



United States–México Border Health Commission

**Health Research on the U.S.-México Border:
Promoting a Binational Agenda**

**A White Paper
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United States – México Border Health Commission

The mission of the United States-México Border Health Commission (BHC) is to provide international leadership to optimize health and quality of life along the United States-México border.

Providing Leadership on Border Health Issues to—

Facilitate Identification, Study, and Research

Be a Catalyst to Raise Awareness

Promote Sustainable Partnerships for Action

Serve as an Information Portal



Overview

This paper highlights the important relationship between research and policy development and the role they play in improving health along the U.S.-México border and outlines key considerations in the development of a binational border health research agenda, current gaps in border health research, and the need to translate research into policies and effective health interventions.

Introduction

In 2006, the U.S.-México Border Health Commission (BHC) established the Binational Border Health Research Work Group. This work group proposed the development of a binational border health research forum to be held biannually to explore the types of research performed, the application of that research, the gaps in research, and the identification of funding opportunities to conduct the research. The first forum was held in Monterrey, Nuevo León, México, in October 2006. Among the outcomes of the forum was taking the next steps toward the development of a border health research agenda. As a result, four areas were identified as critical for the development of a successful border health research agenda:¹

- Assess the current status of border health research
- Establish a binational border health research advisory group
- Select one or two priority areas to serve as the initial focus of the research activities to be addressed
- Develop an action plan for potential partnerships with public and private institutions

Following the first forum, the Border Health Research Expert Panel was established in 2007. As a result, this panel proposed and outlined steps to formulate an effective border health research agenda. Those steps were—²

- Describe the status of border health research
- Identify research gaps
- Determine priorities and objectives
- Select strategies to attain the objectives
 - Specify activities
 - Enhance capacity development
 - Identify infrastructure
 - Revise and update agenda

The Expert Panel highlighted contributions by research institutions (academic and governmental) and the limitations of binational research in general. Key limitations identified were—²

- Limited or absent definition of vision, mission, and goals
- Planning restricted to initial and follow-up sessions
- Deficit of researchers involved in agenda development process
- Limited description of state of the field
- Inadequate organizational models
- Need to recruit experts to assist in planning of health research agendas
- Limited participation of México's research institutions/researchers



Background

The U.S.-México border region spans approximately 2,000 miles east to west and stretches 100 kilometers (62 miles) north and south of the U.S.-México border. The region includes 44 counties in four U.S. states and 80 *municipios* in six Mexican states. As of 2003 the population of the U.S. side was approximately 13 million people. The inhabitants of the region face many health challenges, rooted in social, economic, and environmental factors, that are not bound within political or geographical borders. The burden of disease in the region is compounded by limited access to health care. The primary causes of death on the U.S. side of the border* mirror those in México's northern border region.³

The Importance of a Binational Border Health Research Agenda

The determinants of health in the border region are many; residents are affected by their income levels, proximity to services, education levels, resident status, and lifestyles. The population is dynamic and varies greatly by generation and by geographical sub-region. Border health research is essential to understanding the border population and identifying its health needs which is why research is key to addressing the growing health problems associated with obesity, diabetes, and other chronic diseases, as well as combating infectious diseases. As the World Health Organization (WHO) asserts,

“In a rapidly changing world facing significant environmental, demographic, social, and economic challenges, research will be increasingly essential for clarifying the nature and scope of health problems, and for identifying effective life-saving interventions and strategies.”⁴

Many steps have been taken toward organizing and prioritizing research along the border. There have been over ten forums held by a myriad of organizations interested in border health since 1999. The Pan American Health Organization (PAHO) organized “Structures and Mechanisms for United States-México Border Health Cooperation” in 1999. That forum asserted the need for creating a virtual health library, a research agenda for the border region, and the sharing of technology and human resources, as well as the need to articulate research into effective information for policy makers.

In 2000, a meeting of the PAHO/WHO Collaborating Centers of the U.S.-México Border built upon this earlier meeting by working to increase resources for improving health in border communities. This meeting identified the need to connect people to current resources, highlight the work of different agencies already collaborating at the border, and include the organizations at the border in the agenda-setting process. Several other forums have since followed that have taken different approaches to the overarching goal of strengthening border health through research.

Key Elements to Consider in the Development and Implementation of a Border Health Research Agenda

The applicability and translation of the research agenda into policy does not solely rely on the results of the research. The role research plays in policy formation may relate more to the current political context.^{5,6} The translation of research priorities into effective policy depends on a number of questions including the following:^{5,6}

- Will the political, economic, and social environment of the time allow for the use of the resulting research?

* The primary causes of death on both sides of the border are cardiovascular disease, cancer, unintentional injuries, diabetes mellitus, cerebrovascular disease, chronic obstructive pulmonary disease, pneumonia and influenza, and cirrhosis and chronic liver disease.



- Are the research needs of decision makers and community members of interest to the research community?
- Was the agenda developed via a collaborative and equally inclusive process with a diverse group of stakeholders represented?
- Is the resulting agenda a union of the goals of decision makers and researcher perspectives?

Therefore, creating a research agenda does not guarantee that research results will affect health policy. However, it has been suggested that increasing the interactions and connections between decision makers and researchers can lead to increased accessibility and translation of research into policy.⁵

According to the Pan American Health Organization's 1999 Border Health Inventory, there are 121 academic institutions conducting research along the U.S.-México border.⁷ These institutions provide numerous opportunities for engaging multiple stakeholders in a research agenda and informing policy in a number of areas. Part of the process of increasing interaction between researchers and decision makers is defining their roles. The recommendations made by WHO's *Strategy On Research For Health* that align with recommendations made by the border health research community are the following:⁴

- Research should contribute to the development of solutions
- Public sector health research capacity should be strengthened
- Both private and public sector research have roles
- Free flowing communication between decision makers and researchers should be ensured
- Collaboration via communication of lessons learned, best practices, and resources should be enhanced

The potential responsibilities of researchers and research institutions parallel those of the decision maker. The border health research community aligned with WHO on the responsibility and types of research that need to be conducted. Suggested responsibilities from WHO that may relate to researchers are—⁴

- Research activities and results need to be better communicated to decision makers
- Research coordination and management needs to be improved
- Cross-discipline collaboration and production of evidence to support policy development must be promoted
- Research that addresses the needs of marginalized populations, addresses the social determinants of health, and relates to health equity should be encouraged

For many years governmental agencies, research institutions, and healthcare professionals along the U.S.-México border have asserted the need for a border health research agenda. While quality research takes place in many health areas, a consolidated research agenda with identified priorities would produce information to assist in the decision-making process and direct the provision of health programs. The prioritization or agenda-setting process has been noted as a potential mechanism to reduce the barriers to accessibility and utilization of health research in the policy formation process.⁵

In an effort to convene researchers, decision makers, funding organizations, health professionals, and community members to review previous efforts and recommend areas of research, the BHC, hosted the Second Binational Border Health Research Forum in July 2009 in La Jolla, California. The forum aimed to enhance collaboration, identify current gaps in research, assure that research is applicable to the community, disseminate selected binational research findings, and move toward a clear borderwide



research agenda. Forum attendees included U.S. and México representatives from federal, state, and local governments; researchers and administrators from academic institutions; clinicians; and members of the BHC.

Gaps in Research

In order to focus research and create an effective research agenda, there needs to be an understanding of the gaps in research. One aim of the 2009 forum was to identify gaps in research through the presentations and discussion at the forum and the post-forum survey. Dr. Sam Notzon, Director of International Statistics Program, National Center for Health Statistics, presented major health topics on the border which need further investigation. Dr. Notzon focused on five key areas for further research:⁸

- Comparative effectiveness research of community health worker programs
 - Determine best practices
 - Develop partnerships with academic institutions on the border and community projects to use evaluation tool kits already in existence
- Childhood obesity and diabetes
 - Develop longitudinal studies on obesity and diabetes that begin in childhood and follow through adulthood
 - Determine the effect of obesity and diabetes in childhood on the tendency to reach morbid obesity
 - Examine the severity of obesity and diabetes in adulthood in relation to childhood onset
 - Evaluate long-term as well as short-term effectiveness of childhood obesity prevention interventions into adulthood
- Mental health and shortage of mental health workforce on the border
 - Data on mental health in the border region illustrates no difference in the prevalence of mental health disorders for Hispanics and non-Hispanics and the level of unmet need is the same. However, there is greater utilization of services among non-Hispanics, so this discrepancy should be examined
 - Culturally appropriate research on unmet need and utilization of cross-border mental health services
- Injury prevention, particularly motor vehicle accidents and differences between states
 - Examine why there is a high rate in some areas of the border such as Arizona and New Mexico and not others
 - Examine what kinds of improvements can be made in highway infrastructure
 - Identify interventions to improve driver performance
- Research on cross-border use of healthcare, types of services being used, and the health conditions of the individuals
 - Evaluate not only who uses service and why, but also *what* types of services, the health status of the individual, and the regularity of use
 - Examine type of provider being used



Application of Research

Clinicians and public health professionals need research that can be used to generate and interpret appropriate best practices, as they relate to border communities. Research needs to first, and foremost, represent the best interests of the communities for which it is examining.

“In all research, it is crucial that we start by asking ourselves why it’s important, and for whom it’s addressed. There should always be a conceptual connection between theory and practice before we begin. This will eventually facilitate interpretation once results are presented whatever technique, whether quantitative or qualitative is employed.”

Comment from post-forum survey

Research Funding

Without funding, essential research that examines the underlying factors of diseases and that ultimately leads to action cannot exist. Research funding must be receptive to innovative approaches and must emphasize cross border collaboration. Forum participants emphasized the importance of binational collaboration in both research and funding as essential to border health research that leads to positive change.

“[There is a need for] mutual understanding by each government that research funding and activity cannot “stop at the line.”

Comment from post-forum survey

Barriers to Binational Collaboration

Examining the barriers to binational collaboration may point to solutions. Many times priorities are determined by mixed messages and misinformation from the media. Organizations should understand the role media plays in setting agendas and how issues are framed. In order to ensure what is perceived as important to constituents and decision makers, the role of the media must be incorporated into the agenda setting dialogue.⁶

Other challenges to binational border health research are political, institutional, and social in nature. Political challenges relate to the ease with which information is shared binationally as well as what health concerns are identified as a priority for funding.

Opportunities

There are many organizations and individuals that have a long history of working along and across the border. The knowledge, passion, and insight into the dynamics of border health are a true asset for researchers and the community. Opportunities should be cultivated in order to expand upon this work and to foster change in the system of research and healthcare. Enhancing the understanding of the current and future workforce along the border is one method to begin this transfer of resources.

“I believe that the best way of encouraging effective binational policy is supporting increased opportunities for public health leaders at the border to actually work together on specific issues and at the same time build their capacity for understanding the complexity of binational and transborder issues. We need to level the playing field so that everyone has a solid base for binational work in general and then we can actually build a platform for policy issues.”

Comment from post-forum survey



Another mechanism mentioned by many of the researchers in the post-forum surveys was the need for virtual communities to enhance the sharing of information. Current effective models of information sharing and collaboration should be examined and applied to border health.

Resources for binational collaboration exist and may prove beneficial. *Working Beyond Borders: A Handbook for Transborder Projects in Health*, published in 2004, was a collaborative endeavor between El Colegio de Sonora and the University of Arizona Mel & Enid Zuckerman College of Public Health. According to the authors of the handbook, the reason for working collaboratively is to clearly describe “the big picture” as well as the applicable processes. The authors of this handbook also assert that—

“True collaboration implies sharing power (in the form of resources, for example) as well as sharing responsibilities, decision-making and accountability, in order to carry out an objective based on a common vision.”⁹

Border health is global health. Opportunities to examine models of global health that have been successful in supplementing the limitations of national governments at the grassroots and global levels may prove useful in the development of a clear action-oriented border health research agenda. One noteworthy example of this is the WHO Framework Convention on Tobacco Control, which asserts that all people have the right to the highest standard of health.¹⁰ This assertion places health over global trade, freedom of marketing, and advertising.

“In a world where many health risks and opportunities are becoming increasingly globalized, influencing health determinants, status and outcomes cannot be achieved through actions taken at the national level alone. Transborder flows of people, ideas, goods and services necessitate a reassessment of the rules and institutions that govern health policy and practice. The determinants of health are being affected by trade and investment flows, collective violence and conflict, illicit and criminal activity, global environmental change, and global communication technologies...the current system focused on the national governments of states, has a number of limitations and gaps.”

It may also prove beneficial to examine other binational health agendas in North America. The U.S.-Canada Great Lakes Binational Toxics Strategy to eliminate toxic substances in the binationally-shared waters has a very detailed agenda, outlined workgroups, action items, and implementation strategies that have been employed for over ten years. There are many binational, international, and global health initiatives that can be integrated into existing efforts to improve border health via research. The need for an entity to help organize and facilitate this effort exists in the U.S.-México Border Health Commission.

“Primero, hace falta saber quién y que instituciones están haciendo investigación de asuntos fronterizos que sean de interés binacional.”

[First, we need to know who and what institutions are doing binational research that would be of binational interest.]

“Hace falta saber si hay posibilidades de colaboración transfronteriza, particularmente explorar quienes estarían interesados en eso.”

[We need to know if there are possibilities for transborder collaboration in order to find out who would be interested in participating.]

“Si se comparten recursos, particularmente humanos, es posible llenar algunos de los vacíos.”

[If resources are shared, particularly human resources, it will be possible to fill gaps.]

Comment from post-forum survey



Next Steps

Great strides have been made in the development of a binational border health research agenda. The initial steps outlined in the first Binational Border Health Research Forum should serve as a checklist of sorts to assess what has been done, what should be revisited, and what still needs to be done in order to disseminate a comprehensive binational agenda. The Border Health Research Expert Panel called for an overview of the status of border health research; the identification of gaps in knowledge, priorities, and objectives outlined; and strategies to obtain these objectives. The development of a clear research agenda will require a continuation of the progress made during and since the 2006 forum. The Expert Panel, as well as other stakeholders, can build upon current research needs that have been identified and should consider the feedback from the 2009 forum participants:

- Be binational in terms of resources, information, measurements, and prioritization
- Initially focus on a limited number of health issues
- Address gaps
- Mitigate barriers to binational collaboration such as Institutional Review Board (IRB) requirements and funding
- Represent qualitative and observational data in addition to quantitative data

Conclusions

Research is essential to improving the health of border residents. To ensure that research leads to progress, a clear collaborative and comprehensive binational agenda needs to be articulated and disseminated to the more than one hundred research institutions, researchers, and other stakeholders in the border region. The results from the survey of participants in the Second Binational Border Health Research Forum overwhelmingly emphasized the need for—

- True binational collaboration
- Research to translate into policy change
- Research that is applicable to the community

Below is a short list of suggested reference points for action:

Suggestions for Decision Makers

- Assess the effects policies have on binational collaboration
- Ensure that policies promote and support true collaboration
- Commit to improving the health of residents on both sides of the border with effective policies and adequate funding

Suggestions for Researchers

- Ensure that research is applicable to the community and addresses its key concerns and health issues
- Translate research into best practices for health providers
- Emphasize to policy makers the burden and need to address chronic disease in the region
- Employ traditional and innovative approaches to better understand and address the multiple root causes of poor health in the region



Suggestions for Research Agenda Setting

- Describe the status of border health research
- Identify knowledge gaps
- Determine priorities and objectives
- Select strategies to attain objectives
 - Specific activities
 - Capacity development
 - Infrastructure
- Revise and update agenda
- Clearly define activities to achieve goals and objectives

These recommendations suggest that this work has implications that extend far beyond research laboratories and national boundaries. Ultimately, the purpose of developing a comprehensive border health research agenda is to enhance the health and quality of life along the U.S.-Mexico border.

“Es importante que estos resultados que se presentaron sean abordados por parte de los diputados, senadores, y secretarías de salud por ambos países para la búsqueda de soluciones conjuntas ya que por sí sola la Comisión no podría impactar en la salud pública de la frontera ya que según mi punto de vista los problemas de salud que fueron presentados tienen un impacto social más allá de la salud y se requiere de la participación de diferentes secretarías de estado para disminuir los problemas que afectan a la frontera.”

[It's important that the research results be embraced by legislators and health departments in both countries to facilitate the search for joint solutions. Alone, the Commission cannot sufficiently impact border health problems as these issues relate closely to a variety of social problems beyond the health arena and require the participation of multiple sectors.]

Comment from post-forum survey



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For additional information please visit our website at www.borderhealth.org.

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