

## Securing a diabetes-free border

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I am pleased to present this special issue of the *Revista Panamericana de Salud Pública/Pan American Journal of Public Health*, which highlights the results from phase I of a prevalence study conducted by the U.S.-Mexico Border Diabetes Prevention and Control Project. It was coordinated by the Pan American Health Organization/World Health Organization (PAHO/WHO) U.S.-Mexico Border Office in collaboration with the U.S. Centers for Disease Control and Prevention (CDC) and the Mexican ministry of health (or *Secretaría de Salud*, SSA). The traditionally unique yet diverse demographic, social, cultural, and political characteristics of the U.S.-Mexico border area made this study particularly challenging. At the beginning of the XXI century, this geographic zone was home to approximately 14 million people spread across the 44 counties and 80 municipalities comprising the six northern Mexican states and four southern states in the United States.

The history of public health enterprise along the U.S.-Mexico border is filled with a series of ambitious events and the development of effective mechanisms propelling binational collaboration. The Project whose work is presented in the following pages is a shining example of how the cohesive, on-the-ground efforts of a binational partnership led to a determination of the prevalence of diabetes, identification of the risk factors, and development of a viable diabetes prevention and control program capable of responding to the specific needs of the border population.

The Project came about because local public health authorities on both sides of the border became alarmed by the disproportionately high morbidity and mortality rates related to diabetes. They became painfully aware of the chronic and debilitating effect this disease was having not only on those living with its effects, but also on families, communities, health services, and local economies. The information emerging at the turn of the 1990—2000 decade pointed to an ever-increasing number of the population presenting with diabetes and other risk factors for chronic diseases. In the United States, public health authorities were concerned by the high prevalence of chronic diseases among the Hispanic population, the country's largest minority group, which had large concentrations living in the southern states. Meanwhile, in Mexico, health authorities were taking note of a similar trend, particularly among communities situated along the northern border. Considering that the U.S.-Mexico border area has a relatively young population with about 25% being under the age of 30, the need to carry out a comprehensive study to better understand and address the situation of diabetes became an imperative.

I am honored that the Pan American Health Organization, through its U.S.-Mexico Border Office in El Paso, Texas, was able to play such a pivotal role in this Project. It is with great pride that I present our readers with this special issue of the *Revista/Journal*, which showcases the work of the numerous researchers who participated in the Project's first phase. On behalf of our Organization, I wish to personally acknowledge the contributions and devotion of the personnel of the more than 130 institutions, including the CDC, SSA, the Paso del Norte Health Foundation, California Endowment, the 10 border states diabetes programs, and the nongovernmental organizations, whose participation and support have made this special issue possible. We hope that the knowledge shared with you in these pages will lead to a renewed and strengthened commitment by governments, the private sector, civil society, and the international community to create the necessary supportive environments, multidisciplinary networks, public policies, and legislation that will put an end to this preventable disease and the incalculable human and economic toll that chronic noncommunicable diseases continue to exact from societies everywhere.

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