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We declare that we have no conflict of interest.

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Health reform in Mexico: a work in progress

Most nations fall short in one way or another of meeting such basic health-system goals as universal access, uniformly high quality, and reasonable cost shared in a fair manner. Although such goals apply everywhere, the type and degree of deficiency varies between countries and over time. Opportunities for progress and reform in any one country similarly vary, depending on the convergence of public concern, core social values, political will, financial capacity, alignment of interests, organisational and professional readiness, and leadership. Such convergence is uncommon, and it is therefore worthy of notice when fundamental health reform occurs in any country. Lessons could be learned that apply to others, especially when the reform takes place in a middle-income country such as Mexico, which is neither so large nor so wealthy as to render its achievements inapplicable to others.

Although the reform programme in Mexico's health system has many components, the centerpiece is a new insurance scheme—the *Seguro Popular*—that subsidises an explicit set of health interventions funded by contributions from national and state governments, as well as the individual family.^{1,2} The funding is progressive, so that the family burden increases with income, neatly balancing social commitment with individual responsibility for payment.

Mexico's reform makes universal coverage the driving force, accepting the concomitant need to restrict the number of services covered by the insurance scheme. This emphasis on universality fulfills the ideals expressed in the revolution that created modern Mexico more than 80 years ago and in the adoption more than 20 years ago of a provision in the Mexican constitution that declares health care to be a human right.³ This choice is also consistent with evidence about the comparative value of different health interventions in the population.

However, by establishing the principle of universal coverage first, and cleverly protecting separate funds for preventive and public-health services, Mexico has laid the foundation for progressive enlargement of the services that are covered at a pace that is affordable with rising national incomes and compatible with rising public expectations.

Mexico's insurance programme began in 2004 and aims to encompass the entire uncovered population by 2010. This gradual expansion is largely pragmatic, to allow coverage to be matched by improved service capacity. A gradual expansion also affords the opportunity to learn as you go, to discover the effects of broadened insurance (comparing covered and uncovered regions), and to identify how to deliver services more successfully.

Mexico's reform is based on evidence about domestic health needs and possible improvements gathered over many years. Through social reforms—eg, the welfare programme introduced as *PROGRESA*¹ that offered cash payments to families in exchange for their meeting certain educational, nutritional, and health-care requirements—Mexico has shown a willingness to base policies

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for illustration

Patients await attention in a Mexico City hospital

on evidence, to make mid-course corrections on the basis of evaluation, and to assess the success in meeting long-term goals. As with welfare reform, health reforms in Mexico will outlive the presidential administration that adopted them, a mark of a politically mature democracy.

It will take time to fully assess the effect of the health reforms. Already one can be sure that, for some families, previously neglected needs are now being met. However, as a possible model for others' national policy, much more will need to be judged—eg, the effect on individual health status and on population indicators of health, the net cost of the programme, the efficiency of service

delivery, and the satisfaction of patients. Mexico's reform is a remarkable achievement and dramatic evidence of social progress, while remaining a work in progress.

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I declare that I have no conflict of interest.

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Expertise unusually redefined

Microsoft, on the principle of “If you can't beat 'em, join 'em”, has been cosying up to computer hackers during a conference in Malaysia. No doubt the software giant wishes to do all it can for the security of its new operating system, Vista. Crime prevention makes use of the same approach. If you want fewer burglaries, talk to burglars, and the latest researchers to pursue this line are Claire Nee and Amy Meenaghan from the UK's University of Portsmouth.¹ Interviews with 50 men who had committed at least 20 burglaries in the previous 3 years (over half had done more than 100) revealed a methodical approach to an activity that came as second nature.

Your burglar is therefore a “rational 'expert' agent”. Are we being invited to treat burglary as a candidate for a new profession? Press accounts of these findings see them as indicating that burglars are jolly nice chaps really, who lost their way at an early age. If only this expertise could have been better directed, these men could have been airline pilots, musicians, chess players, or surgeons.² According to Nee and Meenaghan, their male burglars can even multitask, a skill usually claimed uniquely by women. The trouble is, the men were in prison, which is where material for such interviews tends to be found.³ So they were not that skilled. Further damage to any romanticised view of these offenders comes from the high proportion (64% it seems) who had most recently been sentenced not for burglary but for armed robbery and other violent offences.

“[T]he news regarding the vigilance of householders in relation to security issues in our research is not favourable”, say Nee and Meenaghan. In other words, homeowners are still too trusting (or careless). In fact, there is good news because domestic burglary in the UK is on the decline.⁴ Perhaps there is a skill shortage and burglars have all career-switched into operating theatres. How about what the Portsmouth researchers call secondary prevention—ie, reprogramming the persistent offender? Not much hard news in this research, just a few ideas. For example, if the early decisions of these rational criminals are only semiconscious they could be taught to recognise and then over-rule them, and thus mend their ways. Or maybe they play out their “over-learned behaviour” because they are tired or have been cognitively stressed by their girlfriends. Microsoft will have been hoping for more immediately practical help from friendly hackers in Kuala Lumpur.

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I am a Contributing Editor for *The Lancet*.

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