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DISPATCH

TO: Deputy Chief, WHD

Chief, Western Hemisphere Division, UFG

Chief, Western Hemisphere Division, UFG

FROM: Chief of Station, Madrid

SUBJECT: Information on Medical Collectors of AMOTOL in Cuba

Action: FYI

1. In late December 1956 and early January 1957, CEMEAL identified AMOTOL as a medical program with medical colleges still in Cuba. AMOTOL has sent most of its key personnel into exile in the U.S. and has established itself as a psychiatric wing in Miami. AMOTOL has been depressed by the effects of the Cuban regime and its efforts to maintain operations abroad have been hampered. AMOTOL has been able to maintain some effectiveness in its operations, despite deteriorating conditions in Cuba, and has been able to continue its activities in the U.S. AMOTOL's religious base lends it a degree of attractiveness, deriving from its conservative knowledge of the therapeutically useful abroad.

AMOTOL is in possession of many documents which would be especially harmful to the present Cuban Government, since it is faced with a major increase of suicides, mental illnesses, and alcoholism, resulting from a general breakdown of moral standards and the sociological values are uprooted and replaced by repressive, materialist doctrines.

2. In the description that follows, it should be noted that the Department of Psychiatry of the University of Havana Medical School is composed of professors and instructors from the psychiatric staffs of several hospitals, where the classes actually are given; there is no university hospital per se.

C1: C1a: 9

"Cuban Physicians Considered as Possible Prospects for Detection/Recruitment/Utilization."

Dr. Rafael Nodai (M.D.), Assistant Director of the Department of Psychiatry of the University of Havana Medical School, is a psychiatrist of note. Active and cooperative with the present Cuban Government, he has written articles and correspondence with a brother in the U.S. Takes a negative stand against the regime but is wholly unbroken. In August 1956 said that he would, by 35 years of age, be the subject of a distinguishable case. Age 30 years, 180 pounds, short mortality table. Would defect and cooperate if being deferred if abroad with family.

Distribution:

GROUP 1

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