

Postgraduate Education Strategy's for the Smoking Control in Cuba

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ABSTRACT

Background

Smoking control is full important in Cuba. Cuban tobacco industry looks for the significant tobacco consumption growing. However, Cuban Public Health has a national program against smoking. This health institution contributes to generalist some smoking researches. By this institution is possible to call the main health professional related with the smoking control around the country? Much from these professionals haven't a sufficient academic formation in Health Economy subjects for the smoking control. This condition and previous related are showing the real necessity to make available a postgraduate strategic for the smoking economic control since the Health Economy point of view.

Objective

To design a postgraduate educational strategic for the smoking economic control in Cuba.

Materials and Methods

Theory methods: inductive-deductive, comparative and systematization. Empiric method: bibliographic and documental research.

Results

The postgraduate educational strategic appoint to the professionals from the Public Health close related to the smoking control. It is formed by six courses; one of them is a diploma course. Inside each course a subject is supported by the previous. By this way is possible obtain a logic process in the postgraduate teaching about the smoking economic control.

Conclusions

Was designed a postgraduate educational strategic for the smoking economic control in Cuba, agree to real needs from the health professionals related with the smoking control.

Keywords: Postgraduate strategy, Smoking, Economic control.

INTRODUCTION

Background

The smoking control is full important for the present Cuban society. The impact from this risk factor includes the following elements:

1) The dynamic from the social costs attributable to smoking is higher than the tobacco and cigarettes sales case 's. This condition means a strong financial pressure over the health budget management.¹

2) Cigarettes and tobaccos behavior's is agree to necessaries and or-



dinaries goods. As consequence the active smoker give high priority to tobacco and cigarettes consumption, similar to food.²

3) There is a defined structure from Cuban states which more tobacco consumes. This should be an evident economic poorness cause from these states.³

4) The tributary policy haven 't change during 20 years. However, a recent research suggest that increasing the tobacco minor sales from \$7.00 to \$11.00 the box containing 20 tobaccos should be very good for the Public Health and the fiscal income at same time.⁴

5) The no – tributaries policies for the smoking control are few effectives.

6) Smoking carries to earlier death in labor age. This means important labor productivity lose.⁵

7) The consumption of cigarettes and tobaccos means a significant socioeconomic inequity cause.⁶

By other side recent researches from the process estimating the smoking cost are suggesting that:

a) It is necessary to modify the method to estimate the smoking economic burden by morbidity 7 and the over mortality in active smokers too. 8

b) It is necessary a whole instrument to measure the socioeconomic inequity attributable to smoking.⁹

In the opposite side the Cuban to bacco industry looks for the significant to bacco consumption growing. For example, the minor physic sales from the most sold to bacco in Cuba will be duplicated in 2030 respect to 2020.¹⁰

Cuban Public Health has a national program against smoking. This health institution contributes to generalist some smoking researches. By this institution is possible to call the main health professional related with the smoking control around the country.¹¹

Much from these professionals haven 't a sufficient academic formation in Health Economy subjects for the smoking control. This condition and previous related are showing the real necessity to make available a postgraduate strategic for the smoking economic control since the Health Economy point of view.¹²

Objective

To design a postgraduate educational strategic for the smoking economic control in Cuba.

MATERIALS AND METHODS

Theoric methods: inductive – deductive, comparative and systematization. Empiric method: bibliographic and documental research.

RESULTS

The postgraduate educational strategic appoint to the professionals from

the Public Health close related to the smoking control. It is formed by the following courses:

I-Postgraduate trainer course: The smoking economic burden by morbidity. This course was designed to teach how to measure the smoking economic impact over the health economic management. This course includes:

a) The tendency description from the smoking impact over the health economic management.¹

b) The description from the morbidity attributable to smoking behavior's since the Health economy point of view.¹³

c) Discussion from the main ways to estimate the smoking cost over the Public Health. $^{\rm 14}$

d) The identification of the main elements to estimate the economic burden attributable to some risk factor.¹⁵

e) A new formula to estimate the smoking economic burden by morbidity. $^{16}\,$

f) A new algorithm to estimate the smoking economic burden by morbidity. $^{17}\,$

This course is important because introduces a new formula to estimate the smoking economic burden by morbidity. Also introduces an analytic validation from this formula since the mathematic point of view.¹⁸ Supported in this new formula, the course introduces the use of a new algorithm to determinate the smoking economic burden by morbidity.¹⁶ However, the most important is the introduction of new epidemiologic conceptions for a better understanding of the smoking economic impact.

2-Postgraduate course

Labor productivity loses attributable to smoking: In this course the student will be capable to describe the labor productivity loses attributable to smoking. Also will estimate the smoking economic burden by labor productivity loses attributable to smoking for each labor productivity loses identified. This course include:

a) The description from the labor productivity relation with the human develop.¹⁹

b) Description from the smoking incidence over the labor health.²⁰

c) Caracterization from the labor productivity loses attributable to smoking.²¹

d) Description from the labor productivity lose because of the tobacco consumption during the labor time.²²

e) Description from the labor productivity lose because of the ear-lier smoker death.²³

This course raises the labor productivity importance's for the human develop. It defend the idea that the over mortality in active smokers is the difference between life expectative in active smokers and



no-active smoker and not in reference to the life expectancy at born.

Public policies for the smoking economic control: This course is focused in the conception and initial design of public policies for the smoking economic control. The course includes the following:

- a) MPOWER Program for the smoking control. Experiences.²⁴
- b) Characterization from the Cuban domestic tobacco market.
- c) Tobacco industry strategy's in Cuba.²⁵
- d) Fiscal authorities' role in the smoking control.²⁶
- e) Smoking fiscal space in Cuba.27

f) Tributaries policies vs. no tributaries policies for the smoking control. $^{\ensuremath{^{28}}}$

The socioeconomic inequity attributable to smoking: This course looks for the characterization of the socioeconomic inequity attributable to smoking. The course includes the following elements:

- a) The socioeconomic inequity attributable to smoking.²⁹
- b) The smoking social costs as socioeconomic inequity form.³⁰
- c) Instrument to measure the smoking socioeconomic inequity.³¹
- d) The smoking socioeconomic inequity in Cuba.³²

3-Postgraduate Diploma Course

The smoking social costs.³³ this course is large because looks for the analytic and theoric characterization from the smoking social costs. This diploma course includes:

a) Smoking as risk factor.

b) Smoking economic impact over the Public Health.

c) The smoking touchable costs.

d) Critics to the main way estimating the smoking economic impact by morbidity.

e) New formula estimating the smoking economic burden by morbidity.

f) Labor productivity loses attributable to smoking.

g) Socioeconomic inequity attributable to smoking.

h) Economic policy for the smoking control.

This course is 824 hours large and 196 are front of professors. This condition raises the importance of the self research for students.

In general, the strategy born since the real necessity from the health professionals related to the smoking control in Cuba in subjects from the Health Economy. Nevertheless, authors suggest the diploma courses for professional without sufficient elements from the Health Economy for the smoking economic control.

Inside each course a subject is supported by the previous. By

this way is possible obtain a logic process in the postgraduate teaching about the smoking economic control.

CONCLUSIONS

Was designed a postgraduate educational strategic for the smoking economic control in Cuba, agree to real needs from the health professionals related with the smoking control. The strategy includes five postgraduate courses and one of them is a diploma course. This one is the suggested for professional without sufficient elements from the Health Economy for the smoking economic control.

CONFLICTS OF INTEREST

None.

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