

# U.S.-Mexico Border Health Commission Initiatives and Activities

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## BACKGROUND

Recognizing the need for an international body to provide leadership in optimizing health and quality of life along their border, the governments of the United States and Mexico signed a binational agreement to establish the U.S.-Mexico Border Health Commission (BHC) in July 2000. Since that time, the commission has advanced binational efforts at the local, state, and federal levels to identify the health needs of border residents and develop effective approaches to address them.

The commission continues to target its goals by promoting initiatives and activities that address key border health priorities, including the U.S.-Mexico Border Tuberculosis Consortium, Healthy Border 2010/2020, binational obesity and diabetes prevention and awareness campaigns held during Border Binational Health Week, and Health Insurance

Marketplace Workshops organized in support of U.S. federal Affordable Care Act education and enrollment efforts.

The commission's ability to institutionalize a binational focus on regional health issues is closely linked to the continual support provided by individuals, organizations, the academic community, and other binational public and private stakeholders.

## THE U.S.-MEXICO BORDER REGION AT A GLANCE

The border area, defined in U.S. Public Law §103-400 (22 U.S. Code, 290 n-5) and the La Paz Agreement of 1983 as the area 62 miles (100 kilometers) north and south of the U.S.-Mexico border, includes 44 counties in the four U.S. border states and 80 municipalities in the six Mexican border states.

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## BORDER STATES

The U.S. border states are California, Arizona, New Mexico, and Texas. The Mexican border states are Baja California, Sonora, Chihuahua, Coahuila, Nuevo León, and Tamaulipas.

## U.S. BORDER HEALTH OFFICES AND MEXICO OUTREACH OFFICES

The four U.S. Offices of Border Health (OBH) and six Mexico Outreach Offices work closely with their respective state health departments. The U.S. OBHs receive funding through U.S. Department of Health and Human Services cooperative agreements provided to each of the four U.S. state health departments. The Mexico Outreach Offices receive funding through the Mexican Ministry of Health.

The overall role of the U.S. OBHs and Mexico Outreach Offices is to support and extend the BHC's work along the border. They are strategically located in each of the 10 border states and serve as a binational resource for border communities by offering binational public health activities, disseminating information, and providing critical links to other public and private partners.

## MISSION

U.S.-Mexico border communities face a variety of public health challenges unique to the region. From escalating rates of chronic and infectious diseases to joint health disparities, the binational border area become a dynamic region uniting various cultures through a shared need to improve health and quality of life. In its efforts to address these issues impacting border health, the BHC continues to work cooperatively with its Mexican counterparts to sponsor, support, and promote binational initiatives and activities in support of sustainable development in research, advocacy, and policy-making that can lead to the optimal health of all residents.

Throughout 2013, the BHC continued to serve as a venue for binational discussion by promoting sustainable, cross-border partnerships between the U.S. and Mexican federal governments, 10 border states, 44 counties, 80 municipalities, and local stakeholders. By encouraging binational communication, coordination, and collaboration between U.S. and Mexican counterparts, the BHC made significant progress on

binationally-identified priority initiatives and activities in access to care; strategic planning; research, data collection, and academic alliances; tuberculosis; obesity and diabetes; and infectious disease and public health emergencies.

In recognition of these indispensable binational partnerships, the BHC acknowledges the support it receives from the U.S. Department of Health and Human Services and its Centers for Disease Control and Prevention, the Mexican Ministry of Health, the Pan American Health Organization/World Health Organization, policymakers, academic institutions, and other border-wide stakeholders who advance the commission's work.

As border populations look to the public health community for assistance and support each year, the BHC will continue its efforts to raise awareness of regional public health challenges, mobilize actions to improve the border health status, promote cross-border information sharing, and prepare current and future leaders to meaningfully respond to ongoing and emerging border health concerns.

## STRATEGIC PRIORITIES

The BHC works to raise awareness of public health issues prevalent in U.S.-Mexico border communities by engaging local, state, federal, and international leaders to collaborate strategically with health professionals. To achieve this, the BHC continually gathers community input through its work with binational health councils, community partners, and numerous stakeholders to determine priority areas along the border. Through these processes, the BHC identified the following six key strategic priorities:

1. Access to care: Improve access to health care along the U.S.-Mexico border by creating a culture of wellness and prevention, strengthening public health infrastructure, and promoting evidence-based interventions and models of excellence;

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2. Strategic planning: Convene subject matter experts and other principals from the U.S. Department of Health and Human Services, the Mexican Ministry of Health, and cross-border local and state leaders to address BHC strategic priorities, and initiatives;
3. Research, data collection, and academic alliances: Assemble U.S. and Mexican academic and research professionals to promote border health research and policy development that can enhance border health;
4. Tuberculosis: Reduce the burden of tuberculosis (TB) in binational border communities by advancing cross-border cooperation in TB surveillance, control, education, prevention, and case management;
5. Obesity and diabetes: Promote awareness of the prevalence, risk factors, and health outcomes of the obesity epidemic on the U.S.-Mexico border; and
6. Infectious disease and public health emergencies: Address critical infectious disease and emergency preparedness issues impacting the border region.

## BHC INITIATIVES AND ACTIVITIES

### ACCESS TO CARE

#### *Border Binational Health Week*

The BHC continued to celebrate and promote healthy lifestyles for all ages by sponsoring the 10<sup>th</sup> Annual Border Binational Health Week (BBHW) October 7-11, 2013, in partnership with the U.S. Department of Health and Human Services (HHS), the Mexican Ministry of Health, the Health Initiative of the Americas, the Pan American Health Organization/World Health Organization, and the 10 U.S.-Mexico border states.

In 2013, BBHW brought together local, state, federal, academic, non-governmental, and other public and private partners with the binational border community through public health forums, health fairs, trainings, and other community events that advanced the theme “Families in Action for Health” and the adjoining focus “Preventing Obesity and Diabetes.” In 2013, U.S. partners also utilized BBHW as an opportunity to promote access to care by incorporating health insurance marketplace education into local events in support of the Affordable Care Act.

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in support of sustainable partnerships that can address the unique health challenges facing residents along and across the binational border. Forthcoming BBHW celebrations will continue efforts to increase community and inter-agency networking relationships, information sharing, educational opportunities, and awareness of the BHC and other state and local initiatives.

#### *Maternal and Child Health Epidemiology Program*

The BHC is proud to acknowledge the work of the Border Maternal and Child Health (BorderMACH) Initiative, a principal program of the Maternal and Child Health Epidemiology Program (MCHEP) operating within the BHC Central Office since 2009.

In support of MCHEP’s mission to promote health and well-being for women, children, and families at state, local, regional, and tribal levels, BorderMACH works to strengthen U.S.-Mexico collaboration and infrastructure in maternal and child health (MCH), as well as increase the use of local epidemiologic data.

In the past four years, BorderMACH has established and supported four sister-city teams of MCH experts through training and technical assistance, including teams in Brownsville, Texas/Matamoros, Tamaulipas; El Paso, Texas/Doña Ana County, New Mexico/Juárez, Chihuahua; Nogales, Arizona/Nogales, Sonora; and San Diego, California/Tijuana, Baja California. These teams work collaboratively to bring attention to MCH priorities in their communities and suggest possible interventions. Key team accomplishments include the following: two BorderMACH teams now serve as MCH committees on their local binational health councils, a binational community health organization that examines the health needs, challenges, and available programs associated with the council’s cross-border geographic area; the Nogales, Arizona/Nogales, Sonora team proposal has served as a template for wider strategic planning around adolescent pregnancy prevention in Sonora border municipalities; the El Paso, Texas/Doña Ana County, New Mexico/Juárez, Chihuahua team received the CityMatCH Kathy Carson Award for “Promising Practice.”

In addition to BorderMACH activities, MCHEP staff conducts collaborative binational research in MCH and other related topics, disseminates their findings at national meetings and in peer-reviewed journals, and provides technical assistance to local and state health departments in the region.

The MCHEP is part of a collaborative effort between the CDC's Division of Reproductive Health and the Health Resources and Services Administration/MCH Bureau. Institutions collaborating with the MCHEP and BHC in these efforts include Mexico's Ministry of Health, National Institute of Public Health, and Mexican Social Security Institute, the National Center for Health Statistics/CDC, CityMatCH, and U.S. and Mexico local and state health departments and academic institutions.

#### *Prevention and Health Promotion Among Vulnerable Populations Stakeholder Meetings*

In 2012, the BHC established the Prevention and Health Promotion among Vulnerable Populations on the U.S.-Mexico Border (PHPVP) initiative to focus attention on specific health concerns faced by vulnerable populations residing along the binational border. The initiative aims to increase access and referrals to health and human services and boost the use of preventive/primary care and better health outcomes.

To assist with the initiative's development and activity planning, the New Mexico Department of Health Office of Border Health (NM OBH) and the California Department of Public Health Office of Binational Border Health (COBBH) convened six regional stakeholder meetings throughout the U.S. border states to gather input from health and human services agencies and other relevant stakeholders as well as to advocate for improved access to these services for vulnerable populations.

More than 200 participants representing over 130 agencies and organizations, including representatives from local and state health and human services agencies, community health centers, faith-based organizations, and Ventanillas de Salud (Windows on Health) (VDS), attended.<sup>1</sup>

**The Prevention and Health Promotion among Vulnerable Populations Initiative, established in 2012, focuses in specific health concerns faced by vulnerable populations residing along the binational border.**

The NM OBH and the COBBH, in cooperation with the BHC, are currently consolidating and incorporating stakeholder input for inclusion as they develop the next phase of the PHPVP initiative.

#### *Health Insurance Marketplace Education and Promotion*

A central BHC priority is to increase and improve access to health care for all border residents. In support of this effort, it coordinated a series of Affordable Care Act (ACA) health insurance marketplace educational trainings in collaboration with key federal, state, and local partners, including the U.S. Department of Health and Human Services (HHS) (Centers for Medicare and Medicaid Services), non-profit organizations, and others to assist in promotion, education, and training for partners and communities in the four border states.

Education and enrollment efforts coordinated in conjunction with U.S. Congressman Henry Cuellar were held throughout the Texas Rio Grande Valley in Webb, Hidalgo, Starr, and Zapata Counties, providing information on the legislation and the state health insurance marketplace application process and including on-site enrollment assistance provided by local navigators and certified application assistors. Similar events took place in Arizona, in collaboration with non-profit organizations, focusing on farmworker and migrant populations.

Since access to health care remains a priority on both sides of the U.S.-Mexico border, the BHC will continue to support these efforts to optimize the health and quality of life for all border residents.

#### STRATEGIC PLANNING

##### *Healthy Border 2010/2020*

The BHC continued to move forward in 2013 in developing the Healthy Border (HB) initiative, a health promotion and disease prevention agenda established in March 2001 to improve regional health and eliminate health disparities along the U.S.-Mexico border. In 2013, the BHC neared completion of the HB 2020 strategic plan to establish a set of leading health indicators designed to assist health experts, organizations, and communities to prioritize health issues and develop sustainable health programs in the binational border region.

To advance Phase IV, the HB binational technical work group, created to close out HB 2010 and launch HB 2020, convened on February 25-26 and September 23-24 in Phoenix, Arizona. The work group collaborated to update the draft of the HB 2010 Joint Closeout Report, representing a binational effort to evaluate border region data, assess the status of HB 2010 health objectives, and report on HB 2010 outcomes. In addition, the work group initiated the process to develop and draft the HB 2020 Initiative Report, which identifies specific actions to address critical public health issues impacting border populations, including addressing social determinants of health.

The BHC will advance the final phase in 2014 with the publication and dissemination of both the HB 2010 and 2020 reports as well as the launch of HB 2020.

#### DEVELOPING BINATIONAL LEADERS TO STRENGTHEN BORDER COMMUNITIES

In 2013, the BHC launched its third iteration of Leaders across Borders (LaB), an advanced eight-month leadership training program designed for public health professionals working to improve the health of communities along the U.S.-Mexico border. Seventeen binational health leaders were selected to participate in this year's program, including seven U.S. and 10 Mexican health professionals representing various areas of public health and health care along the border.

Throughout the program, team members participated in learning events intended to enhance their knowledge of border populations, health systems, and government/non-governmental institutions, as well as their personal and collaborative leadership skills.

LaB is a strategic initiative of the BHC, in collaboration with the Arizona Department of Health Services Office of Border Health, the BHC Arizona and Baja California Outreach Offices, the UA Zuckerman College of Public Health, the Mexican Ministry of Health, and El Colegio de la Frontera Norte (Mexico's Northern Border College).

In 2013, the third Leaders across Borders course was held, an advanced eight-month leadership training program for public health professionals.

#### *U.S.-Mexico Border Tuberculosis Consortium Meeting*

The BHC convened the Fourth Annual U.S.-Mexico Border Tuberculosis Consortium Meeting (TB Consortium) on May 20 and 21, 2013, in Las Cruces, New Mexico. Hosted by the New Mexico Department of Health Office of Border Health (NM OBH), in collaboration with the BHC Chihuahua Outreach Office, the meeting brought together federal law enforcement officials, legal experts, and medical care providers representing U.S. and Mexico local, state, and federal government agencies and non-governmental organizations to develop action plans that can reinforce binational and border-wide responses to TB issues. Building on discussion topics and action plans generated during the May 2012 third annual TB Consortium, this year's meeting focused on the integration of binational and border-wide efforts to address TB and legal issues affecting case management. In particular, three work groups focused on the development of effective strategies and operational approaches to achieve the following objectives:

1. Improve continuity of care for TB patients;
2. Improve binational coordination in managing TB patients; and,
3. Establish uniform meet-and-greet standards for TB patients being repatriated to Mexico.

To address these objectives, the Legal Issues, Binational Consultative Network of Multidrug-Resistant (MDR) TB Experts, and the Continuity of Care Work Groups developed operational work plans outlining specific activities and projects to be accomplished over the next three years.

With assistance from the NM OBH, the BHC Chihuahua Outreach Office, and the BHC, each work group did follow-up on these actions throughout the year and provided updates at the Fifth Annual TB Consortium, in July 2014.

#### OBESITY AND DIABETES

##### *U.S.-Mexico Border Obesity Prevention Summit*

The obesity rate of residents living in the Texas Rio Grande Valley is currently higher than the national average.<sup>2</sup> In fact, in the metropolitan area of McAllen-Edinburg-Mission, Texas,

the obesity rate reached 35 percent in 2012. As part of regional efforts to reduce the impact of obesity on binational border communities, such as in south Texas, the BHC sponsored the U.S.-Mexico Border Obesity Prevention (BOP) Summit on July 16-18, 2013, in McAllen, Texas. Hosted by the Texas Department of State Health Services (DSHS) Office of Border Health, in partnership with the BHC Chihuahua Outreach Office, the summit convened more than 200 federal, state, and local partners representing U.S. and Mexico public health, non-profit, and academic agencies and institutions to discuss efforts to prevent obesity at the local, state, and national levels.

The summit included plenary sessions, panels, a poster session, and concurrent track sessions as well as demonstrations and activities designed to encourage healthy cooking and exercise. Presentations included discussions on aspects of obesity prevention ranging from policy interventions, such as proposed beverage taxes and food marketing regulations, to nutrition challenges and opportunities, including increasing access to healthy foods in local communities and schools as well as physical activity.

To combat rising trends in obesity prevalence in the border region, public health professionals and researchers agreed that interdisciplinary and multi-sectoral programs and policies are needed to address biological, cultural, economic, social, and environmental risk factors.

The BOP Summit was the first major conference to address obesity prevention in the region. The BHC will convene the second BOP Summit in 2015.

## INFECTIOUS DISEASE AND PUBLIC HEALTH EMERGENCIES

### *U.S.-Mexico Border Binational Infectious Disease Conference*

The BHC continues to support enhanced relationships and strategic alliances that facilitate binational collaboration on infectious disease, emergency preparedness, and policy development issues impacting the U.S.-Mexico border region. In 2013, the BHC worked in collaboration with the Texas Department of State Health Services' Office of Border Health to assess input and recommendations generated at the U.S.-Mexico Border Binational Infectious Disease (BBID) Conference held in 2012. These action items served as the basis

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for review and discussion at the 2014 BBID Conference in June 10-12 in El Paso, Texas. The 2014 conference included panel discussions regarding progress updates on the Fourth Annual U.S.-Mexico Border Tuberculosis Consortium and the cross-border sharing of public health items as well as plenary sessions focused on coccidioidomycosis, or valley fever, and rickettsia, both infectious diseases common to the border region. Break-out groups also provided participants opportunities to collaboratively address a multitude of other key health issues affecting border health.

## CONCLUSIONS

The U.S.-Mexico Border Health Commission is a critical catalyst in the efforts to raise awareness about public health issues and challenges faced by the border populations. Future actions will continue to promote activities in favor of access to care, tuberculosis response and management, obesity and diabetes prevention, fighting critical infectious disease, and other public health concerns. **MM**

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## NOTES

<sup>1</sup> The Ventanilla de Salud (Window on Health, or VDS) is a Mexican government program developed by the Department of Health and the Ministry of Foreign Affairs. Implemented in 50 Mexican consulates in the United States as well as local health organizations, the Ventanillas provide reliable information on health topics, counseling, and referrals to available and accessible health services in local communities. This program was designed to improve the physical and mental health of Mexicans and their families living in the United States, to increase access to primary and preventive health insurance coverage, and ensure culturally sensitive services to reduce the use of emergency services. For more information, visit the VDS website at <http://ventanilladesalud.org>.

<sup>2</sup> Lindsey Sharpe, "Boulder Remains Least Obese U.S. Metro Area," Gallup, April 2013, <http://www.gallup.com/poll/161717/boulder-remains-least-obese-metro-area.aspx>.