

# APA International Learning Partners Program

Report of the APA-Professionals Abroad Visit to Cuba 2012



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Carol D. Goodheart, EdD, 2010 APA President, was the leader of the first APA International Learning Partners Program.

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# About the APA International Learning Partners Program

As part of its mission "to advance the creation, communication and application of psychological knowledge to benefit society and improve people's lives," the American Psychological Association (APA) encourages and facilitates opportunities for psychologists to share professional perspectives and learn from each other; enhance psychological research, education, and practice; and further the development of the discipline.

In partnership with the organization Professionals Abroad (http://professionalsabroad.org), APA is developing opportunities for exchange and collaboration among psychologists across national boundaries.

# Statement of Intent: APA International Learning Partners Program

APA's goal is to offer a unique professional experience that enriches psychology and the participants

The programs developed by APA and Professionals Abroad foster
individual-to-individual international professional, scientific, and educational exchange. The programs are not government-sponsored events
and are not official APA delegations. U.S. participants do not speak for
the United States government, nor do they comment on the policies of
other countries' governments.

 The leader of the APA International Learning Partners Program (AILPP) is appointed by APA. This leader may be delegated by APA to speak on its behalf in interactions with psychology organizations in the host country.

# Structure of the Program

The general structure of the AILPP is designed to facilitate the exchange of knowledge, perspectives, and experiences across borders and to provide APA member participants with opportunities to learn about psychology in other countries. The choice of program host-partner countries is made by the APA Central Office, with advice and input from APA's Committee on International Relations in Psychology.

Programs are eligible for continuing education credits (after review by APA's Office of Continuing Education in Psychology), and each program includes evaluation for program assessment.

Each program will be tailored to meet the needs and expectations of its participants and the host-partner country to the extent possible. The program also includes a mini-conference day in which U.S. psychologists and psychologists from the host-partner country present their work.

Although the primary purpose of the programs is professional, cultural activities are included during the visit because of the broader context they give to the professional exchanges.



# Participants in the 2012 Cuba Program

Carol D. Goodheart, EdD, Leader, Princeton, NJ 2010 President, American Psychological Association

Greg Neimeyer, PhD, APA Office of Continuing Education in Psychology

James Baños, PhD, Birmingham, AL Amanda Clinton, PhD, Rincon, Puerto Rico Paul Craig, PhD, Anchorage, AK Michael Enright, PhD, Jackson, WY Patricia Hannigan-Farley, PhD, North Olmsted, OH Susan Lipkins, PhD, Port Washington, NY Irene Lopez, PhD, Gambier, OH Phyllis Marganoff, EdD, Hillsborough, NJ John O'Riordan, PhD, Stanford, CA Otto Pedraza, PhD, Jacksonville, FL Tehereh Pir-Soriano, PhD, Los Angeles, CA Gregg A. Pizzi, PsyD, Miami, FL Beth Rom-Rymer, PhD, Chicago, IL Richard Waldron, PhD, Closter, NJ Carolina Yahne, PhD, Albuquerque, NM

(Photo at left)

Participants in the 2012 Cuba Program. Front row, left to right: Greg Neimeyer, Irene Lopez, Carolina Yahne, Carol Goodheart, and Gregg Pizzi. Back row, left to right: Tehereh Pir-Soriano, Otto Pedraza, Susan Lipkins, James Baños, Amanda Clinton, Patricia Hannigan-Farley, Paul Craig, Richard Waldron, and Amircal Salermo Llanes (guide/translator). Not pictured: Michael Enright, Phyllis Marganoff, Beth Rom-Rymer, and John O'Riordan.

# Overview - Cuba 2012

In March 2012, APA sponsored its first International Learning Partners Program. Sixteen U.S. psychologists traveled to Cuba for 6 days for professional and cultural exchange. The meetings and activities with Cuban institutions and psychologist colleagues were described by both Cuban and U.S. psychologists as historic, intellectually stimulating, and emotionally powerful.

This report summarizes the meetings, the personal/cultural highlights of the visit, and the outcomes and potential next steps based on the lessons learned by the program participants.

APA joined forces with Professionals Abroad, a division of Academic Travel Abroad, to develop the Cuba visit as an opportunity for members to study psychology practices, services, education, and research in Cuba. Professionals Abroad, which began organizing professional trips to Cuba as travel license requirements became possible, invited APA to work with them to develop an agenda with a psychological perspective. APA's role was to appoint a program leader and to work with the leader and Professionals Abroad to publicize the program and facilitate development of its agenda.

The program participants were diverse in their professional interests, and they each had a strong common interest in visiting Cuba. The group went to Cuba on a research travel visa, with parameters defined by the U.S. government. All meetings were translated by the group's Cuban guide/translator, Amircal Salermo Llanes.

It is difficult to describe the impact of a visit by U.S. psychologists to Cuban research, service, and university sites and the experience of meeting with colleagues who have had limited contact with U.S. counterparts for more than half a century.

-Carol Goodheart, EdD, Group Leader

# **Itinerary**

### SUNDAY, MARCH 18

- Arrival, Jose Marti International Airport, Havana
- Welcome dinner: El Patio restaurant in Old Havana's Cathedral Square

# MONDAY, MARCH 19

- · Meetings with the Ministry of Public Health (MINSAP), the Cuban Society of Psychologists, and the National Health Psychology Group of MINSAP
- Lunch at Casa de la Amistad with Cuban guests
- · Meeting with the North America Division of the Cuban Institute for Friendship With the People (ICAP)
- Walking tour of Old Havana
- Dinner at El Aljibe restaurant

### TUESDAY, MARCH 20

- Visit to a policlínico—a community-based health care facility
- Lunch at La Casona de 17 restaurant
- Visit to the University of Havana's Department of Psychology

# WEDNESDAY, MARCH 21

- Visit to the Center for Psychological and Sociological Research (CIPS)
- Lunch at La Torre restaurant
- Meeting with specialists from the Cuban Neuroscience Center (CNEURO)
- Evening show at Jazz Café

# THURSDAY, MARCH 22

- Visit to the National School of Public Health (ENSAP)
- Lunch at El Tocororo restaurant
- · Follow-up meetings with colleagues
- Farewell dinner at El Café del Oriente restaurant

# FRIDAY, MARCH 23

Departure for Miami

# **Summaries - Professional Meetings**

### MARCH 19, 2012

Meeting 1: Overview/panel presentation: The Cuban Health Care System and Health Psychology in the National Health Care System

**Attendees:** Representatives from the Ministry of Public Health (MINSAP), the Cuban Society of Psychologists, and the National Health Psychology Group of MINSAP.

Dr. Victor Manuel, a representative of MINSAP, Department of International Relations, gave a presentation on the Cuban health system before and after the Cuban Revolution.

In 1959, before the revolution, there were 6,000 doctors; 3,000 left for the United States. At that time, the population was 6 million, and infectious diseases were a primary health concern. Today, Cuba's health system is integrated and community based; 12% of the national budget goes to health care.



Group members with Cuban colleagues from the Ministry of Health (MINSAP), the Cuban Society of Psychologists, and the National Health Psychology Group of MINSAP.

# Features of the current system

- There is one community primary care physician and one nurse for each 1,000-1,300 citizens at the primary health care level ("consultorio"); specialist teams (including psychologists) operate above the consultorio level.
- There are 493 medical clinics, each of which offers 30+ services.
- There is a systemwide focus on prevention and community outreach.
- Community health site teams may include nurses, social workers, psychologists, and technicians.
- There are 24 medical schools; in addition to training domestic health care professionals, 40,000 Cuban doctors and technicians provide health care abroad in 68 countries.

# Special features

- There are specialized programs in Cuba for maternal-child health, centers for physical/cognitive activities for older adults, and programs for HIV prevention and treatment.
- There are routine vaccines for all children against 13 diseases.

Dra. Eliana Morales, director of the Council of Scientific Societies of Health, led introductions of Cubans and Americans. There are 60 societies in the Council, which is the coordinating body that directs the activities in the health system.

Olga Infante, MSc, secretary of the National Group of Psychology and department head at a medical school, discussed the integration of health psychology within the Cuban health system:

- Modern Cuban psychology was "determined by a social shift toward social preventive care."
- 1966: First psychology graduates—three placed in Ministry of Health.
- 1968: National Group of Psychology formed—technical advisory to MINSAP.
- 1969: Psychologists first placed in primary care sites called policlínicos.
- 1973: Approval of psychology technician position.
- 1970s: Shift from communicable to noncommunicable diseases; health psychology emerged.

- 1974: Creation of Cuban Society of Health Psychology.
- 1984: Psychologists included in the system to address psychosocial problems and teach medical students, leading to a surge in jobs for psychologists.
- 1994: Training for master's degree in health psychology began.

There are 1,700 psychologists and 800 psychology technicians in the health care system. There is no private practice in Cuba; all psychological services are delivered in health and community settings, and psychology is integrated in the Ministry of Public Health: "Science is one; we just divide it to train." The system is based on a biopsychosocial concept of care, with a health and prevention focus. The health center (policlínico) staffs work to modify risk factors in communities. Health teams are multidisciplinary.

Psychologist training is now focused on increasing competencies throughout all levels. Training draws upon multiple theoretical orientations. Cuban psychologists are also included in international missions, such as the disaster response team sent to Haiti.

Meeting 2: Meeting with a representative of the North America Division of the Cuban Institute for Friendship With the People (Instituto Cubano de Amistad con los Pueblos/ICAP)

ICAP is a "social institute" for promoting solidarity between Cubans and the rest of the world. The stated mission is building people-to-people relationships. For this mandatory non-psychology-related session, we watched two short films, followed by discussion:

- *Ode to the Revolution*—A film highlighting the Cuban Revolution and subsequent historical events from a Cuban perspective.
- The Cuban Five—A brief film protesting the imprisonment of five Cubans in the United States, narrated by Danny Glover.

Discussion following the films focused on effects of the U.S. blockade against Cuba.



Carol D. Goodheart, EdD, presenting a gift from APA to a representative from ICAP, the Cuban Institute for Friendship With the People.

# MARCH 20, 2012

Meeting 1: Visit to a health center ("policlínico")

A policlínico is a community-based primary and secondary health care facility. The group met with policlínico psychologists and with professors who teach psychology to medical students.

The Policlínico Universitario Plaza de la Revolución is a model clinic (since 1974) within a nationwide system of community-based primary care ("Atención Primaria") delivery. We met with the medical director of the clinic, the head of the psychology department, staff psychologists, a psychiatrist, and seven students/recent graduates.

The director provided an overview of the system's organization: Policlínicos are in 165 municipalities in 14 provinces, serving more than 11 million people. She discussed the operational structure of her clinic,

including staffing, areas of specialization, collaborative relationships, research projects, and community programs.

The policlínico we visited serves 173,239 people in the municipality, which is known as the "capital of the capital." Staff includes 231 employees, with 63 doctors (37 are family medicine specialists, 14 are in other medical specialties, 4 are not yet specialized, and 8 are residents), 2 offical psychologists (although she reported there are actually 4; 2 are students in health psychology), and 58 technicians.

Specialized health programs include mother-infant care, cancer, HIV, geriatric ("the third age"), vaccination, noncommunicable diseases (cardiovascular is #1), and tuberculosis care. Clinic services encompass emergencies, material resources, community outreach, dentistry, rehabilitation, mental health, geriatric social, and hygiene. The policlínico is also a training center for the health professions.

The head psychologist provided more detail about the role of the psychology staff at the clinic, which includes the 4 psychologists noted previously, 1 psychiatrist, 7 psychology technicians, and 6 students. She emphasized the integration of their clinical work, teaching, research, and community advisory functions for schools, day care centers, and other institutions. There are individual, family, and group multidisciplinary services (including a group for children with learning disorders at this site).

The most common mental health problems are anxiety, depression, "developmental crises" (which we understood to be adjustment problems, broadly defined), and learning disorders, all of which are handled on site; other problems are handled elsewhere. Patients deemed at psychosocial risk are referred to the psychology service. Physicians refer 3-month-old infants for neuropsychological assessment if at risk. The psychology service evaluates approximately 6 infants each Monday and also teaches mothers how to stimulate the baby's growth and development. The babies and mothers stay in the service if assessment shows developmental problems; otherwise they are referred back to the doctor for routine care.

Overall, the psychology service takes a clinical, epidemiological, population-focused, and social approach to intervention. With children, intervention strategies include the use of open spaces and libraries (e.g., they use sports venues in parks to teach health messages), psychodrama, and family counseling to help parents understand the child and his or her needs.

Q&A focused on common clinical problems, adherence and access issues, and the logistics and modalities of service delivery. We learned that the clinic offers a walk-in service that is open, without appointment, to anyone on any day. Based on this initial contact, follow-up care is then coordinated. Time limitations curtailed a presentation by the students, who were nevertheless able to provide a brief overview of their research projects and answer questions.



Staff from the Policlínico Universitario Plaza de la Revolución present an overview of the health care facility and its psychological services.

Meeting 2: Visit to the University of Havana's Department of Psychology for meeting and exchange with representatives of the Cuban Society of Psychology and the University of Havana Department of Psychology

Dean Lopez Sánchez introduced the psychology program at the University of Havana and provided a brief history of psychology in Cuba.

- 2012 is the 50th anniversary of psychology at the university; psychology began in 1962 when the school of psychology was founded.
- There are currently 6,300 psychology graduates, including those with undergraduate and graduate degrees.
- In 1976, psychology professors became a "faculty."
- The current program has earned "excellence of accreditation"; undergraduate and graduate programs are offered; there 600 MSc students in educational, clinical, and industrial/organizational (I/O) tracks.
- The university-based center provides psychological services to the community.

Dr. Alexis Lorenzo Ruiz, president of the Cuban Society of Psychology, welcomed participants and offered wishes for strong organizational relations between APA and the Cuban Society of Psychology.

- The goals of the society were described as similar to those of APA, including advancing the science, improving the quality of the profession, providing organizational activities for applications of psychology, and conducting research related to social conditions.
- The society was founded in 1954 by Dr. Alfonso Bernal del Riesgo (who was a member of APA).
- In the 1970s, major links with Soviet psychology were established.
   (Dr. Lorenzo trained in the USSR. He is a disaster specialist who got his first experiences in disaster response following the Chernobyl nuclear reactor accident in 1986.)
- In 1981, the official organization of the Cuban Society of Psychology was supported by the Ministry of Education.



Meeting with the University of Havana's Department of Psychology and the Cuban Society of Psychology.

Dr. Lorenzo explained the function of the society:

- · Membership is voluntary, and the organization is inclusive; 80% of members are women.
- All universities are members of the society.
- The society's general assembly meets one time per year, and an executive board guides the society on a regular basis. The society includes a variety of interest "sections."
- April 13 is "Psychology Day" in Cuba.
- The ethics code is being revised this year.
- The Intercontinental Psychology Convention will be celebrated December 2–8, 2013, and the program participants were invited to attend.

Dr. Bernal del Riesgo and Professor Roberto Corral explained training in psychology:

• A national commission designs the curriculum for psychology; the core

- curriculum for psychology is the same for all of the Cuban universities.
- The first unified plan was implemented in 1971 and closely mirrored a Soviet education model (plan from the University of Moscow).
- The plan was modified beginning in 1980 as European, Latin American, and U.S. approaches were incorporated.
- Education is currently more related to practice than to the academy.
- The role of the "student as active learner" is emphasized; the plan of study includes face-to-face traditional learning and distance learning for workers (with some face-to-face requirements).
- Courses/topics include health psychology, prevention and health promotion, diagnosis and evaluation, counseling (psychoeducational), intervention (psychotherapy), research, and teaching/training.
- Subfields/work emphases are social psychology (community), educational and developmental psychology (schools), clinical and health psychology (clinics), and I/O psychology (institutions).
- Emerging areas are sports, disaster response, addiction prevention, and the arts.
- The psychology major is completed in 5 years, after a thesis examination.
- Graduates may practice at the baccalaureate level with 2 years of supervised work experience.
- Master's and doctoral degrees are intended for research positions; bachelor's degrees (5 years) for practice.
- It is "almost impossible" to practice if one does not take a multidisciplinary approach.
- 50-60% of training materials have been written by Cubans in the past 10 years. Faculty has very limited access to outside teaching materials.

Discussion of the rich presentations included questions and exchange.

### MARCH 21, 2012

Meeting 1: Visit to the Center for Psychological and Sociological Research (Centro de Investigaciones Psicológicas y Sociológicas/CIPS)

The group met with Assistant Director of Science Juan Carlos Campos Carrera, MSc, who is a sociologist, and several psychologists (all members of the Cuban Society of Psychology). They used their first names: Ovidio, a CIPS founder who is a psychologist and a sociologist; Barbara, clinical and health area; Omar, social and organizational area; Vivian, clinical and health area; and Ilene, a new graduate.

CIPS has been in existence for almost 30 years. It is the largest research center outside of the university in terms of research scope and staff size. Organized under the Ministry of the Sciences, CIPS has 160 staff members, including economists, historians, communication specialists, psychologists, and sociologists. It is a state-run institution with wide international involvement.

All research is done from a multidisciplinary standpoint. They study family, religion, learning, I/O processes, social health, work from



Group members with Cuban colleagues from the Centro de Investigaciones Psicológicas y Sociológicas (CIPS).

multiple perspectives, youth, and creativity and education. Current projects include community processes, health determinants, and work. One project is employee relations, which is being carried out with the workers of the hotel for visitors where the APA program participants stayed. Research is done at the request of the government. However, the research groups generate the ideas, present the project proposals to the government, and request permission to carry them out.

There are community social transformation workshops, which are the subject of field research. Some examples include improving daily life for socially disadvantaged people, addressing violence through education and counseling strategies, and promoting interpersonal skills and healthy behaviors in youth. CIP researchers work largely within parameters of social needs. The researchers use eclectic and integrative strategies and designs rather than test one model or theory. The psychologists and sociologists at CIPS also teach at the university and are tutors for student theses there. At the end of their presentation, we were given research monographs from their institute.

Meeting 2: Meeting with specialists from the Cuban Neuroscience Center (Centro de Neurosciencias de Cuba/CNEURO)

The group met with Dra. Valia Rodríguez (a physician and cognitive scientist) and Dra. Yuriem Fernandez Garcia (a neuropsychologist) at Casa de la Amistad.

Dra. Rodriguez presented a "Panorama of Neuroscience in Cuba." She discussed the variety of institutions that, with the National Health System, collectively support the development of neuropsychology in Cuba. These include:

- The Institute of Neurology and Neurosurgery (formed in 1962).
- The Institute of Neurological Restoration (formed in 1989). At the clinical-surgical hospital associated with it, there are 40 surgical specialties represented. In 2010, neuroscientists introduced cEEG ICU monitoring there.

- The Center for Research and Rehabilitation in Hereditary Ataxia (formed in 2001) uses pharmaceutical, surgical, and neurorehabilitation methods.
- The Institute of Science and Technology Ministry's Cuban Neuroscience Center (CNEURO, formed in 1990) is dedicated to conducting research that improves the quality of life. It includes:
  - Developing image processing toolboxes for medical applications (e.g., epilepsy)
  - Neuroformatics (e.g., neuroimaging, neurostatistics, and most recently, neurofeedback as a form of treatment).

### Other activities of the CNFURO:

- MSc in neuroscience program.
- National Center for Science, Education, and Technology-for network of 57 laboratories.

Members of the Cuban neuropsychological community travel frequently and freely to the United States; they have ongoing collaborations with a number of U.S. institutions and coauthor papers in some of the leading journals in the field. The consensus among the neuropsychologists in our delegation was that Cuban neuroscience was very well advanced and positioned on the cutting edge of contemporary developments. During the presentation and the Q&A, it became clear that the scientists at this level have better access to equipment, supplies, travel, the Internet, and publication in prestigious U.S. journals than do their colleagues in the university or health care delivery systems.

### MARCH 22, 2012

Meeting 1: Visit to the National School of Public Health (Escuela Nacional de Salud Pública/ENSAP) and an exchange/interchange with colleagues involved in postgraduate work and with professors of postgraduate degree candidates

The group met with Dr. Jorge Grau Abalo (who was instrumental in arranging the psychology meetings for the entire visit), president of the National Psychology Group and a member of the Public Health Ministry; Dr. Alberto E. Cobián Mena, president of the Cuban Society of Health Psychology; Dra. Isobel Lauro, professor; and other faculty and students.

- The National School of Public Health (ENSAP) was founded in 1927 and is part of the Latin American Network.
- An integrated public health model includes psychological science with other sciences.
- Health psychology is located in the Department of Health Sciences, which is accredited as "excellent."
- Postgraduate training areas in health sciences include hygiene, epidemiology, biostatistics, and disease management.

The educational system in health psychology is decentralized throughout all 15 provinces in Cuba. Its purpose is resource training in health care. There are three levels of training:

- Health psychology technician
- MSc in health psychology (began approximately in 1993)
- Doctorate

The evolution of health psychology began with doctoral-level psychologists specializing in health psychology. Next, master's-level health psychologists were trained. Then bachelor-level technicians were trained for community-level services. Lines of research include:

- Promotion of healthy behavior
- Evaluation of health organizations
- · Quality of life and well-being

- · Human resource management
- Family and health

The curriculum trains health psychologists for competence in these areas:

- Intervention for healthy individuals, families, groups, communities (where they engage in prevention and promotion activities)
- Research, teaching, management, administration
- Collaborative work with other professionals

The 2-year MSc program includes:

- 4,424 total hours
- · Face-to-face and independent learning
- Evaluation—systematic, trimestral; evaluation by tutors; exam with practical and theoretical components; research paper and oral defense of the research
- 157 graduates



Greg Neimeyer, Tehereh Pir-Soriano, and Alexis Lorenzo Ruiz (president of the Cuban Society of Psychology) at the National Council of Scientific Health Societies.

# **Highlights**

# **Cultural and Personal Highlights**

Live music was everywhere. In every restaurant, we heard the beautiful sounds of musicians—from those who entertained us at breakfast to the professional musicians of the Buena Vista Social Club and the Jazz Café Show.

There was limited free time outside of the psychology meetings, but the group made good use of it. Group members managed to squeeze in a visit to the oldest continuously producing pottery maker in the country, a walking tour of Old Havana, walks or runs along the Malecón (the jetty/ sea wall), dancing at Ernest Hemingway's favorite "nightclub," and many photo opportunities.

Two of the group members have family links to Cuba. One was able to locate his grandfather's home, where his father was raised, and take photographs of the site to take back to the United States. Another participant, who emigrated with his family when he was 7 years old, was gratified to be welcomed back so warmly by the Cubans.



Local musicians in Havana.

# Professional Highlights

At a luncheon on the last day with our Cuban colleagues, they presented the group with three copies of their diagnostic classification system (Diagnóstico y Classificación de los Trastornos Mentales) for APA, in honor of what they had referred to several times as the "historic first visit." We asked them to sign the copies and suggested they could possibly be housed in the APA library, the Archives of the History of American Psychology, and the APA Office of International Affairs. Our host Dr. Cobián then joined the musicians in singing a lovely ballad to us.

An unplanned, unscripted role play occurred. During an informal luncheon conversation, María del Carmen, chief of the Psycho-Oncology Service at the National Institute of Oncology, was discussing the difficulty of convincing Cuban women throughout the country to agree to pap smears for cancer screening. One of our members, a professor and motivational interviewing expert, immediately transformed the conversation into a productive dialogue with her that led to a mutually expanded approach. Two students and their psychology professor have already sent email messages thanking us for the motivational interviewing books and DVDs given to them in Havana. Our Cuban colleagues appreciated receiving these materials in Spanish.

Group members saw firsthand the shortages of many goods/supplies/ equipment taken for granted by U.S. professionals and were moved by the "can do," problem-solving spirit and exceptionally warm welcome by the Cuban psychologists. They shared their strengths with us: truly integrated medical and behavioral science and service, strong public health prevention and promotion efforts, excellent disaster response systems, and a pervasive sense of the collaborative, multidisciplinary approach to health in families, communities, and workplaces.

They have achieved these advances in the face of significant resource deficits. For example, there are insufficient supplies of needed medications. The professionals do not have personal computers at home; computers at work are old; and access to the Internet is limited (e.g., it takes up to an hour to connect to a website, and many websites are too graphics heavy to load properly; there is little bandwidth and therefore

they cannot use Skype to communicate; and there is only 1 GB capacity for attachments). The Cuban psychologists cope by using a system they call "trampoline," in which they "bounce" small amounts of material from one colleague to another and then to a third person via multiple email messages.

Power outages occur frequently. The lights went out during a professional meeting in a windowless room. The group members spontaneously turned on their cellphones to use as flashlights, and the discussion continued without missing a beat.

The Cuban psychologists were forthright about conditions in Cuba. Inequalities exist after the ideals of the revolution, and there are many social problems to solve: food, transportation, housing, and income. They view the economic crisis of the 1990s (known as the "Special Period," after the collapse of the USSR and imports decreased by 60%) as a significant factor in the inequality. However, they are now seeing changes in some societal structures and in the empowerment of disadvantaged groups in the country.

The group's guide and translator, Amircal Salermo Llanes, who is also an assistant professor of phonetics, was instrumental to the success of the visit. He was able to perform simultaneous translation for long periods, including the translation of difficult scientific terms. Most important, he was a cultural broker who translated concepts, not simply words. At our last dinner, he told the group that psychologists are different than other groups. Other professionals criticize if he misses a term, but in our group, the members who spoke Spanish joined in to brainstorm as a team.

# **Outcomes and Next Steps**

Groundwork was laid for continued collaboration between Cuban and U.S. colleagues and organizations. These include development of a memorandum of understanding (MOU) between APA and its counterpart psychology organizations in Cuba. Given that psychology in Cuba is organized as a part of both the Ministry of Public Health and the Ministry of Education, a forthcoming MOU will likely be signed by representatives under both auspices.

The Cuban psychologists' primary request is for increased communication and exchange. They want to publish their work in the United States and are very interested in access to APA journals. It may be particularly helpful to them to focus on journals related to the areas in which they are strongly committed (e.g., community psychology, public service, gerontology, health psychology, and integrated care). Many read English but do not speak or write it fluently. They would benefit from collaborating on manuscripts with U.S. colleagues. Otherwise, they are likely to need assistance in preparing manuscripts to meet English writing standards. The Cubans are hopeful that APA and the program participants can facilitate more research/professional exchange.

The Cuban hosts are also hopeful that more APA members will come to Cuba as part of the Learning Partners Program. For this first group, the Cubans presented programs to us; in the future, they are open to programs in which both Cubans and Americans present in workshops and meetings. Future groups may want to consider bringing supplies that are most useful to Cuban professionals, such as external hard drives with journal articles and book chapters of special interest on them, hard copies of journals (especially special issues on one topic-e.g., professional competencies, domestic violence), DVDs of therapeutic interventions, and pens. It would be beneficial, but not necessary, to provide materials in Spanish.

The participating members described their visit to Cuba as "transformative," "one of the two or three most profound experiences of my life," "a powerful experience," and "a warm glow from our fabulous adventure." One participant said, "I cannot stop speaking about this unique

experience and bragging about the unique colleagues I had the pleasure to meet." The group was grateful that APA sponsored an international professional visit and that it was of such high caliber.

Staff in the APA Office of International Affairs and the Office of Continuing Education, working with members of the group, will assemble a package of professional materials on topics requested by the Cubans, such as bibliographies, books, and journals. The package will be sent as a token of the group's appreciation.

The group received CE credit for all of the meetings except the non-psychology-related film program on the Cuban Revolution. Many expressed a desire to return to Cuba and to participate in other APA trips in the future.



