History:


- On July 24, 2000, the Agreement between the United States of America and the United Mexican States established the full Commission. The Agreement delineates the functions, composition, operation, and legal status of the U.S. and Mexican Sections. With regard to duties and composition, the Agreement aligns closely with PL 103-400.

- U.S. President George W. Bush signed an Executive Order on December 21, 2004, to designate the BHC as a public international organization with limited provisions for the purposes of the International Organizations Immunities Act.

Mission:

The BHC’s mission is to provide international leadership to optimize health and quality of life along the United States-México border.

Goals:

Its primary goals are to—

1. Institutionalize a domestic focus on border health that can transcend political changes, and
2. Create an effective venue for binational discussion to address the public health issues and problems affecting the United States-México border populations.

To accomplish these goals, the BHC—

- Facilitates identification of public health issues,
- Supports studies and research on border health, and
- Brings together effective federal, state, and local public/private resources by forming dynamic partnerships and alliances to improve the health of the border populations through creative, multi-sectoral approaches.

The BHC is a critical catalyst to:

- Raise awareness about public health issues and challenges faced by border populations,
- Help create the necessary venues and partnerships to mobilize the actions needed to improve health status, and
- Serve as a reliable information portal about border health issues.
United States-México Border Health Commission

Commission at a Glance

The México Section of the BHC:

• Is composed of the México Secretary of Health or his/her delegate, as Commissioner,
• One member from each of the six border states, who is designated by the Secretary of Health for the Government of the United Mexican States, and
• The State Secretaries of Health of Baja California Norte, Sonora, Chihuahua, Coahuila, Tamaulipas, and Nuevo León, or their respective delegates.

The United States Section of the BHC:

• Is composed of the U.S. Secretary of Health and Human Services, or his/her delegate, as Commissioner,
• Two individuals from each of the border states, who are nominated by their respective governor and appointed by the President of the United States, and
• The Commissioner of Health or Chief Health Officer from the States of Arizona, California, New Mexico and Texas, or their respective delegates.

Individual members—whether practicing health care professionals or members of the academic/research community—contribute a range and depth of experiences, expertise, and viewpoints. Together with other members of the U.S. and Mexican Sections, these individual members reflect an important cross-section of border population health needs and experiences at the local level and link with a multitude of stakeholders within a given community.

As ex-officio members, the ten state health officers from the border states address current and emerging public health challenges, enable states’ health policymakers and technical experts to share experiences and lessons learned, and implement changes within their respective states in a more coordinated approach regarding border health issues. The state health officers and the health departments they represent have extensive contacts and networks with multi-community stakeholders from the public and private sectors that enable dialogue and information exchange at the local level.

The federal component of the BHC completes the membership

• In their leadership roles as Commissioners of the U.S. and México Sections of the BHC, the U.S. Secretary of Health and Human Services and the Secretary of Health of México are essential for the BHC’s effectiveness and sustainability.
• The BHC receives federal appropriations and support through the U.S. Department of Health and Human Services (HHS) and the Mexican Secretaria de Salud (SS).
• With firm footing in these respective federal agencies, the BHC has access to a wide array of technical agencies and policymakers to help implement its vision and action.
• The Office of Global Affairs within the Office of the Secretary, HHS, Washington D.C., and the General Directorate for International Relations of the SS in México, D.F., serve as the federal points of coordination for the BHC.

1 Subsequently amended as 22 U.S.C. § 290m-5.