Strengthening the formal healthcare system

Mexico City

Identifying that a lack of access to Community Health Centres posed a significant problem for the citizens of Mexico City, research from the CCD pinpointed an underserved and marginalised district of the city, Iztapalapa. Building a specialised diabetes clinic, in which local residents at the primary care level have access to a whole range of healthcare professionals and specialists, enables locals to have the access to life saving treatment for diabetes comorbidities that they would otherwise need to visit multiple clinics with different doctors for. Patients that have had regular contact with the clinic have seen a considerable reduction in their HbA1C levels, paving the way to better quality of health for the residents of Mexico City.

Local Partners: World Diabetes Foundation and the Mexico City Ministry of Health

Background

As the most populous metropolitan area, Mexico City has found itself in the grips of a diabetes epidemic. In the last two years, more than 2.3 million individuals have been diagnosed with the disease, and as the number of diabetes related deaths grows each year throughout Mexico, the Federal Ministry of Health has been forced to declare a public health emergency. Realising that action was necessary to stem this devastating growth, Mexico was the first signatory to the Cities Changing Diabetes partnership in 2014.

The Cities Changing Diabetes Projection Model shows us that if no action is taken diabetes prevalence will grow from current levels of 15.7% of the population to 22.8% by 2045. The extra 7%, comprising of an additional 2 million individuals with diabetes, would cost Mexico approximately $2 billion more in healthcare expenditure. However, if concerted action is taken now, diabetes prevalence could be limited in the future to 19% of the population, saving upwards of $669 million.
What the city did

CCD’s Rule of Halves Research and Diabetes Vulnerability Assessment revealed that pre-existing socioeconomic vulnerabilities (such as a lack of medical insurance) were exacerbated when people could not engage with healthcare services. Citizens, especially from marginalised areas, are often inhibited by physical distance, high levels of traffic and poor infrastructure for public transportation from accessing local Community Health Clinics. The challenge was therefore what measures could be taken to ensure the greater availability and the distribution of medical resources.

Based on these findings, the CCD partnership in Mexico City focused its efforts on health promoting policy and strengthening the formal health system. A second specialised diabetes clinic was constructed in the most densely populated district identified as one of the most vulnerable by the Diabetes Vulnerability Assessment research, Iztapalapa, in collaboration with the Mexico City Ministry of Health and World Diabetes Foundation. The goal is to implement a city district level diabetes programme in the Iztapalapa district of Mexico City by establishing a specialised clinic and training facility, and through capacity building at primary level.

Established in December 2016, the specialised diabetes clinic and training facility introduced vital diabetes services into an underserved and marginalised district of Mexico City. Attended by 120 doctors, the clinic delivers healthcare as varied as internal medicine, psychology, nephrology, cardiology, dentistry, ophthalmology, podology, diabetes education, nutrition and clinical laboratory tests to patients, all under one roof. This reduces the number of clinics patients need to visit for treatment of comorbidities.

Outcome

The integrated approach adopted by this diabetes specific clinic means that at least 2,000 known cases of diabetes have received improved diabetes care at the specialised clinic, with as many as 14,000 new cases of diabetes detected through screening, awareness activities and referrals. Of the patients that are treated at the clinic, 90% have a family history of diabetes. Yet, in a recent review, it was identified that on average, patients had a reduced level of HbA1C (from 9.3 to 6.7) over a period of five months when engaged with ongoing contact with the Clinic. These achievements have been won because patients attending the clinic have been empowered with the necessary health education to ensure that their families and communities are engaged in working towards diabetes prevention.

What’s next

Continued strong collaboration with and among local city stakeholders to ensure continued commitment to create change. Two more clinics will be opening in Mexico City.

UN Population Division, World Urbanization Prospects: The 2018 Revision