Pan American Journal of Public Health, Special Issue on:

Diabetes Along the U.S.-Mexico-Border

Table of Contents: Vol. 28 No. 3 / September 2010

Available online at: http://bit.ly/dAIUHm

EDITORIAL

**Securing a diabetes-free border**  Mirta Roses Periago

*Highlights the results from phase I of a prevalence study conducted by the U.S.-Mexico Border Diabetes Prevention and Control Project.*

Coordinated by the Pan American Health Organization/World Health Organization (PAHO/WHO) U.S.-Mexico Border Office in collaboration with the U.S. Centers for Disease Control and Prevention (CDC) and the Mexican ministry of health (or Secretaría de Salud, SSA).

“…….The traditionally unique yet diverse demographic, social, cultural, and political characteristics of the U.S.-Mexico border area made this study particularly challenging. At the beginning of the XXI century, this geographic zone was home to approximately 14 million people spread across the 44 counties and 80 municipalities comprising the six northern Mexican states and four southern states in the United States.

The history of public health enterprise along the U.S.-Mexico border is filled with a series of ambitious events and the development of effective mechanisms propelling binational collaboration. The Project whose work is presented in the following pages is a shining example of how the cohesive, on-the-ground efforts of a binational partnership led to a determination of the prevalence of diabetes, identification of the risk factors, and development of a viable diabetes prevention and control program capable of responding to the specific needs of the border population.

The Project came about because local public health authorities on both sides of the border became alarmed by the disproportionately high morbidity and mortality rates related to diabetes. They became painfully aware of the chronic and debilitating effect this disease was having not only on those living with its effects, but also on families, communities, health services, and local economies.

The information emerging at the turn of the 1990—2000 decade pointed to an ever-increasing number of the population presenting with diabetes and other risk factors for chronic diseases. In the United States, public health authorities were concerned by the high prevalence of chronic diseases among the Hispanic population, the country's largest minority group, which had large concentrations living in the southern states.

Meanwhile, in Mexico, health authorities were taking note of a similar trend, particularly among communities situated along the northern border. Considering that the U.S.-Mexico border area has a relatively young population with about 25% being under the age of 30, the need to carry out a comprehensive study to better understand and address the situation of diabetes became an imperative……………” [Mirta Roses]

**Bridging the knowledge-action gap in diabetes along the U.S.-Mexico border**  Maria Teresa Cerqueira

“….The information shared in this special issue contributes significantly to strengthening the knowledge about diabetes and chronic disease risk factors on the border, and we hope that in so doing it will contribute to improving the policy and environmental conditions that are the underlying causes of diabetes mellitus type 2 (DM2 ) on the border.

The evidence clearly points to a critical need to create supportive environments for an active lifestyle, increase access to healthy and affordable foods, improve outreach and access to quality health services, continue research to enrich the evidence base of effective experiences, and strengthen surveillance along and across the border using a common methodology and considering the whole border as an integral epidemiological region…..” [Maria Teresa Cerqueira]
SPECIAL REPORTS

A historical overview of the United States-Mexico Border Diabetes Prevention and Control Project
Rita V. Diaz-Kenney, Rosalba Ruiz-Holguín, Federico G. de Cosío, Rebeca Ramos, Betsy Rodríguez, Gloria L. Beckles, Rodolfo Valdez, Patricia E. Thompson-Reid United States-Mexico Border Diabetes Prevalence Survey: lessons learned from implementation of the project
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This message from the Pan American Health Organization, PAHO/WHO, is part of an effort to disseminate information Related to: Equity; Health inequality; Socioeconomic inequality in health; Socioeconomic health differentials; Gender; Violence; Poverty; Health Economics; Health Legislation; Ethnicity; Ethics; Information Technology - Virtual libraries; Research & Science issues. [DD/ KMC Area]

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