



## Mexico



<http://www.who.int/countries/en/>

WHO region	Americas
World Bank income group	Upper-middle-income
<b>CURRENT HEALTH INDICATORS</b>	
Total population in thousands (2015)	127017
% Population under 15 (2015)	27.6
% Population over 60 (2015)	9.6
Life expectancy at birth (2015)	77.2 (Both sexes) 80.0 (Female) 74.5 (Male)
Neonatal mortality rate per 1000 live births (2015)	7.0 [5.8-8.4]
Under-five mortality rate per 1000 live births (2015)	13.2 [11.7-14.8]
Maternal mortality ratio per 100 000 live births (2015)	38 [ 34 - 42]
% DTP3 Immunization coverage among 1-year-olds (2014)	87
% Births attended by skilled health workers (2014)	98.7
Infants exclusively breastfed for the first 6 months of life (%) (2012)	14
Density of physicians per 1000 population (2011)	2.095
Density of nurses and midwives per 1000 population (2011)	2.529
Total expenditure on health as % of GDP (2014)	6.3
General government expenditure on health as % of total government expenditure (2014)	11.6
Private expenditure on health as % of total expenditure on health (2014)	48.2
Adult (15+) literacy rate total (2007-2012)	94
Population using improved drinking-water sources (%) (2015)	92.1 (Rural) 97.2 (Urban) 96.1 (Total)
Population using improved sanitation facilities (%) (2015)	74.5 (Rural) 88.0 (Urban) 85.2 (Total)
Poverty headcount ratio at \$1.25 a day (PPP) (% of population) (2010)	0.7
Gender Inequality Index rank out of 155 countries (2014)	74
Human Development Index rank out of 188 countries (2014)	74

### Sources of data:

Global Health Observatory May 2016  
<http://apps.who.int/gho/data/node.cco>

## HEALTH SITUATION

Mexico is a representative democracy divided into 31 states and a Federal District. It is an upper middle income country of 127 million inhabitants. The official language is Spanish although 76 other languages are spoken among indigenous populations.

Mexico's epidemiologic transition towards chronic diseases is significantly affecting its society as a whole and the Health System in particular. Mexico is among the countries with the highest prevalence globally of children who are overweight or obese and more than 70% of adults are overweight. In 2013, the President of Mexico launched a National Strategy on the Prevention and Control of Overweight, Obesity and Diabetes. Another challenge for Mexico is the significant burden of morbidity and mortality related to injuries. Although transmissible diseases still persist, Mexico has initiated the process of verifying elimination of onchocerciasis and trachoma from its territory.

Mexico has advanced significantly towards the achievement of the Millennium Development Goals, although anticipates that two will not be achieved, that of reducing maternal mortality by three quarters and infant mortality by two thirds.

Among binding international treaties related to health, Mexico reports having acquired the basic core capacities as outlined in the International Health Regulations. In 2004, Mexico was the first country in the Region of the Americas to ratify the Framework Convention on Tobacco Control.

México is a country of origin, destination and transit for a significant number of migrant workers, therefore the health and welfare of migrants is a concern.

## HEALTH POLICIES AND SYSTEMS

The structural reforms proposed by the Executive branch of government are oriented towards stimulating economic growth and reducing social inequities and inequalities. The 2003 reform of the General Health Law resulted in the Commission on Social Health Protection to ensure equal access to health for all Mexicans. Despite this tremendous achievement, out-of-pocket expenditures for health indicate an opportunity to improve the quality and effective access to health services especially primary health care connected to a referral/counter-referral system. Historically, the Mexican Health System has been segmented and fragmented which is also a factor in equitable access to quality health services.

In Mexico, between 2000 and 2013, the % GDP invested in health varied, but generally increased from 5.9% to 6.3%. In the same period, public expenditures in health as a percentage of GDP increased from 2.6% to 3.3%. This level is below the average among countries in the Organization for Cooperation and Economic Development (OCED) and below the 6% level recommended in the 2014 PAHO Resolution CD53.R14.Strategy for Universal Access to Health and Universal Health Coverage.

The National Development Plan 2013-2018 established five national goals and three cross-cutting strategies associated with health and gender, especially the goal of "inclusive Mexico" which includes several indicators on health, social security and sustainable development.

## COOPERATION FOR HEALTH

Mexico is very active in international cooperation in a dual manner, as a receiver of cooperation as well as a donor/partner. The health sector participates in subregional entities such as the Mesoamerican System of Public Health, the Pacific Alliance, the Iberoamerican Community and with Eurosocial of the European Union. Also, Mexico cooperates with the United States and Canada in the development of health promoting strategies for the migrant population. In addition, Mexico participates actively in various organizations and international fora as a member of the Organization of American States, United Nations, Asia Pacific Economic Cooperation, and Organization for Economic Cooperation and Development among others. The Mexican Agency of International Cooperation for Development (AMEXCID), is a decentralized agency of the Secretary of External Relations whose mission is to guide, coordinate and facilitate Mexican policies of international cooperation for development according to national priorities in areas of sustainable human development. Mexico has nine WHO Collaborating Centers which focus their actions largely in programs of technical cooperation in various countries of the Region.



## PAHO/WHO COUNTRY COOPERATION STRATEGIC AGENDA (2015–2018)

Strategic Priorities	Main Focus Areas for WHO Cooperation
<b>STRATEGIC PRIORITY 1:</b> Strengthen effective access to health services in the country	<ul style="list-style-type: none"> <li>Contribute to strengthening effective access, performance, supervision, monitoring and evaluation of health services network.</li> <li>Access and efficient use of medicines and health products.</li> <li>Strengthening inter-sectorial primary health care.</li> <li>Improving care processes through stewardship and governance of health services.</li> <li>Incorporation and rational use of technologies for the effective access to health services.</li> </ul>
<b>STRATEGIC PRIORITY 2:</b> Strengthen health care quality in the country	<ul style="list-style-type: none"> <li>Contribute to the strengthening and implementation of sectorial policy for quality and patient safety at the national health system.</li> <li>Strengthening quality of care regulations.</li> <li>Promoting citizen participation for the quality of health services.</li> <li>Training of human resources based on country's health needs.</li> <li>Definition of the National Palliative Care Plan.</li> <li>Reinforce the mechanisms for the integration and exchange of information at the National Health System to improve quality.</li> <li>Integrated Cancer Prevention and Control Programme.</li> </ul>
<b>STRATEGIC PRIORITY 3:</b> Technical cooperation to develop programs and actions for health promotion, disease prevention and control	<ul style="list-style-type: none"> <li>Non-communicable diseases, risk factors and healthy ageing.</li> <li>Communicable diseases with emphasis on HIV, AIDS, vector-borne, vaccine-preventable, emerging and re-emerging diseases.</li> <li>Maternal, perinatal and reproductive health with an intercultural approach and gender equity.</li> <li>Consolidate inter-sectorial actions on health promotion, disease and injury prevention.</li> <li>Development and strengthening of interventions for protection against health risks.</li> </ul>
<b>STRATEGIC PRIORITY 4:</b> Promote international health cooperation	<ul style="list-style-type: none"> <li>Encourage new schemes for South – South cooperation on public health for strengthening local and regional capacities.</li> <li>Multidimensional aspects of migration and health.</li> </ul>

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