



Crossing the Border: Continuity of Care for HIV-Infected Patients Returning to Mexico

a program of the
 U.S.-Mexico Border AETC Steering Team



AETC

Warmline: (800) 933 - 3413

PEpline: (888) HIV - 4911

(888) 448 - 4911

Perinatal Hotline:

(888) 448 - 8765

<http://www.aids-etc.org>

www.aetcBorderHealth.org

UCLA CHPDP HIV/AIDS Training Programs Delivered in Mexico: 1995- 2005



On my commute this morning I listened to...

- 9% 1. Nothing...I need my quiet time.
- 27% 2. Rock and Roll, Baby!
- 45% 3. Radio News, Traffic, Weather
- 18% 4. Other

My last HIV training was...

- 50% 1. In the past 3 months
- 0% 2. In the past 6 months
- 10% 3. 1 year ago
- 40% 4. More than 1 year ago

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I have assisted patients who were born in:

- 10% 1. Mexico
- 0% 2. Central America
- 70% 3. Both
- 20% 4. Neither

6

I understand how the Mexican healthcare system works.

- 0% 1. Absolutely---100%
- 45% 2. Yes, I know some of it
- 18% 3. I have no clue
- 36% 4. That's why I'm here!

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Which of these US metropolitan areas has the highest PERCENTAGE of Spanish-speaking households?

- 45% 1) Miami, FL
- 27% 2) Los Angeles, CA
- 18% 3) Santa Ana, CA
- 9% 4) San Jose, CA
- 0% 5) Van Nuys, CA

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The richest private citizen on the planet is currently a man named?

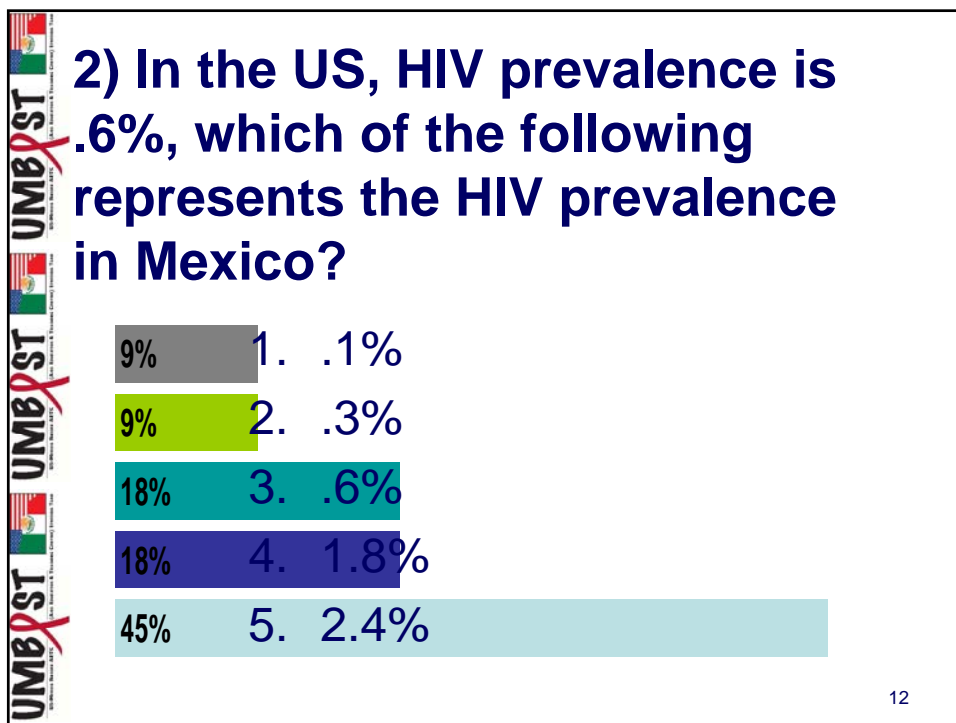
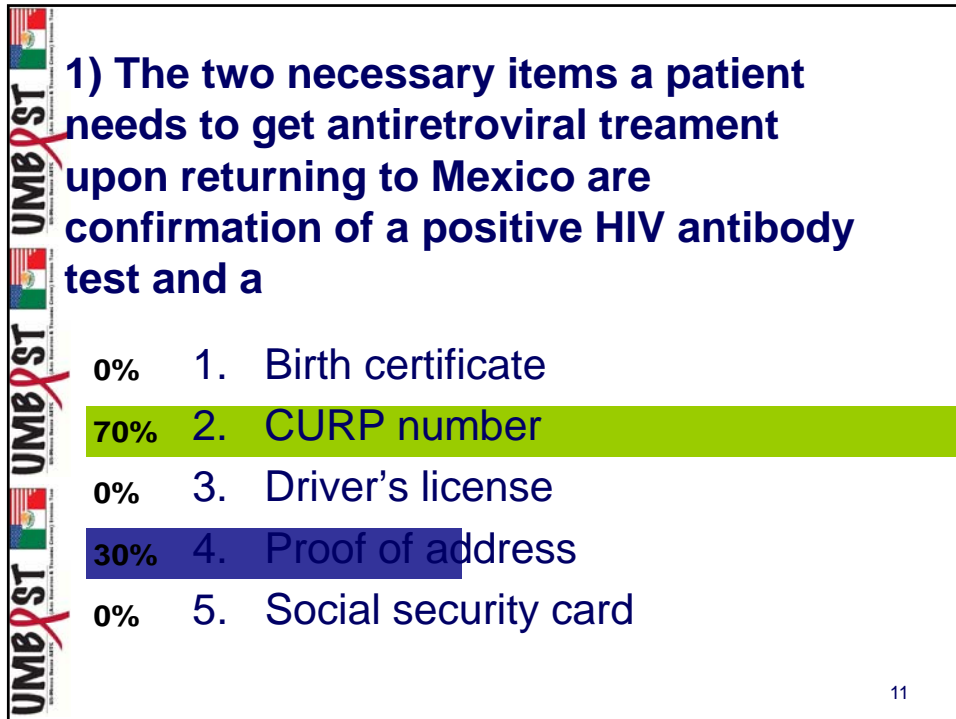
- 18% 1) Carlos Slim
- 18% 2) Bill Gates
- 18% 3) Warren Buffet
- 9% 4) Ted Turner
- 36% 5) Charles Delgado

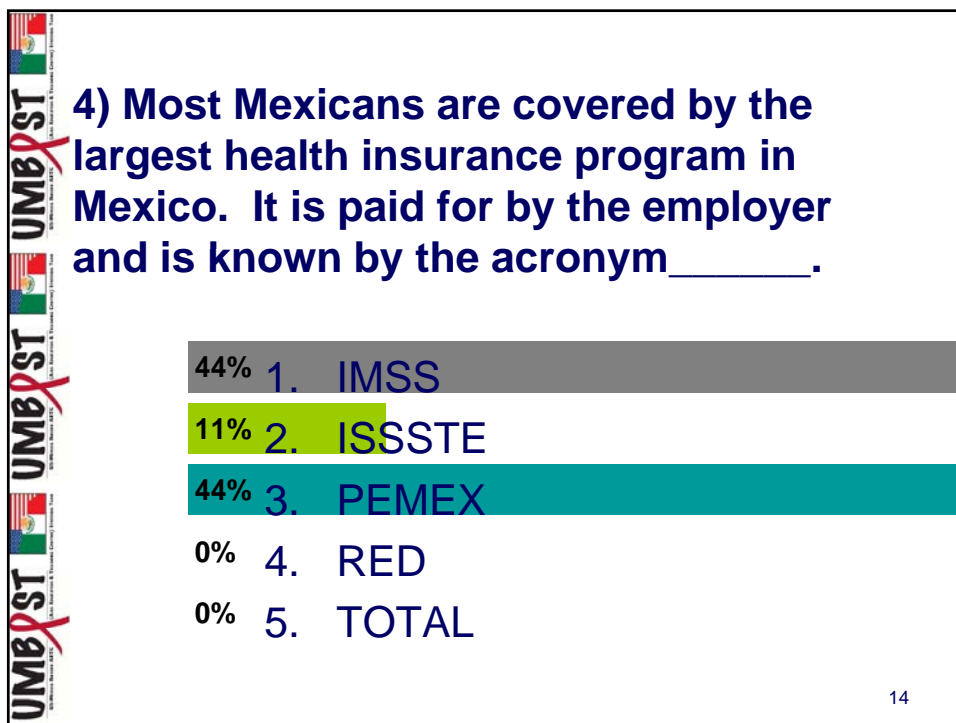
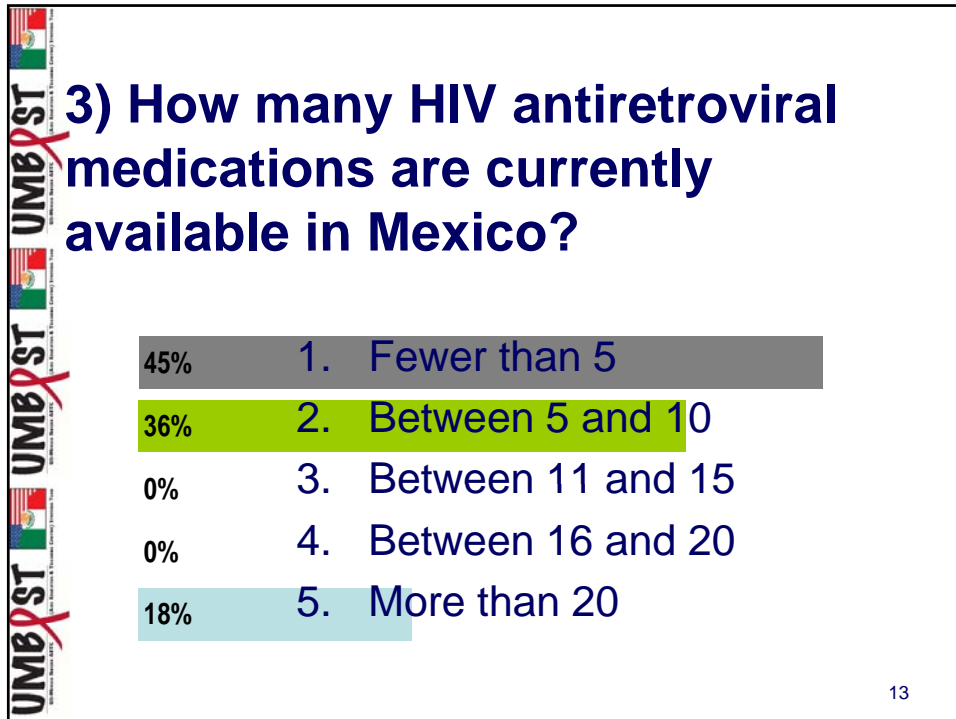
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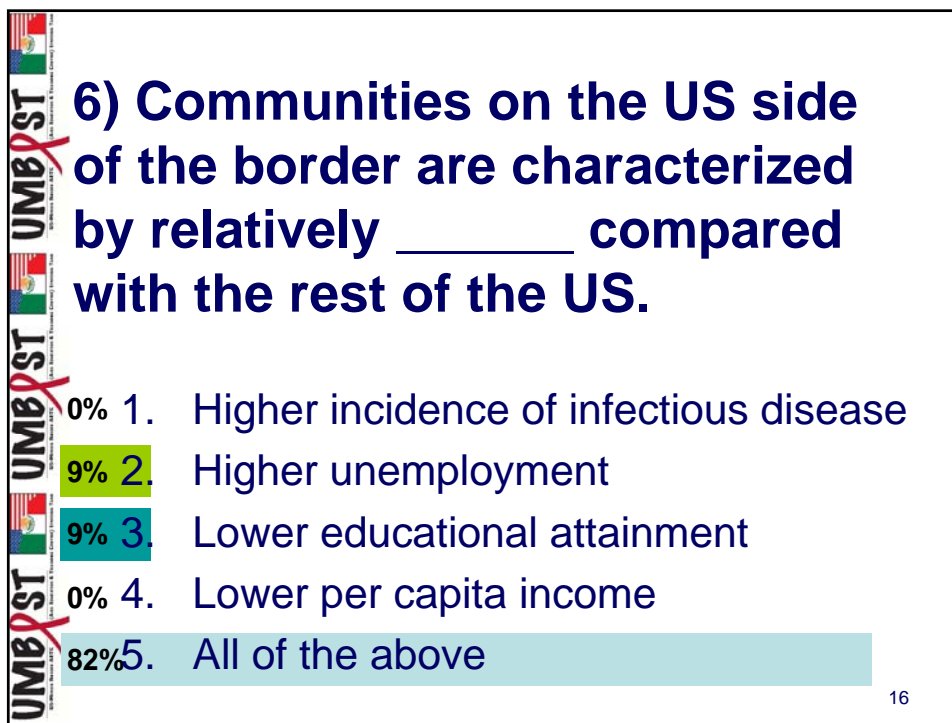
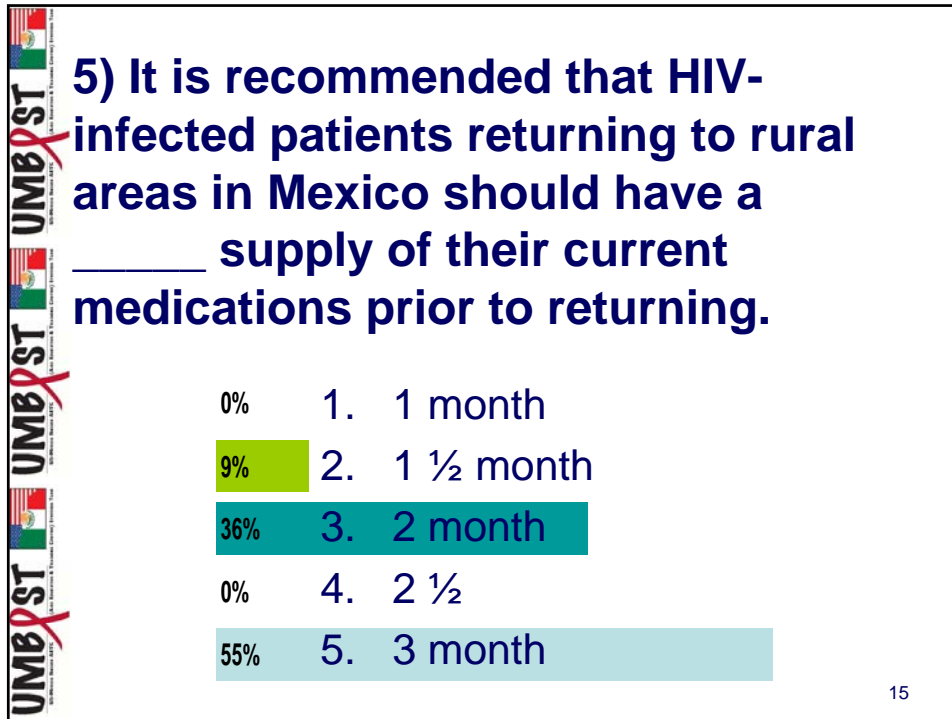
Have you finished your PRE TEST?


- 18% 1) Yes, please get started
- 18% 2) No, I need 1 more minute
- 18% 3) No, I need 2-3 more minutes
- 9% 4) No, I need 5 more minutes
- 36% 5) Sorry, I don't do PRE TESTS

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7) CAPASITS are _____ HIV/STI care clinics funded through the Secretariat of Health and _____; referral to CAPASITS requires an HIV diagnosis, antiretroviral history, basic labs, clinical summary and a referral from a general medical clinic.

0%	1. Inpatient; CENSIDA
0%	2. Inpatient; PEMEX
9%	3. Outpatient; CENSIDA
64%	4. Outpatient; Seguro Popular
27%	5. None of the above

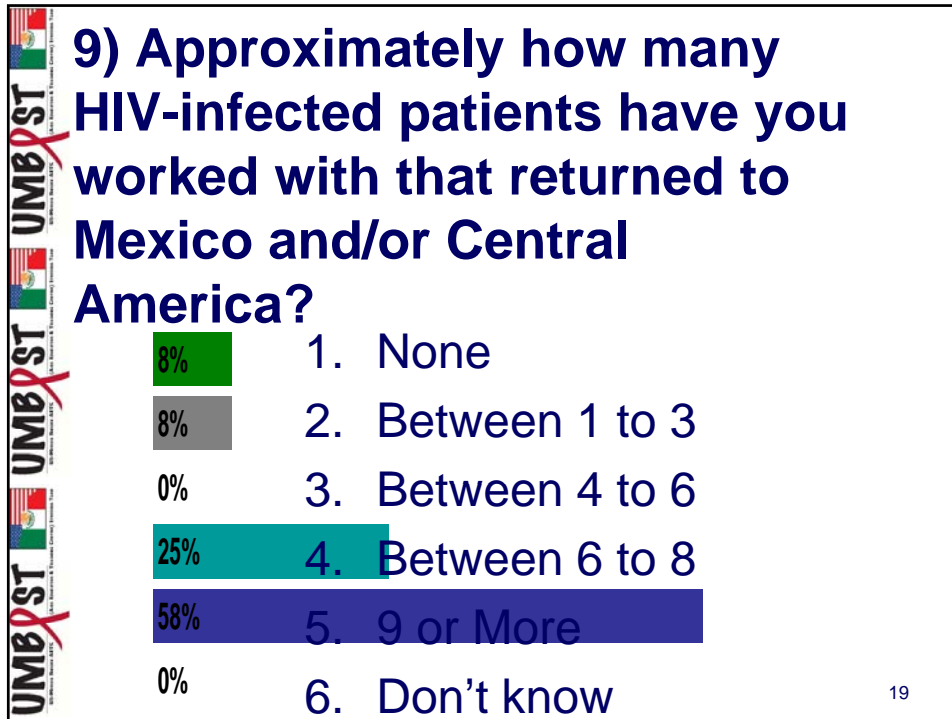
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8) Approximately what percentage of your agency's HIV-infected patients/clients are Mexican migrants?

0%	1. Fewer than 5%
33%	2. Between 5% to 10%
17%	3. Between 11% to 20%
8%	4. Between 21% to 30%
42%	5. More than 30%
0%	6. Don't know

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Objectives

At the conclusion of this session, participants will be able to:

- Discuss the HIV epidemic along the U.S.-Mexico border
- Briefly review health care delivery systems in Mexico, including those for HIV services
- Facilitate continuity of care for HIV-infected patients returning to Mexico

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Discussion Questions


- Are antiretroviral medications available to Mexican citizens in Mexico?
- Does Mexico have universal health care?
- Does Mexico have a federally funded anti-homophobia campaign (radio, TV)?
- What is the most frequently crossed border on the planet?

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Overview of the Epidemiology of HIV Infection in Mexico


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HIV and AIDS in Mexico

- Mexican population: 106,500,000
- Cumulative cases of HIV/AIDS at the end of 2005: 182,000


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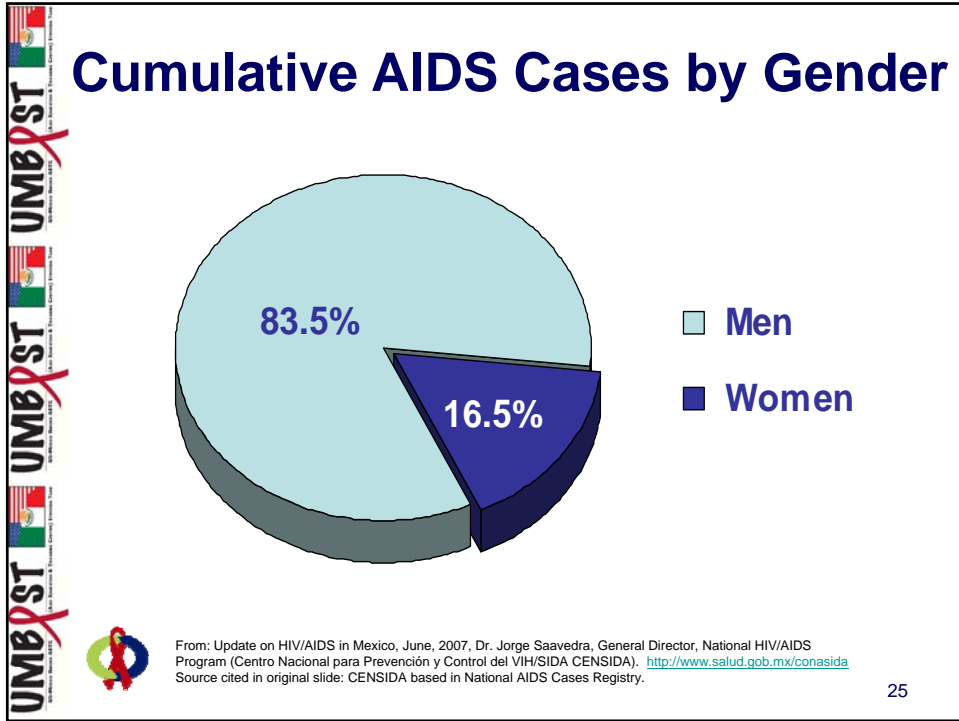
HIV/AIDS Cumulative Cases along the U.S.-Mexico Border

(as of June 30, 2007)

Baja Cal Norte:	5,172
Sonora:	1,726
Chihuahua:	3,052
Coahuila:	1,466
Nuevo León:	3,118
Tamaulipas:	2,586
TOTAL:	17,120



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Mexico's Adult HIV Prevalence in Regional Context

■ Mexico	0.3%
■ United States	0.6%
■ El Salvador	0.7%
■ Guatemala	1.1%
■ Honduras	1.8%
■ Belize	2.4%

From: Update on HIV/AIDS in Mexico, June, 2007, Dr. Jorge Saavedra, General Director, National HIV/AIDS Program (Centro Nacional para Prevención y Control del VIH/SIDA CENSIDA). <http://www.salud.gob.mx/conasida>
 Source cited in original slide: UNAIDS. 2004 Report on the global AIDS epidemic. Geneva, 2004

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Stigma and Discrimination


- *“I will not live in the same house with a person...

 - ...of a different race” = 40%
 - ...of a different religion” = 44%
 - ...with HIV/AIDS” = 57%
 - ...who is homosexual” = 66%*

From: Update on HIV/AIDS in Mexico, June, 2007, Dr. Jorge Saavedra, General Director, National HIV/AIDS Program (Centro Nacional para Prevención y Control del VIH/SIDA CENSIDA). <http://www.salud.gob.mx/conasida>
 Source cited in original slide: “Encuesta Nacional de Cultura Política y Prácticas ciudadanas 2001”. Revista Cambio, 17 de Agosto del 2002. (National Survey of Culture, Politics and Citizen Practices, 2001, Change Magazine, August 17, 2002).



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HIV in the U.S.-Mexico Border Region

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U.S. Border Characteristics

- 3 of the 10 poorest counties in the U.S.
- 21 counties designated as economically distressed areas
- Unemployment rate 250-300% higher than U.S. average
- 432,000 people live in 1,200 colonias in TX & NM; unincorporated, semi-rural communities, often with unsafe water supplies and substandard housing

United States Mexico Border Health Commission, 2008 http://www.borderhealth.org/border_region.php


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U.S. Border Characteristics

- Higher incidence of infectious diseases compared with U.S. average
- If made a state, border region would rank:
 - Last in access to health care
 - 2nd in death rates due to hepatitis
 - 3rd in deaths related to diabetes
 - Last in per capita income
 - 1st in number of school children living in poverty
 - 1st in number of uninsured children

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Immigration

- 43 points of entry on U.S. border
- Nearly 195M passenger vehicle crossings & 49M pedestrian crossings/year at 25 ports of entry
- Numbers do not include undocumented crossings
- Not all people who enter from the U.S.-Mexico border are Mexican, numbers include people from further south

University of Oklahoma Center for Applied Research, 2005. *HIV AIDS Along the US Mexico Border*

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Mexican Immigration

- People of Mexican origin make up 29.5% of all immigrants in the U.S.
- In 2005, 11 million Mexican immigrants were living in the U.S.
 - 66% located in the 4 border states
 - 70% are 18-44 years of age
 - 59% have no health coverage
 - 55% are undocumented

Conasida 2008: Manual para la prevención del VIH/SIDA en migrantes Mexicanos a Estados Unidos. www.salud.gob/conasida

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HIV along the U.S.-Mexico Border

- Prevalence difficult to assess due to different methodologies in surveillance reporting and transient populations
- Border region is unique and rates cannot be extrapolated accurately from national statistics

University of Oklahoma Center for Applied Research, 2005. *HIV/AIDS Along the US Mexico Border*

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Who Is UMBAST?

- **U.S.-**
- **Mexico**
- **Border**
- **AETC**
- **Steering**
- **Team**

- Promote high-quality, culturally sensitive education & capacity building programs
- Provide focused collaboration through joint planning, resource sharing, & evaluation

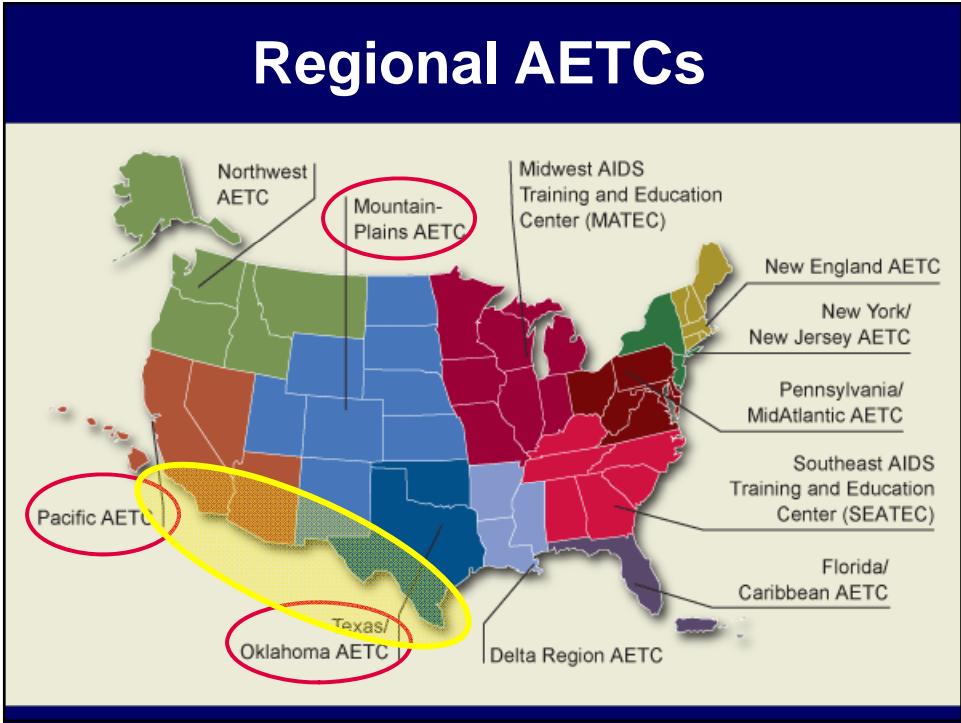
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Who Is UMBAST?


- **UMBAST** includes members from 3 AETCs that serve border region:
 - Mountain Plains AETC (New Mexico)
 - Pacific AETC (Arizona & California)
 - Texas/Oklahoma AETC (Texas)
- In collaboration with AETC National Resource & Evaluation Centers, HRSA representatives, & others with an interest in HIV and the border

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Mexican Health Care Delivery Systems

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U.S. Health Care

- Guaranteed only for military, prison, and special programs for poor or elderly
- Most obtain coverage through an employer, but employers are not required to provide coverage
- Employees often must share plan costs
- >30 million without coverage often use ER or pay-for-service clinics

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U.S. HIV Health Care Funding

- Private insurance
- Public insurance
- **Ryan White HIV/AIDS Treatment Modernization Act of 2006**
- Clinical trials
- Compassionate release

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Mexico: Health as a Constitutional Right

- Mexican Constitution establishes the right of health care for all Mexican citizens
- Secretary of Health, appointed by the President, oversees Secretaria de Salud
- Secretaria de Salud charged with health surveillance, reporting, prevention, and management
- Constitution protects migrant populations, indigenous populations, children, youth, women, and agricultural laborers

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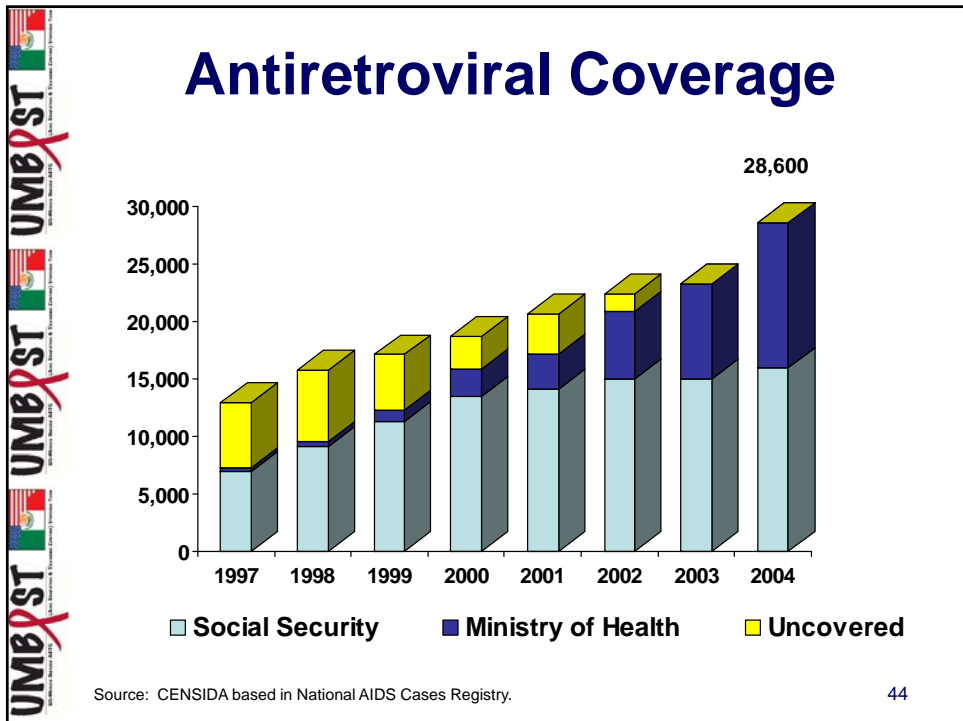


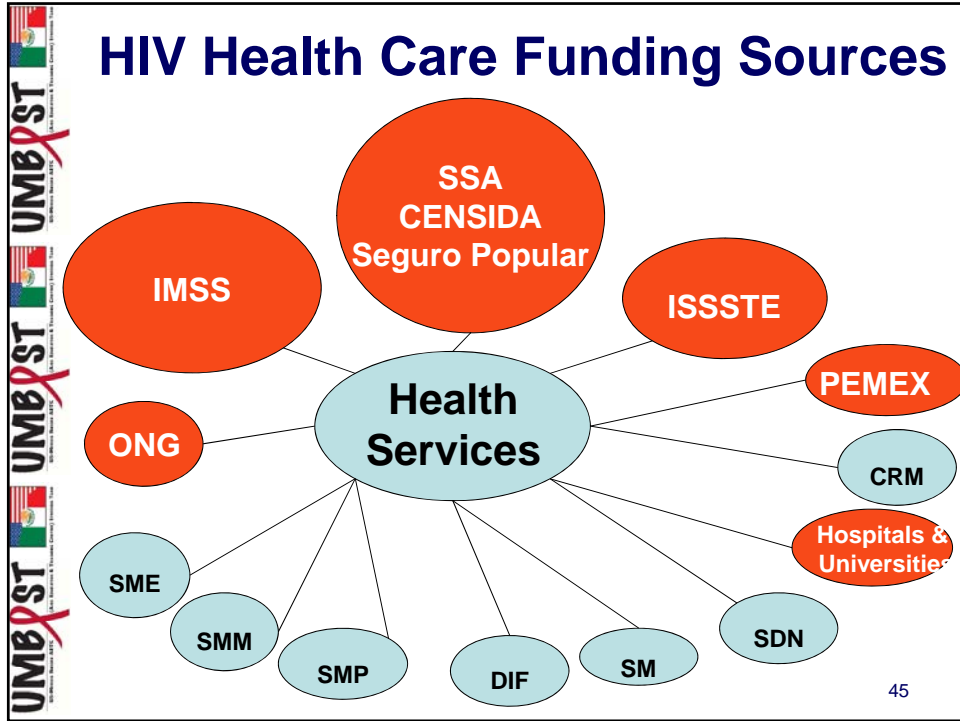
Seguro Popular


→


- 2001: Secretaria de Salud instituted Seguro Popular insurance program to provide health care coverage to uninsured/underserved populations
- 2005: 5.1 million families covered by Seguro Popular
- 2007: Seguro Popular becomes law

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- ## Major HIV Care Sources
- Most public employees: **ISSSTE**
(Instituto de Seguridad y Servicios Sociales de los Trabajadores del Estado)
 - Insured private sector employees: **IMSS**
(Instituto Mexicano del Seguro Social)
 - Uninsured/Migrant: **SSA/CENSIDA**
(Secretaria de Salud/Centro Nacional para la Prevención y el Control del VIH/SIDA)
 - Referred to CAPASITS Clinics
 - Insured under Seguro Popular
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CAPASITS

- **C**entro *Outpatient*
- **A**mbulatorio de *Center for*
- **P**revención y *Prevention and*
- **A**tención en *Attention in*
- **S**IDA y *AIDS and*
- **I**nfecciones de *Sexually*
- **T**ransmisión *Transmitted*
- **S**exual *Infections*

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CAPASITS Locations

From: National Center for Prevention and Control of HIV/AIDS, Operative Investigation Administration, Mexico
 Secretariat of Health,
 (Centro Nacional para la Prevención y el Control del VIH/SIDA Dirección de Investigación Operativa, Secretaría de Salud). <http://www.salud.gob.mx>

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CAPASITS



Ciudad Victoria Nayarit La Paz

Mexicali Veracruz Zacatecas


From: National Center for Prevention and Control of HIV/AIDS, Operative Investigation Administration, Mexico
 Secretariat of Health,
 (Centro Nacional para la Prevención y el Control del VIH/SIDA Dirección de Investigación Operativa, Secretaría de Salud), <http://www.salud.gob.mx>

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Referral to CAPASITS

- Referral from a general medical clinic
- HIV diagnosis
- Antiretroviral history
- Basic labs
- Clinical summary

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Referral to Care

Once referred to a CAPASITS clinic, the patient will receive assistance to obtain coverage through Seguro Popular, and will need:

- Proof of address/residence
- Birth certificate
- CURP


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CAPASITS Services

- General medical care
- HIV care
- ART treatment
- Laboratory testing
- Specialist referrals
- Dental care
- Behavioral health services
- Social work services
- Adherence counseling
- STD screening
- Outreach

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ARVs in Mexico:

full chart available at
www.aetcborderhealth.org/aidsetc?page=ab-01-10

Antiretrovirals Available in the United States		Antirretrovirales Disponibles en México	
Generic	Brand Name	Genérico	Nombre Comercial
Nucleoside/Nucleotide Analogues (NRTIs)		Inhibidores de la Transcriptasa Reversa Análogos a Nucleósidos (ITRAN)	
Abacavir	Ziagen	Abacavir	Ziagenavir
Didanosine	Videx	Didanosina	Videx
Emtricitabine	Emtriva	Emtricitabina	Emtriva
Lamivudine	Epivir	Lamivudina	3TC
Stavudine	Zerit	Estavudina*	Zerit

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Recommendations for HIV Patients Returning to Mexico

- **Necessary:**
 - ✓ **Positive HIV antibody test result**
(confirmed with Western blot)
 - ✓ **Patient's CURP number**
("Clave Única de Registro de Población")

www.gobernacion.gob.mx/CurpPS_HTML/jsp/CurpTDP.html


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Recommendations for HIV Patients Returning to Mexico

- **Recommended:**
 - ✓ 3-month supply of current HIV medications
 - ✓ Recent CD4+ T-cell count (not free in all Mexican states)
 - ✓ Recent viral load test result (not free in all Mexican states)
 - ✓ Copy of patient's chart including complete ART history

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Online Resources for Border and Migrant HIV Treatment and Prevention

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UMBAST Online

<http://www.AETCBorderHealth.org>

- Contact information
- Border Resource Directory
- Updated fact sheets & medication lists
- Links to border and migrant organizations, reports, and events

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Border Resource Directory

<http://www.AETCBorderHealth.org>



U.S.-Mexico Border HIV/AIDS Resource Directory

Compiled by the U.S.-Mexico Border AIDS Education and Training Centers (AETC) Steering Team (UMBAST)

Funded by:
Health Resources and Services Administration (HRSA)
HIV/AIDS Bureau (HAB)
Division of Training and Technical Assistance





U.S.-Mexico Border HIV/AIDS Resource Directory

Compiled by the U.S. Mexico Border AETC Steering Team with support from the HRSA HIV/AIDS Bureau

Click on an area of the map to get a listing of HIV/AIDS resources in that region.

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Border Region Resources

- Clinician training
- HIV treatment facilities
- HIV prevention and service organizations

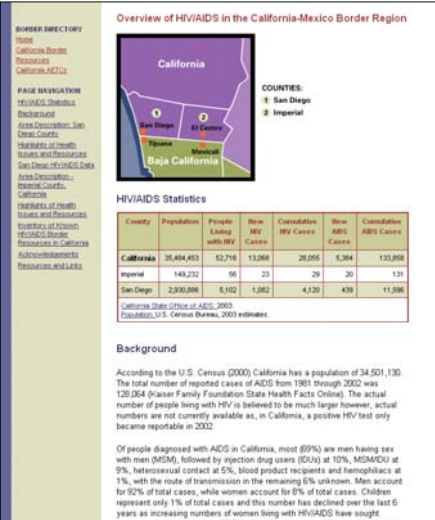


Agency	City	County	Training	Treatment	Prevention
Arizona AETC	Tucson	Statewide	X		
Bob's XIA Pharmacy	Wilcox	Cochise		X	
Cochise Health Department	Dozier	Cochise		X	X
El Rio Health Center Arizona Border HIV/AIDS Care (ABNAC) Project	Tucson	Pima		X	X
El Rio Health Center Special Neurology Associates	Tucson	Pima		X	X
Mariposa Clinic #1	Nogales	Santa Cruz		X	
Mariposa Clinic #2	Nogales	Santa Cruz		X	
Mariposa Clinic #3	Nogales	Santa Cruz		X	
Mariposa Pharmacy	Nogales	Santa Cruz		X	
New, Turi, Sierra Vista SEAHWC	Sierra Vista	Cochise			X
OSCO Pharmacy	Sierra Vista	Cochise		X	
Pima County HIV/AIDS CARE Consortium	Tucson	Pima			X
Pharmacia	Yuma	Yuma		X	
Santa Cruz Family Outreach Center	Nogales	Santa Cruz		X	
SEAHWC (Southeastern Arizona Behavioral Health Services)	Benoni, Cochise, Santa Cruz			X	
Southern Arizona AIDS EDUCATION	Tucson	Pima			X




Border Region Overviews

<http://www.AETCBorderHealth.org>



Overview of HIV/AIDS in the California-Mexico Border Region



HIV/AIDS Statistics

County	Population	People Living with HIV	New HIV Cases	Cumulative HIV Cases	New AIDS Cases	Cumulative AIDS Cases
California	35,844,403	62,716	13,269	28,255	5,394	133,898
Imperial	149,232	66	23	29	20	131
San Diego	2,300,098	5,102	1,062	4,130	439	11,396

California State Office of AIDS, 2003
Epidemiol. U.S. Census Bureau, 2003 estimates.

Background

According to the U.S. Census (2000) California has a population of 34,501,130. The total number of reported cases of AIDS from 1981 through 2002 was 120,064 (cancer Family Foundation State Health Facts Online). The actual number of people living with HIV is believed to be much larger however, actual numbers are not currently available as, in California, a positive HIV test only became reportable in 2002.

Of people diagnosed with AIDS in California, most (89%) are men having sex with men (MSM), followed by injection drug users (IDUs) at 10%, MSM/IDU at 9%, heterosexual contact at 5%, blood product recipients and hemophiliacs at 1%, with the mode of transmission in the remaining 8% unknown. Men account for 92% of total cases, while women account for 8% of total cases. Children represent only 1% of total cases and this number has declined over the last 6 years as increasing numbers of women living with HIV/AIDS have sought

- Epidemiologic overviews about HIV/AIDS in the border counties

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Search “Mexico border AIDS”


[Web](#) [Images](#) [Groups](#) [News](#) [Froogle](#) [Maps](#) [Scholar](#) [more »](#)
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Web Personalized Results **1 - 10** of about **6,330,000** for **mexico border aids**. (0.30 seconds)


[US-Mexico Border HIV/AIDS Resource Directory](#)
 The US-Mexico Border AETC Steering Team (UMBAST) has compiled this **Border Resource Directory** to better connect HIV/AIDS resources with community needs along ...
www.aids-ed.org/aidsetc?page=rep-umbast-dir - 14k - [Cached](#) - [Similar pages](#)

[US/Mexico Border AETC Steering Team \(UMBAST\)](#)
 Contact and program information for the AETCs' US/Mexico Border AETC Steering Team (UMBAST)
www.aids-ed.org/aidsetc?page=ab-01-10 - 19k - [Cached](#) - [Similar pages](#)
[\[More results from www.aids-ed.org \]](#)

[AEGIS-15IAC: The US/Mexico border AIDS Education and Training ...](#)
ISSUES: The US/Mexico border is the most traversed border between any two nations on the planet. This session will review a Health Resources and Services ...
www.aegis.com/conferences/iac/2004/D12932.html - 7k - [Cached](#) - [Similar pages](#)

[The US/Mexico border AIDS Education and Training Center \(AETC ...](#)
Lessons Learned: Data indicate there are unique HIV/ AIDS-related training needs that should be addressed in US counties sharing the border with Mexico. ...
gateway.nlm.nih.gov/robot_pages/MeetingAbstracts/102278431.html - 25k - [Cached](#) - [Similar pages](#)

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QUESTIONS?

- **POST TEST**
- **FACT SHEETS**
- **SLIDES**
- **CONSENTS**

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