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Proceedings Report of the United States-México Binational Border Health Research Forum Monterrey, Nuevo León



*Providing international
leadership to optimize health
and quality of life along the
United States-México border*

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Monterrey, Nuevo León, México

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I. INTRODUCTION

The United States-México Border Health Commission (BHC) organized the first Binational Border Health Research Forum in Monterrey, Nuevo León, on October 12-13, 2006. This was a first step in realizing the vision of developing a comprehensive border health research agenda for the U.S.-México border.

The BHC's Border Health Research Work Group proposed this forum be the first in a series of binational forums. The purpose of these forums is to convene border health experts who will lead to long-term coordinated dialogues and actions aimed at understanding the current environment of border health research, identifying the types of research performed, as well as its application, implications on policies and actions, and the differences in financing, capacity, or priorities in research.

The overall objective was to organize a binational forum of academic and research institutions and decision-makers interested in border health research.

II. THEMES & EXPECTED OUTCOMES

The forum incorporated four themes into the expected outcomes: 1) Types of Research, 2) Applications of Research, 3) Implications of Research, and 4) Research Funding.

Participants were organized into research discussion groups and asked to develop a framework for future action. Expected outcomes of these workgroups were as follows:

- A. Identification of key elements for the development of specific action plans that would foster an increased understanding of the status of border health research in specific topic areas. Topics addressed included funding for border health research, dissemination of research and applicability, capacity development for specific types of research, and ethical implications of research.
- B. Description of steps needed to recognize the extent of completed and ongoing border health research that insures a comprehensive approach to information gathering and sharing. Topics addressed included identifying the following: specific approaches to gathering and managing border health research data, specific mechanisms that could be used to coordinate planning for border health research, and specific mechanisms to promote the Healthy Border 2010 indicators as a reference framework for border health research.

III. LOGISTICS

The forum was held at the Raúl Rangel Frías University Library of the Universidad Autónoma de Nuevo León with the cooperation of the Secretariat of Health of the State of Nuevo León and the BHC-México Section Outreach Office in Nuevo León.

Forty-seven researchers and/or academicians, in addition to health representatives from the state and federal levels, and other research institutions, represented sixteen universities from both countries. In total, thirty-nine institutions from the border region were represented.

The forum included keynote presentations, plenary sessions, and work groups. The keynote presentations focused on two research center models. The first was on the *Model of Prevention Research Centers of the Centers for Disease Control and Prevention (CDC)* by Ms. Barbara Gray, Team Lead for Research Dissemination, Prevention Research Centers Program, CDC, and the second was on the *Center for Health Sciences Research and Development of Nuevo León* by Dr. Jesús Ancer Rodríguez, Secretary General, Universidad Autónoma de Nuevo León.

Dr. Jose Manuel de la Rosa, co-chair of the Border Health Research Work Group, BHC-U.S. Section, reflected on the future of border research and the importance of strengthening previous efforts made by various agencies.

According to the work group dynamics described by Dr. Dora Elia Cortés, co-chair of the Border Health Research Work Group, BHC-México Section, three work groups were organized and composed as follows:

Group A: Universities

Group B: Federal Agencies

Group C: Others

Academicians from the Universidad Autónoma de Nuevo León and the Universidad de Morelos, as well as staff of the U.S. and México Sections, and invited researchers, assisted as moderators, observers, and note-takers during the entire event.

IV. RECOMMENDATIONS

Each work group summarized the main conclusions and recommendations according to the previously described themes as follows:

A. Types of Research

1. Incorporate individual health and lifestyles.
2. Identify and incorporate community-based research (needs and strengths).
3. Include health systems that can coordinate across the border and between states and municipalities or counties.
4. Standardize health definitions and terminology.
5. Work with the federal government in both countries to establish or create a common research agenda.
6. Create a mechanism to facilitate binational research.
7. Integrate sponsors (financial and others), the community, researchers, and health services into research activities.
8. Strengthen the capabilities of non-governmental organizations in terms of research on border health, best practices, and prevention.
9. Guide and direct research on prevention; change the focus of research to meet the needs of the community.
10. Prioritize health research with an integrated bio-psycho-social focus, not just a biomedical focus.

B. Applications of Research

1. Include current and relevant border health research in the BHC annual reports.
2. Encourage funding agencies to require an implementation plan as part of standard protocols for border health research.
3. Have the BHC promote the binational dissemination of health research results, previous and successful experiences, and recommendations to the community, health service agencies, and organizations.
4. Have the BHC provide technical assistance to communicate research recommendations to health policymakers.
5. Establish communication spaces, such as an electronic portal, local and regional forums, and written media to disseminate research results.
6. Strengthen cooperation with the Pan American Health Organization.
7. Have the BHC promote rapport between public health institutions and organizations of other sectors, such as sister cities, chambers of commerce, etc., to create awareness of the public health impact on business and vice versa.
8. Evaluate the impact of border research on policy development.
9. Create a research project database for researcher use that includes all researcher contact information.
10. Allocate some funding of the BHC Outreach Offices to research.
11. Establish a rule that requires research-financing requests include a plan for implementation, dissemination of results, and impact evaluation.
12. Share information on research initiatives within the academic and research community and the community in general.
13. Translate and apply research results to the community.
14. Develop briefs related to health and policy decision-making.
15. Disseminate research results to the media to facilitate change in health beliefs and behavior.

C. Implications of Research

1. Ensure the integration of various border health research groups.
2. Establish a strategy for binational communication on conducted research.
3. Establish the Binational Border Research Network.
4. Promote the establishment of a Center for Research on Border Health Prevention.
5. Establish a Consultative Committee for the Binational Border Health Research Network with the participation of all sectors.
6. Promote the discussion of bioethics between the two countries.
7. Prepare health research agreements based on the legal frameworks of each country with the community's active involvement.
8. Identify and clarify the implications of health research on improving the quality of life, health, and policymaking.
9. Identify issues related to ethics including standardization and norm setting and the development of work groups that will provide a cross-fertilization platform.
10. Ensure the border is the subject and object of research.
11. Ensure all research is translatable and transferable to the community.

D. Research Funding

1. Establish an inventory of the funding sources available.
2. Establish a mechanism to finance border health research.
3. Establish a mechanism to provide technical assistance in the applications for funds.
4. Make arrangements with México's National Science and Technology Council (CONACYT, Spanish acronym) and the Mexican Congressional Health Commission for more resources for border health research.
5. Identify stakeholders that could support border health research.
6. Promote legislation that includes funding for border health research among government agencies.
7. Identify non-governmental and non-profit organizations that support border health research, which may potentially have funding available; identify alternative sources such as research scholarships.

All recommendations were intended to apply to both the United States and México, unless otherwise specified.

V. CONCLUSIONS & NEXT STEPS

The forum concluded by considering next steps, which proposed that the U.S.-México Border Health Commission 1) serve as the leadership framework for developing the border health research agenda, 2) sponsor a research forum every two years in the United States or in México, and 3) establish a Binational Border Health Research Advisory Council who, together with the Commission, would work on developing the proposed border health research agenda for the U.S.-México border region.