

Health For All: L.A. & the U.S.-Mexico Border

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The United States-Mexico Border Health Commission (BHC) was established 10 years ago by agreement between the Secretary of Health and Human Services of the U.S. and the Secretary of Health from Mexico. The BHC is comprised of the Secretaries of Health, the chief health officers of the 10 border states, plus prominent community leaders, health professionals and researchers representing both nations.

The BHC annual meeting was most recently convened July 19-21 in El Paso, Texas. I was honored to have been invited to participate in the annual meeting (including the gala dinner hosted by Kathleen Sebelius (U.S. Secretary DHHS) and Dr. Jose Angel Cordova Villalobos (Secretario de Salud de Mexico). Although this was well planned, highly stimulating research based 3-day commission meeting, the daytime meetings were open to the public, establishing a binational community atmosphere.

As nurses and Hispanics closely aligned to our communities, we know that the issues confronting the U.S.-Mexican border region are not constrained by any border. As health professionals and community leaders, we continuously advo-

cate for reducing disparities and the improvement of health for all.

U.S.-Mexico Border Region

The following provides some helpful information about the U.S.-Mexico border region and the work of the BHC.

The U.S.-Mexico Border

- 80,000 people cross the border legally each day
- 2,000 miles in length
- 62 miles north and south (of the U.S.-Mexico border)
- Includes 4 U.S. states (48 counties); and 6 Mexican states (80 municipios)
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Healthy Border 2010 Initiative: Overarching Goals

- To improve the quality of life and increase the years of healthy living
- To eliminate health disparities

The Health Border 2010 initiative considers the 25 U.S. Healthy *Gente* objectives and 46 health indicators from Mexico; including 20 common measures. These are grouped into 11 common areas; each noted with general objectives for improving health outcomes.

1. Access to Health Care-including primary care or basic health care services
2. Cancer-focused on reducing breast cancer and cervical cancer mortality
3. Diabetes-reducing hospitalization and mortality rates
4. Environmental Health-improving neighborhood

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- access to sewage disposal and reducing hospital admissions for acute pesticide poisoning
- 5. HIV/AIDS-reducing incidence
- 6. Immunization and Infectious Diseases-expanding childhood immunization rates, and reducing the incidence of hepatitis and TB
- 7. Injury Prevention-reducing childhood injuries and associated mortality rates and mortality from motor vehicle accidents
- 8. Maternal, Infant and Child Health-improving prenatal care access, reducing teen pregnancy rates, and reducing infant mortality due to congenital defects
- 9. Mental Health-reducing suicide associated mortality
- 10. Oral Health Care-Improving access
- 11. Respiratory Diseases-reducing asthma associated hospitalizations

- Immunizations
- Child and adolescent health
- Maternal Infant Health
- Injuries
- Environmental exposures-pesticides

Concluding Thoughts

LA NAHN Call to Action

Do you see any differences between the health risks and needs of the border region and the Los Angeles area?

Are the goals of the BHC any different from NAHN's?

Can you name the 10 border states?

How will you be involved?



Ongoing Research, White Papers and Future Work:

Focus Areas for 2010

- Obesity and Diabetes
- Continue data gathering, collaborations, and research for improving health outcomes

Ongoing Work

- TB