

# Are Cuban doctors the magic cure to East Africa's health sector?

Kenya and Uganda are at advanced stages of bringing in at least 300 doctors from Cuba to ease staffing shortages in rural health facilities and deal with increasing threats of industrial action by disgruntled local medical practitioners, amid strong opposition from trade unions.



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Last week, Kenya and Cuba signed a bilateral agreement that will see Havana send in 100 medical specialists to Kenya and 50 Kenyan doctors travel to Cuba for specialised training, mainly in the area of family medicine. And this week, President Yoweri Museveni doubled down on a government plan to import 200 doctors from Cuba to buffer persistent threats of a strike by local doctors.

## Specialised services

In the Kenyan deal, the Health Ministry said it is aimed at improving access to specialised medical services in areas such as oncology (cancer), nephrology (kidney) and dermatology (skin) in the rural areas and reduce dependency on referral hospitals.

Uganda expects about 40 specialists of the 200 to deploy to public hospitals in the rural areas. President Museveni said that he made the decision in 2017 to avert a crisis created by the striking Ugandan medics. "I wanted to bring Cuban doctors because ours behaved very badly and unprofessionally. They started striking, incited other doctors and left our patients to die. They were blackmailing us," Museveni said.

Speaking during Labour Day celebrations in Sembabule, Central Uganda, President Yoweri Museveni called Ugandan doctors "enemies of Uganda who should be treated as such."

He said they were blackmailers for downing their tools at the end of 2017 to demand better pay and equipped health facilities.

## **Alternative arrangements**

The Kenyan presidency, in defence of the scheme, said specialists in rural areas are few, yet their services are in high demand. "Improving access for our citizens in rural areas to medical specialists can only ease the congestion we are seeing at the referral hospitals," said an earlier statement sent by the Office of the President.

But medical associations and trade unions in both countries have objected to the Cuba deals, arguing that importing doctors will be a costly affair that does not offer a permanent solution to the lack of medical specialists in the region.

Uganda Medical Association (UMA) president Dr Ekwaro Obuku said the country has sufficient specialist doctors to work in rural areas, and threatened to call for a major strike if the government goes ahead with the plan. "Ugandan doctors should be given priority and only when the knowledge and skill are lacking should alternative arrangements be considered," Obuku said.

Similar sentiments have also been shared by the Kenya Medical Practitioners Pharmacists and Dentists Union (KMPDU), who have demanded that the government employ more than 2,000 doctors, including 171 specialists, available for employment, before flying in medics from Cuba.

## **Demoralising medics**

Doctors from the two countries have also faulted the costs of importing and maintaining the Cuban doctors, which they say are excessively high, making the entire plan an unviable investment.

According to Uganda's Public Service Minister Muruli Mukasa, the country intends to pay each Cuban about \$1,500 per month, higher than the about \$1,200 it pays local senior consultant doctors.

KMPDU secretary general Dr Ouma Oluga said the importation of Cuban doctors is an unnecessary expenditure of taxpayers money and potentially harmful to the Kenyan public while weakening the health system and demoralising Kenyan doctors.

Dr Nelly Bosire, a member of the Kenya Practitioners and Dentists Board said the shortage of specialists in Kenya cannot be solved by bringing in Cuban doctors but by investing in the training of specialists. "Cuba trains doctors to export for income generation. Kenya does not have the luxury of buying such a high-end commodity, which it should be manufacturing at home," Bosire said. "Our problem is not doctors, but lack of resources. If we do not expand hospital infrastructure in the rural areas, Kenya will continue training doctors and export them to other countries."

## **Not enough specialists to cater to the needs of interns**

Earlier statements by Uganda's Ministry of Health permanent secretary Dr Diana Atwine said the decision to hire the Cubans was arrived at after government realised Uganda lacked enough specialists to supervise intern doctors. According to Atwine, although the number of medical training facilities has increased over the years, it has not been matched with an increase in the number of specialists who supervise and mentor the interns when they enrol for in-house training, especially in rural public health facilities.

"The specialists will cater for the needs of these interns because one of the issues that was raised during the strike by intern doctors last year was lack of supervision by senior doctors," said Dr Atwine.

Having increased the number of hospitals training interns from 26 to 35, Atwine said the government would grow this number to 50. This, she said, cannot be done without more specialists moving to rural areas, but doctors in Uganda don't find the terms offered by government attractive enough since most have clinics in urban centres.

## **Better salary**

While trade unions agree with this assessment, they argue that importation of Cuban doctors is not the solution. "Uganda already has many specialists. All we want now is better salary, better working conditions and the tools to be able to deliver these services. That way, we can attract doctors to these public health facilities," said Obuku.

Information by UMA to Parliament's health committee shows that Uganda has 1,500 specialist doctors registered by the Medical and Dental Practitioners Council. Another 530 other specialists are currently being trained in different universities in Uganda. These, too, will soon join the search for jobs.

Obuku said the government should advertise the jobs so that available specialists can take them up first.

The EastAfrican could not get the bilateral agreements signed between Cuba and the two countries. Dr Atwine said her ministry could not answer many of the questions surrounding the deal, as it is too early.

- *Reported by Dicta Asiimwe, Evelyn Lirri and Victor Kiprop.*

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