asked his opinion on ways of establishing homeopathy within standard maternity care and he suggested that it was important to spread the word in a quiet yet consistent way, for example through offering some free drop-in clinics, in this way, he believes that the minority public demand for complementary medicine will eventually become the majority. He mentioned the proposed NTM Conference to be held in Cuba in 2006 when practitioners from a variety of complementary disciplines will be invited to gather, saying that he would welcome myself as well as other delegates from UK. He also stressed the value of continuing information exchange between Cuban practitioners and others at a global level, access to literature and articles being limited on the island and funds being short for worldwide travel. To this end I am researching ways of possible funding for
Gilsa to attend the Homeopathic Hospital conference on Global Homeopathy in London in January 2006.

**Churchill Fellowship – the way forward**

I am currently in communication with the senior midwifery tutor at Napier University, Edinburgh with regard to developing a Homeopathy for Midwives component to an existing Complementary Medicine for Nurses module. I shall also be sending modified versions of this report as proposed articles to a variety of midwifery and homeopathy publications.

While my project in Cuba may not have proved a revelation in the specific uses of homeopathy within standard maternity care, it did however, and ultimately more importantly, allow me a fascinating insight as to how a truly integrated (complementary and orthodox) medical system can work effectively. It also permitted me a sense of the humility involved amongst practitioners committed to acting for the greater good of humanity regardless of professional standing. I feel most privileged to have shared this exchange with such generous and informed colleagues and to now be able to disseminate something of the experience amongst my local maternity care and homeopathic communities. Like Winston Churchill, I am proud to speak my truth.

**Conclusion**

Superficially apt descriptions of the island aside, Cuba's reality is equally about empty shelves in shops, children's city centre pony rides at weekends, rocking chairs on wooden porches at dusk and a remarkable system of blackmarketeering. The endless contrasts are part of Cuban life, that I also sensed a degree of sadness and reserve beneath the peoples’ general conviviality and passion was perhaps the ultimate contradiction. The truth of it all I will never fully grasp, nor I suppose is it intended that I do - the island, her people and her culture are certainly unique and I feel humbly grateful to have experienced the richness of what little is my reality of Cuba.
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Glossary

*Pesos convertibles* – ‘hard’ currency equal in value to one US dollar (US currency outlawed Nov 2004), ‘tourist’ currency, necessary to buy any kind of ‘luxury’ (‘common household’ in the UK) product

*Pesos nacionales* – ‘street’ currency equal in value to 4 cents (26 nacionales = one convertible), the ‘people’s’ currency eg. for theatre tickets, taxis etc Cubans pay at a lower rate in nacionales while tourists pay the higher rate in convertibles

‘Special Period’ – ten year period of limited supplies of essential basic resources, declared by President Castro in response to the economic crisis that resulted from Soviet withdrawal of financial support from Cuba in 1990

Top Tips for other Churchill Fellows going to Cuba

- Learn Spanish (Cuban people are well educated and great conversationalists)
- Take wet wipes (for when there is no water in the toilets which is often)
- Keep life simple, be flexible (not clever to rush around in the heat & humidity)
- Be prepared for contradiction (in every walk of life, with a smile on your face)