



Binational Health Week 2004

UNITED STATES SUMMARY REPORT

Numbering 26.7 million nationwide, Mexican Americans and Mexican immigrants in the United States are becoming an increasingly important demographic group. This population shapes a large part of several economic sectors, including agriculture and construction.

Even though large segments of the Mexican immigrant population in the U.S. work in these physically taxing and often dangerous jobs, this group constitutes 26.5% of the entire uninsured population. Mexican immigrants are one of the least insured groups, and are also less likely than their non-Mexican peers to take advantage of health services, including government-sponsored programs, even when these services are available. As a result, this group continues to face disproportionate rates of ill health.

Considering the binational mobility of Mexican migrants and the scale on which this population contributes to economic and social development in both the U.S. and Mexico, the state of their health and access to health care is a bilateral responsibility. Recognizing this, the California-Mexico Health Initiative (CMHI)—a program of the California Policy Research Center, University of California Office of the President—initiated the first Binational Health Week (BHW) in 2001 with major support from The California Endowment. BHW is a week-long series of health-promotion activities targeting Latinos and Mexican immigrants that brings together public and private agencies from both countries.

In 2004, 15 U.S. states and the District of Columbia celebrated BHW through the coordination of the Institute of Mexicans Abroad (IME) in cooperation with the Government of Mexico's Secretariat of Health (SSA) and Secretariat of Foreign Affairs (SRE), the Mexican Institute of Social Security (IMSS), the U.S. Department of Health and Human Services, and the United States-Mexico Border Health Commission. An estimated 116,648 people across the United States received health-related interventions over the course of the week.

KEY COMPONENTS OF BINATIONAL HEALTH WEEK 2004

1) Health services and health promotion. Activities in both the U.S. and Mexico included health fairs that provided pertinent information as well as disease screenings; workshops on culturally appropriate approaches to health promotion; distribution of health education materials in the form of posters, brochures, and videos; and outreach activities to enroll eligible populations into existing health insurance programs.

Each locality provided a variety of health services unique to its own area and based on available resources. Some communities held activities that focused on HIV/AIDS simultaneously with activities scheduled nationally to observe National Latino AIDS Awareness Day. Other communities paid special attention to diverse topics such as occupational health, obesity, nutrition, mental health, and disabilities, among others.

The inauguration of BHW 2004 took place October 11-12 in León, Guanajuato, Mexico, and consisted of an official ceremony followed by a two-day policy forum. The inauguration was hosted by Mexico's President Vicente Fox and Secretary of Health Julio Frenk, and then U.S. Secretary of Health and Human Services Tommy Thompson.

The BHW closing event took place on October 18 in Washington, DC, and consisted of a press conference at the National Press Club and a reception held by the Mexican Embassy at the Cultural Institute of Mexico.

2) Binational Public Policy Forum on Migrant and Immigrant Health Issues. The policy forum offered opportunities for participants from both countries to discuss the health challenges facing Mexican migrants/immigrants, including issues related to health care access and opportunities for bilateral collaboration. Held on October 11–12 in León, Guanajuato, Mexico, the forum convened an estimated number of 250 forum participants, including high-level government officials from Mexico and the U.S., university representatives, foundation directors, legislators, community leaders, and other key stakeholders from both countries.

3) Media events. The BHW media campaign generated at least 127 print and electronic articles in the United States and 36 in Mexico. These articles, and at least 95 radio and TV spots in the U.S., gave Binational Health Week 258 media hits in 2004. At least 104 newspapers in both countries covered BHW events.

Media events included press conferences to launch and conclude Binational Health Week. Public Service Announcements for Spanish-language stations were produced for BHW and referred listeners to toll-free numbers of community health clinics providing services. Additionally, the Mexican Radio Institute and Mexicans Against AIDS produced educational radio soap operas for BHW and a 10-minute documentary was produced on BHW 2004.

GROWTH OF BINATIONAL HEALTH WEEK

The growth of Binational Health Week since its inception in 2001 is best illustrated in Table 1 and Table 2 below. The number of people reached in California through BHW health promotion activities has steadily increased, from 18,720 in 2001 to 75,073 in 2004.

With BHW’s expansion to other U.S. states through IME in 2004, an estimated 116,648 people received health-related interventions, which included screenings for HIV, diabetes, and breast cancer; tests for blood pressure and cholesterol levels; dental and eye exams; educational workshops; and health insurance enrollment. The estimates are derived by defining an intervention as either health education or as the provision of a health service, including health screenings.¹

TABLE 1: Growth of Binational Health Week in California, 2001–2004

Year	Counties	Events	People Reached	Participating Agencies
2001	7	98	18,720	115
2002	12	167	21,710	280
2003	22	212	70,440	334
2004	26	315	75,073	390

¹ To document and evaluate BHW 2004 results, coordinators from each state and region completed a questionnaire about services provided and events held in their area. The numbers presented in this document reflect only what was reported by the coordinators who completed these evaluation forms. It is possible that not all BHW events are accounted for and therefore, the actual number of events and participants are likely to be higher than what is reported in this document.

TABLE 2: Results of Binational Health Week in 2004

State	Events	People Reached	Participating Agencies
Arizona	11	7,348	22
California	315	75,073	390
Delaware	1	400	10
District of Columbia	2	190	10
Illinois	35	4,065	50
Indiana	11	1,789	10
Michigan	13	479	5
Minnesota	1	200	10
Missouri	7	520	8
Nebraska	1	300	5
New Jersey	2	800	15
New Mexico	12	1,566	3
New York	4	800	14
Pennsylvania	5	1,715	30
Texas	73	20,653	138
Wisconsin	3	750	10
TOTAL	496	116,648	730

Regional coordinators, with guidance and technical assistance from IME advisors, provided leadership for organizing and promoting BHW activities. Each coordinator worked with a taskforce to garner support (either in-kind or financial). Taskforces included representatives from local and state health departments, community-based organizations and clinics, health maintenance organizations, colleges and universities, city governments, foundations, and 34 Mexican consulates.

More than 250,000 pieces of printed material were distributed to the general public during BHW 2004, in both English and Spanish, including BHW posters, fact sheets about illnesses and injuries affecting Latinos, alcohol and drug consumption among Latinos living in the United States, and information about diabetes and obesity; and specialized materials such as bilingual dictionaries of health-related terms and training manuals for promotoras/es. Additionally, thanks to the California HealthCare Foundation, 1 million bilingual guides to health insurance and public benefits programs for California's low-income population were distributed as a supplement to the newspaper *La Opinion*.

CONCLUSION

Binational Health Week plays a unique role in bringing together nongovernmental organizations, academic researchers, local and state governmental entities, as well as high-level government officials in the United States and Mexico to expand access to health services, improve health insurance coverage, and reduce the unmet health needs of Mexican migrants and immigrants in the U.S.

The key to its effectiveness lies in the synergy created by organizing thousands of committed individuals and involving hundreds of organizations in this project. With the successful expansion of BHW in 2004, key collaborative organizations stand even more committed to improving the quality of its events and activities for years to come.

APPENDIX

Table A-1: BHW Participating States in the United States and Mexico

United States (15 states and D.C.)				Mexico (17 states)			
Arizona	New Jersey	New Mexico	District of Columbia	Baja California	Jalisco	Puebla	Hidalgo
California	Michigan	New York		Chihuahua	Michoacán	Sonora	San Luis Potosi
Delaware	Minnesota	Pennsylvania		Coahuila	Morelos	Tamaulipas	
Illinois	Missouri	Texas		Guanajuato	Nuevo León	Yucatán	
Indiana	Nebraska	Wisconsin		Guerrero	Oaxaca	Zacatecas	

Table A-2: Theme of Binational Health Week 2004 Activities (by U.S. State)

Theme of Activity	AZ	CA	DE	DC	IL	IN	MI	MN	MO	NE	NJ	NM	NJ	PA	TX	WI	TOTAL
Access to Health Care	5	68	1	0	7	11	4	1	3	1	2	5	4	5	30	3	150
Diabetes	5	68	1	0	8	5	0	1	2	1	1	3	3	4	14	3	117
HIV/AIDS/STD	5	61	1	0	8	4	1	1	1	0	2	1	4	5	13	1	107
Cancer	2	60	1	0	5	2	0	1	1	1	2	0	4	3	11	0	92
Maternal and Child Health	3	47	0	0	5	2	0	1	0	0	1	1	4	1	19	0	84
Oral Health	1	51	0	0	1	1	1	1	0	0	0	4	0	3	14	0	77
Mental Health	3	40	0	0	8	4	0	1	1	0	1	6	4	1	8	0	76
Injury Prevention/ Road Safety	4	40	0	0	3	4	0	1	0	0	0	4	0	0	20	0	76
Vaccination/ Infectious Diseases	5	35	0	0	2	0	1	0	0	0	0	0	3	1	15	0	62
Asthma	1	28	0	0	6	1	0	0	0	0	1	2	3	0	9	3	54
Nutrition	1	32	0	0	1	0	0	0	2	0	0	1	0	2	11	0	48
Social Services	0	28	0	0	2	1	0	0	0	0	1	4	0	1	2	0	39
Environmental Health	1	22	0	0	0	0	3	0	0	0	0	3	0	0	9	0	38
Tuberculosis	1	26	0	0	0	0	0	0	0	0	0	0	3	0	6	0	36
Cardiovascular Health	3	25	0	0	1	1	1	0	2	0	0	1	0	0	0	0	32
Substance Abuse Prevention	0	15	0	0	1	0	0	0	0	0	1	0	1	0	2	0	20
Disease Prevention	0	8	0	0	1	0	0	0	0	0	0	0	0	0	7	0	16
Cultural Competency	0	12	0	0	0	0	0	0	1	0	0	1	0	0	0	0	13
Gerontology	0	7	1	0	1	0	0	0	0	0	1	0	0	0	0	0	10
Labor-Occupational Safety	0	6	0	0	1	0	0	0	0	0	0	0	0	0	0	0	7
Vision and Hearing Exams	1	2	0	0	0	1	0	0	0	0	0	0	0	0	2	0	6
Women's Health	0	4	0	0	0	0	0	0	0	0	0	1	0	0	0	0	5
Lead poisoning	0	4	0	0	1	0	0	0	0	0	0	0	0	0	0	0	5
Disaster Fire Programs	0	0	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Veterinary Issues	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0	3
Herbal Medicine	0	2	0	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Careers in Medicine	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	0	2
Others	0	2	0	2	0	0	0	1	0	0	0	1	0	0	5	0	11
TOTAL	41	693	5	2	68	37	11	9	13	3	13	38	33	26	201	10	1,190