This report represents Medical Education Cooperation With Cuba's responses to Charting Impact, a joint project of BBB Wise Giving Alliance, GuideStar USA Inc, and Independent Sector. Charting Impact uses five simple yet powerful questions to encourage strategic thinking and help organizations share concise information about their plans and progress toward impact.
The content of this Charting Impact Report is the sole product and responsibility of Medical Education Cooperation With Cuba. This report does not in any way represent an endorsement from Independent Sector, BBB Wise Giving Alliance, or GuideStar, nor does it represent fulfillment of the BBB Wise Giving Alliance’s Standards for Charity Accountability. For more information on Charting Impact, visit www.guidestar.org/chartingimpact
1. What are we aiming to accomplish?
MEDICC’s overarching goal for the next five years is: to measurably multiply MEDICC’s unique contribution to transformative, practical changes that achieve greater health equity in the USA and globally by enhancing the visibility of relevant Cuban healthcare approaches and their successful outcomes.

2. What are our strategies for making this happen?
MEDICC will: I. Offer a Gateway to US health professionals, providing them the opportunity to visit the island through MEDICC and to exchange with colleagues in Cuba; and facilitate Cuban health professionals’ travel to the USA for professional development. MEDICC will develop a broad network of participants in this Gateway program. II. Support, evaluate, and multiply the health and social impact of US and other graduates of Havana's Latin American Medical School, the largest socially accountable medical school in the world. III. Expand the readership of the peer-reviewed journal MEDICC Review, and reach over 35,000 online article-reads monthly. IV. Initiate 6–8 new US Community Partnerships for Health Equity in the next five years, linking these with existing CPHEs in a National Learning Community, in order to share how Cuban healthcare experiences have been adapted in the very different context of US underserved communities.

3. What are our organization's capabilities for doing this?
MEDICC’s unique perspective from the intersection of US, Cuban and global health, plus a carefully developed international reputation and credibility in Cuba, has culminated in achievements that include bringing the Cuban healthcare story to 100,000 people in audiences worldwide through 5,000+ sales and hundreds of screenings of the award-winning documentary ¡Salud!, a film adopted in university curricula from South Africa's University of the Western Cape to Harvard Medical School. MEDICC continues to publish the only English-language journal on Cuban health and medicine. MEDICC Review has evolved into a quarterly peer-reviewed journal with a 50-member editorial board from 15 countries, averaging 40,000+ online monthly article-reads by readers in 100+ countries. The journal has contributed to MEDICC's well-earned reputation as the international expert on Cuban public health and its relevance to global debates and practice. This is exemplified in the steady stream of media interviews and publications: including segments on CNN, MSNBC and PBS Newshour; articles in Scientific American, Nature Biotech and the American Journal of Public Health; and a featured talk at TEDMED 2014.

4. How will we know if we're making progress?
I. The Gateway—Up to ten US-to-Cuba trips organized/year for priority organizations and institutions. II. Latin American Medical School (ELAM) graduates—Identify and support ≥3 international ELAM graduate projects that improve health outcomes in their respective countries and communities, provide models for others and engage policymakers for change. Domestically, match up to 10 ELAM graduates annually to residencies with support from MEDICC programs, leading to residency matches for 75% of graduates within 2 years of graduation. III. MEDICC Review—Increase readership of the journal to 35,000 article-reads monthly in 100+ countries IV. Community Partnerships for Health Equity (CPHE)—Establish new sites in the USA for 2013-2018, building relationships with local community leaders and academic partners, and offering them the chance to see Cuba's healthcare models for themselves, contributing to equity-enhancing innovations back home. Engage all sites in the National Learning Network, and organize a biannual participant conference.
5. What have and haven't we accomplished so far?

I. Professional Bridges—13 educational exchanges scheduled for 2016. II. Latin American Medical School graduates—Completed successful pilot of Pathways to Residency, steps taken to prepare students and graduates to successfully place in US residencies, especially primary-care programs. III. MEDICC Review—Reached 42,000 average monthly views in 2015. IV. Community Partnerships for Health Equity—New sites in South Bronx, New York; Milwaukee, Wisconsin; and Red Mesa, Navajo Nation.